Central Saanich Community Services

Bench Donation - Application Form

PLEASE NOTE:
Personal information you provide on this form is collected pursuant to the *Community Charter* and will only be used for accounting purposes and preparing a tax receipt. Your personal information will not be released except in accordance with the *Freedom of Information and Protection of Privacy Act*. Questions about the collection of your personal information may be referred to the District of Central Saanich, Attention: FOI Head, 1903 Mt. Newton Cross Road, Saanichton, BC , V8M 2A9, by phone to (250) 544-4202 or by email to municipalhall@csaanich.ca.

Please complete and return to Central Saanich Community Services, 1903 Mount Newton Cross Road, Saanichton, BC, V8M 2A9, phone: 250-544-4218, email: community.services@csaanich.ca

Donor's Name:_____

Address:_____Postal Code:_____

Phone:_____ Email:_____

Tax Receipt Information As above ___ or:

Name:_____

Address:_____Postal Code:_____

Phone:_____ Email:_____

Bench Type: ☐ County Bench (IPE)$1,500 ☐ Village Bench (cedar)$1,700

☐ Garden Bench (IPE)$2,300

Preferred Location:_____Alternate:_____
Please Note: Confirmation of location is subject to District approval.

Plaque Inscription: (maximum of 3 lines, 30 characters per line)

_____

_____

_____

- I understand that after installation, the bench becomes the property of the District of Central Saanich and is for the use of the general public. I, the donor, will have no obligation or right to maintain or tamper with the donated item or the area immediately surrounding it.
- The municipality will maintain the donation and repair damage. The municipality has the right to move the item to a different location due to any future unforeseen events.
- I understand that the item will remain for 10 years, at which time I will be offered the opportunity to replace the item for an additional 10 years, at a price determined at the time. I will advise the municipality of a change in address to ensure that I can be contacted in ten years time.

_____ _____
Signature Date

Office Use Only
Date Received: _____
Deposit Amount/Date: _____
Inscription Approved: _____
Locaton Approved: _____
Final Payment _____
Date Bench Ordered: _____

Thank you for your donation!