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Part 1: CONTACT INFORMATION

Applications to the Allegheny Grows program must be submitted by an organized, neighborhood-based group, such as a non-profit, community development corporation, neighborhood association/watch group, educational or local government entity. Partnerships among multiple organizations are encouraged, but not required. If multiple organizations are involved, please designate a primary contact person below.

Primary Contact Person

Name: _____

Organization: _____

Mailing Address: _____ City: _____ ZIP: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

E-mail Address: _____

Municipal Contact Person

Name: _____

Organization: _____

Mailing Address: _____ City: _____ ZIP: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

E-mail Address: _____

Additional Contact Person

Name: _____

Organization: _____

Mailing Address: _____ City: _____ ZIP: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

E-mail Address: _____

Part 2: ORGANIZATION INFORMATION

When was your organization formed? _____

How many members belong to your organization? _____

How is membership defined by your organization (i.e. dues, participation requirements, etc.)?_____

_____

_____

Within the past year, how many community-wide events (i.e. block parties, community clean-ups, etc.) has your organization sponsored? _____

On average, how many volunteers have supported an event like the ones described above? _____

Please list the names of partnering organizations who have agreed to commit their time, energy and other resources to the community garden. Please indicate specifically *how much* each organization plans to contribute (i.e. hours of skilled or unskilled labor, in-kind donations, etc.):

1) _____
2) _____
3) _____
4) _____
5) _____

Please list any matching funds you have solicited for this project. Please indicate which funds are "pending" and "confirmed":

1) _____
2) _____
3) _____
4) _____
5) _____

Please list the names of additional community organizations that you plan to reach out to for support:

1) _____
2) _____
3) _____
4) _____
5) _____

Part 3: GARDEN SITE INFORMATION

Garden site address or map-block-lot numbers: _____

City: _____ ZIP: _____ Census Tract: _____

If you are unsure of your Census Tract, go to: http://tinyurl.com/hd4p

Approximate site dimensions (please include units of measurement): Length _____ Width _____

Land use of abutting properties (please check all that apply):

Commercial ☐ Residential ☐ Vacant ☐

Do you own the garden site property? Yes ☐ No ☐

If not, please provide the owner's contact information below, if available:

Owner's Name: _____ Phone Number: _____

To verify ownership of the garden site property, visit the Allegheny County Real Estate website at: http://www2.county.allegheny.pa.us/realestate/Default.aspx

The property is owned by a: Public agency ☐ Non-profit organization ☐ ☐ Other: _____

Has the garden site been tested for lead contamination? Yes ☐ No ☐

If yes, when was the test taken? _____

Does the property have a municipal water source on site? Yes ☐ No ☐

If no, please describe: _____

Which of the following characterizes the slope of the garden site? (Please check all that apply.)

Flat terrain (0-5% slope) ☐ Gradual (5-10% slope) ☐ Moderate (10-20% slope) ☐

Does 90% of the property receive at least six hours of sunlight? Yes ☐ No ☐

Has illegal dumping occurred on the site? Yes ☐ No ☐

Was the site ever occupied by a factory, mechanic shop or gas station? Yes ☐ No ☐

Are there tall weeds/growth on the site? Yes ☐ No ☐

Can you identify knotweed, kudzu, or other invasive plants on the site? Yes ☐ No ☐

Is the property topped with concrete, asphalt, or shale? Yes ☐ No ☐

If yes, please describe: _____

Please describe rubble characteristics (i.e. brick coverage, building foundations, unevenness, sink holes, etc.): _____

_____

Please provide any other known information about the site's history (i.e. previous uses, contamination, etc.):

_____

_____

Who currently uses the site and for what purpose(s)? _____

_____

What type of community garden do you envision on the site? (Please check all that apply.)

Individual plots ☐ Community farm ☐ Both ☐

Part 4: EVIDENCE OF SUPPORT

1) Please submit a letter of support from each of the following entities:
   - ☐ Municipality—required
   - ☐ Garden site property owner—required
   - ☐ Other supporting organizations—optional*
2) Please submit a petition signed by neighboring residents and business owners who are in favor of the garden.
3) Please submit a list of potential participants who are willing to help establish and maintain the garden.

*These may include community and economic development organizations, afterschool and summer programs, Scouting Troops and other civic organizations that are willing to contribute to the garden.

Part 5: AGREEMENTS & EXPECTATIONS

If selected to participate in the Allegheny Grows Program, I agree to:

- ☐ Contribute to a minimum of four planning sessions
- ☐ Recruit two community representatives to attend the Garden Primer Class series
- ☐ Cooperate with ACED and partner organizations to realize my organization's vision for a community garden
- ☐ Enter into a site access and land use agreement with Grow Pittsburgh—see sample (attached)
- ☐ Cultivate vegetables at the garden site for at least five years
- ☐ Weigh and record garden produce yields according to program guidelines

Signature_____ Date_____

Please postmark or submit completed application materials by 4:30PM on Friday, September 30, 2011 to:

Mail: Iris Whitworth
Allegheny County Economic Development
425 Sixth Avenue, Suite 800
Pittsburgh, PA 15219

Email: **iris.whitworth@alleghenycounty.us**

Fax: 412.642.2217