



GROWING GARDENS

OFFICE USE ONLY	Garden Bed Type	<input type="checkbox"/> IG	<input type="checkbox"/> DA	<input type="checkbox"/> GA
Date Received	_____		Date Entered	_____
Landlord Permission	_____		Install	_____
Site Visit/Lead Test	_____		Results	_____

Application for the Home Gardens Program

Growing Gardens values your privacy and will make every effort to ensure information provided remains confidential.

_____	_____	_____
First Name	Last Name	Date

_____	_____
Street Address	Apt. #

_____	_____	_____	_____
City	State	Zip	Phone Number

Email

Do you rent or own your home? Rent Own

If renting, your landlord must complete the attached permission form. Your application will not be considered complete until we have received this form.

Permission included. I am sending the permission form separately.

_____	_____
Landlord Name	Phone Number

_____	_____	_____	_____
Address	City	State	Zip

Verification of Income Eligibility

The Home Gardens program serves low-income individuals and families.

Total number in household (adults, children and seniors) _____

Number of children living at home (17 and under) _____

Number of seniors in the household (65 and older) _____

Total Yearly Household Income *(Please include income for all members of the household.)*

- | | |
|---|---|
| <input type="checkbox"/> 0 to \$22,459 | <input type="checkbox"/> \$54,428 to \$62,419 |
| <input type="checkbox"/> \$22,460 to \$30,451 | <input type="checkbox"/> \$62,420 to \$70,411 |
| <input type="checkbox"/> \$30,452 to \$38,443 | <input type="checkbox"/> \$70,412 to \$78,403 |
| <input type="checkbox"/> \$38,444 to \$46,435 | <input type="checkbox"/> Over \$78,404 _____ |
| <input type="checkbox"/> \$46,436 to \$54,427 | |

What is the primary language spoken at home? _____

How did you hear about Growing Gardens?

- School _____
- Community Event _____
- Friend/Family _____
- Other _____

Out of the four types of gardens offered by Growing Gardens, I would like: *(Please check one)*

- In-Ground Garden:** Our biggest garden, and the type most gardeners receive. We dig two 4x8 foot garden beds (without borders) into the soil, and add compost, minerals and mulch that plants need to grow. We build these gardens in fall and spring.
- Community Garden Plot:** Growing Gardens can refer you to the closest community garden and assist you with the application process. Community garden plots are subject to availability. We will amend the soil as needed with compost.
- Grow Anywhere Containers:** Designed for apartment residents and others who don't have yard space for an in-ground garden. We provide five-gallon plastic containers filled with a soil mix. You can put them on a sunny balcony, driveway or patio. We deliver container gardens in spring.
- Disabled Accessible Raised Garden*:** One 4x8 foot, 2 foot high wood-framed raised bed with a bench around the edge, so you can work sitting down. *We only build this type of garden for Gardeners who have a physical disability or other health issue that prevents them from using an in-ground garden. We build disabled accessible gardens in spring.*

**There is a longer wait-list for disabled accessible raised garden beds, due to limited resources.*

- Please check if you are physically unable to garden in an in-ground garden bed.**
Please explain your accessibility needs below:

Please tell us why you would like to be in the Home Gardens program:

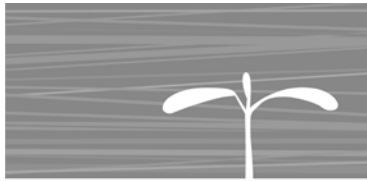
I certify that all of the information above is true and correct.

SIGNATURE OF APPLICANT

DATE SIGNED

Please return the application to:

Growing Gardens
2203 NE Oregon Street
Portland, OR 97232



GROWING GARDENS

Landlord Permission Form

Dear landlord/property manager,

Growing Gardens is a Portland area non-profit dedicated to helping people grow their own food. Our Home Gardens program works with individuals and families to build vegetable gardens, providing three years of free supplies, classes, and mentorship.

I am writing today to ask for your support in helping us build healthy communities. One of your tenants, _____ living at _____ has applied to be part of our program. We require written landlord permission in order to install garden bed(s) (see types below).

If you would like to grant permission for garden bed(s) to be installed at your property, please initial and sign the form below and return to 2203 NE Oregon St. Portland, OR 97232. Please do not hesitate to call if you have any questions.

Sincerely,

Emily Keeler
Home Gardens Manager

Please initial all that apply:

_____ I agree to the installation of one 4'x8'x36" disabled accessible garden box.

_____ I agree to the installation of two 4'x 8' in-ground garden beds.

_____ I agree to the installation of three to five 5-gallon garden containers.

As the landlord/property manager of _____, I represent that I have the authority to initial and sign this Letter of Permission authorizing the garden installation by Growing Gardens.

Printed Name

Signature

Date