

City of Owatonna Parks and Recreation Department

Memorial Donation Agreement/Order Form

Donor Name: _____

Donor Organization (if applicable): _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Park for Donation: _____

Proposed Location: _____

Item:

_____	6' Courtyard Bench with Plaque	\$ 1,200.00
_____	6' Stix Bench (*plaque additional)	\$ 1,650.00
_____	6' ADA Picnic Table with Plaque	\$ 650.00
_____	6' Picnic Table with Plaque	\$ 525.00
_____	Trash Receptacle (*plaque additional)	\$ 675.00
_____	ADA Drinking Fountain with Plaque	\$ 2,750.00
_____	ADA Drinking Fountain with Pet Fountain and Plaque	\$ 3,650.00
_____	Pet Waste Station (*plaque additional)	\$ 180.00
_____	ADA Park Grill (*plaque additional)	\$ 375.00
_____	Bike Repair Station (*plaque, air pump additional)	\$ 1,200.00
_____	Landscaping	\$ varies
_____	Dog Park Amenity	\$ varies
_____	*Ground installed plaque	\$ 75.00
_____	Other request: _____	\$

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