

## **ATTACHMENT VIII**

### **TreeVitalize Recognition Signage Application**

**Please Print Clearly**

#### **Signage Information:**

1. Name of Municipality: \_\_\_\_\_  
2. Name of Metro Partner: Lackawanna Heritage Valley Authority

**Number of Signs:** (minimum of two required for street tree plantings, one for park plantings):

Number of signs \_\_\_\_\_ X \$60 each = \$ \_\_\_\_\_  
Shipping Fee (\$10 for every 2 signs ordered) = \$ \_\_\_\_\_  
**Total Payment Due** \$ \_\_\_\_\_

#### **Shipping Information:**

Project Coordinator: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

#### **Payment Information:**

Please enclose a check, payable to “**Commonwealth of PA**” for the full amount calculated above. Mail this form and the check to:

Penn Nursery  
137 Penn Nursery Road  
Spring Mills, PA 16875-5152