



Long Hill Township Shade Tree Commission

Challenge Grant Program Application

Date: _____

Applicant Name: _____

Applicant Address: _____

Lot and Block # of Property: _____

Phone: _____

e-mail address: _____

Number of Trees Requested: _____
(2 trees max per property)

Amount of Check: _____
(\$200 per tree)

Please make check payable to: Long Hill Township

Add notation on check: Challenge Grant Program

A member of the Shade Tree Commission will contact the applicant to schedule a time to meet the homeowner and locate the tree(s) on the property. The Shade Tree Commission reserves the right to make the final decision on the location.

The property owner will be responsible for watering, general maintenance and care of the tree(s).

The property owner does hereby release the Township, its agents and employees, from all liability in connection with any claims for personal injury or property damage arising out of the planting of any trees by the Township. The Township disclaims all warranties, express or implied, including any implied warranties or merchantability or fitness for a particular purpose, and the trees are sold "as is".

Applicant Signature: _____ Date: _____