

City of Depoe Bay
P.O. Box 8
Depoe Bay, OR 97341
PH: 541-765-2361, FAX: 541-765-2129

MEMORIAL BENCH ORDER FORM

Name: _____

Mailing Address: _____

Phone: _____ Fax: _____

Plaque Wording (plaques are 2" x 10", typical inscription is 3 lines of wording with up to 48 characters/spaces per line, variations are possible but must be submitted to manufacturer for approval) Please Print Clearly:

Preferred Bench Location Site (see enclosed listing and map for locations identified by city) All locations requested are considered and accommodated if possible.

The Depoe Bay Parks Commission reviews all plaque wording and requested location of bench. The commission decides where the bench will be placed. Person ordering is responsible for correctness of plaque wording. The City does not issue refunds for any errors made on form.

Make check payable to: City of Depoe Bay

Signature: _____ Date: _____

For Office Use Only:

Amount Received _____ Receipt # _____ Date _____

Parks Commission Review (Date) _____

Approved Location _____

Bench Order Date _____ Placement Date _____