



Due on or before November 29<sup>th</sup>

Return by email, [renglehorn@cityofflorence.com](mailto:renglehorn@cityofflorence.com), or 324 West Evans Street, 2nd floor

For any questions contact Rick Englehorn at 843-665-2047 ext. 1083

Preliminary Application

Your Name: \_\_\_\_\_

Group or organization name: \_\_\_\_\_

Address: \_\_\_\_\_

Group or organization's purpose/mission: \_\_\_\_\_

\_\_\_\_\_

Names and contact information for 2 leaders on this garden project: \_\_\_\_\_

\_\_\_\_\_

Who will use the garden? \_\_\_\_\_

\_\_\_\_\_

How will this garden benefit the neighborhood/community/school community? \_\_\_\_\_

\_\_\_\_\_

How will nutrition education be addressed? \_\_\_\_\_

\_\_\_\_\_

Proposed location (if you have one): (street address or street and cross streets or a map)

\_\_\_\_\_

Property owner: \_\_\_\_\_

Do you already have property owner's permission to use the space? \_\_\_\_\_

Have you been a part of a community garden before? If so, please explain your involvement.

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Have you managed a group of volunteers before? Yes/No      If yes, please describe.

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