

Newton Tree Conservancy Community Tree Planting GROUP APPLICATION

www.newtontreeconservancy.org info@newtontreeconservancy.org

(NOTE: This application is for groups of five or more homeowners, requesting eight or more trees in total.)

Group/Street Name _____

A) Find a leader and alternate leader.

Please select a Leader, as well as an Alternate Leader (in case the Leader is not available), to be the main contact person for Newton Tree Conservancy, to organize participants and keep them informed for planting day, and ensure that participants care for their trees:

Leader Name _____

Alternate Leader Name _____

Address _____

Address _____

Village/ZIP _____

Village/ZIP _____

Email (req'd) _____

Email (req'd) _____

Phone (home) _____

Phone (home) _____

(work) _____

(work) _____

(cell) _____

(cell) _____

B) Locate desired planting locations in your neighborhood.

Find at least five properties that each need at least one tree, whose owners wish to participate, preferably within a one- to three-block area. (Preference will be given to compact groups.) Please ensure that each participant reads and understands the requirements, and supply the following information on the attached forms (*Attachment 1-Summary*, and *Attachment 2-Supporting Detail*):

- 1) Resident name, address, and contact info (preferred phone #, and email)
- 2) Non-resident Owner (if any) and contact info, and whether you have received the non-resident Owner's permission to plant.
- 3) Planter (at least one person per property must be available to help on Planting Day). At least three planters per group should attend Tree Planting training.
- 4) Caretaker (person who has agreed to water the tree weekly for two years, and keep mulch weeded). This will probably be the Resident, but can also be a relative or neighbor, for example, in the case of an elderly resident or absentee landlord.
- 5) Maximum number of trees the property owner would like on their berm(s).
- 6) For corner lots, which side(s) of the property the owner would like a tree.
- 7) For each property, a map indicating desired planting spots (and areas where a tree is *not* desired, if any).

C) Please provide the following additional information:

1) How did you hear about the Community Tree Planting program? (check all that apply)

Tab Other newspaper (which one?) _____

Brochure (where did you find it?) _____

From a friend or neighbor From a Newton Tree Conservancy member Email

Newton Tree Conservancy website Other _____

2) Have you applied before? Yes No If so, when? _____

(continued)

3) Have you asked everyone within the range of your planting spots whether they would like to participate? Yes No

Please note any addresses with empty spots whose owners declined to participate, and reason given, if any: _____

Please note any addresses with potential planting spots whose owners you were unable to contact: _____

4) Does your group wish to be considered for:
 Spring planting only Fall planting only Either spring or fall planting

5) Will additional people beside those listed on the Attachment 2 forms be available to help plant trees? Yes No

If so, who? _____

Group Leader (Print Name) _____

Signature _____

Date _____

Please keep a copy of your application for your records, and send the original, including maps, as well as a copy of any flyer or letter you distributed to your neighbors to invite participation, to:

Newton Tree Conservancy
c/o Katherine Howard, President
84 Fenwick Rd.
Newton, MA 02468

In addition, please email info@newtontreeconservancy.org with "Group application for [street] mailed" in the subject line, so that we know to expect it.

If you wish, you may submit the entire application by email as a PDF attachment.

Newton Tree Conservancy Community Tree Planting GROUP APPLICATION – Attachment 2-Supporting Detail

Street Address: _____

Resident/Owner: _____

Phone _____

e-mail* _____

Number of trees requested _____ Which side (for corner lot)? _____

Non-resident owner (if applicable) _____

Has non-resident owner consented to have tree planted? _____

Contact info _____

Planter (person who will be available to help on planting day, a Saturday morning in mid- to late-April for Spring, or mid-November for Fall planting)

Name _____

Phone _____

e-mail* _____

Signature _____ Date _____

Caretaker (person who will fill watering bag weekly for two years and keep mulch area weeded)

Name _____

Phone _____

e-mail* _____

Signature _____ Date _____

***NOTE:** An email address is required for each participant in order to facilitate future updates on planting day plans, watering and other tree health issues. If you have no email, you may use that of a friend, relative or neighbor who is willing to forward you the information.

To be completed by Resident/Owner:

Are you a Newton Tree Conservancy member? Yes No

Do you anticipate any road, sidewalk or curb reconstruction, or driveway widening?

Do you know of any recent or planned underground utility repair work (gas, water, sewer)?

Are you aware of any natural gas leaks near your property, or have you smelled gas? Has the leak been reported to National Grid, and if so, what was their response?

Note any special circumstances that should be considered in placement of trees (e.g., sidewalk snow-plowing route, vehicles parking on berm, trucks backing up, limited space for trash/recycling containers, etc.)

(Required) Attach a rough sketch of your property indicating suggested planting spots on berm, relative to driveway, front walk, etc., and X out any areas where you do NOT want a tree. This may be a hand sketch, or you may make notes on a printout from the City of Newton Real Property Database: <http://assessing.newtonma.gov/NewtonMAWebApp/>

Signature _____ Date _____