



PO Box 3104
BINGHAMTON, NY 13902
607-205-8108
www.vinesgardens.org

VINES COMMUNITY GARDEN PROPOSAL

Applications will be reviewed by VINES' Community Garden Committee which is comprised of: VINES Staff, VINES Board Members and Current Site Coordinators and Community Garden Members. The committee will review and score your garden proposal using the outlined criteria. Applications will be reviewed on the basis of six key elements: Lot Details, Demonstrated Leadership, Neighborhood Support, Community Need, Cost, and Vision. *A list of Frequently Asked Questions (FAQs) can be found at vinesgardens.org*

CONTACT INFORMATION

GARDEN ADVOCATE CONTACT:

Name Click or tap here to enter text. **Phone** Click or tap here to enter text.

Address Click or tap here to enter text.

Email Click or tap here to enter text.

Are you currently or have you been involved with VINES in the past? yes no

If yes, in what capacity: volunteer gardener programming/workshops
 attended events other Click or tap here to enter text.

Would you like to be the site coordinator? yes no someone else

If someone else, please provide name and contact information below:

CO-COORDINATOR CONTACT:

Name Click or tap here to enter text. **Phone** Click or tap here to enter text.

Address Click or tap here to enter text.

Email Click or tap here to enter text.

CO-COORDINATOR CONTACT:

Name Click or tap here to enter text. **Phone** Click or tap here to enter text.

Address Click or tap here to enter text.

Email Click or tap here to enter text.

Number of people involved in the proposal writing and design process: Click or tap here to enter text.

SITE CONTROL & LOT DETAILS

Site Owner Click or tap here to enter text.

Address Click or tap here to enter text.

Adjacent Streets Click or tap here to enter text.

Lot Dimensions Click or tap here to enter text.

Square Footage of Property Click or tap here to enter text.

What percentage of the lot will be the community garden? Click or tap here to enter text.

Is the following on site? Water: yes no

If yes, is water: at curb? outside spigot?

Explain Click or tap here to enter text.

Are there any structures (example: house, garage, shed, trees) that would need to be removed for the construction of the garden? yes no

If yes, please describe structures Click or tap here to enter text.

Are there a minimum of 6 hours' full sun on the majority of the lot: yes no

Are you aware of any site history that may affect an environmental assessment (ex: laundromat, chemical spills, etc.)? If yes, please list Click or tap here to enter text.

Additional Site Information: Click or tap here to enter text.



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OUTREACH	Have you conducted community outreach: <input type="checkbox"/> yes <input type="checkbox"/> no
	Please indicate number of interested individuals from outreach: _____
DEMONSTRATED LEADERSHIP	Have you attached or submitted outreach documentation <input type="checkbox"/> yes <input type="checkbox"/> no
	Additional Notes: Click or tap here to enter text.
NEIGHBORHOOD SUPPORT	Why do you want to start a community garden and how do you plan to be involved in the future? Click or tap here to enter text.
	Are any local community members, organizations or businesses interested in or committed to sponsoring the community garden <input type="checkbox"/> yes <input type="checkbox"/> no
	Identify interested community members such as businesses, neighboring property owners, etc. List any potential partnerships, garden sponsors, etc. Click or tap here to enter text.



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	<p>A key element of VINES' programming is to build community and work collaboratively in the community. What other ideas do you have for integrating the community, building support and building community around the garden?</p> <p>Click or tap here to enter text.</p>
COMMUNITY NEED	<p>How will this project address the community's need for access to food?</p> <p>Click or tap here to enter text.</p>
	<p>Based on outreach, describe the typical garden members' commute to the proposed garden site. What proportion of gardeners do you suspect will walk or bike versus drive a vehicle?</p> <p>Click or tap here to enter text.</p>
	<p>Is there vehicle parking available within 30 feet of the garden? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>Additional Site Information:</p> <p>Click or tap here to enter text.</p>



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GARDEN COST

Have you completed and attached VINES CG Build Budget Draft: yes no

Number of Proposed Garden Beds _____ Includes: Standard Raised Beds

Handicap Accessible Beds Other [Click or tap here to enter text.](#)

Describe additional fundraising capacity or fundraising ideas to support this project.

[Click or tap here to enter text.](#)

COMMUNITY GARDEN VISION

What is your vision for the garden? *Example: number of beds, aesthetic, design elements, garden theme or focus, etc.* Please attach a drawing or rendering of your vision for this garden space.

[Click or tap here to enter text.](#)



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OTHER

Is there anything else you'd like to add or let VINES know?

Click or tap here to enter text.

Please remember to attach the following, as requested in the proposal application:

Outreach Documentation Budget Draft Drawing of Garden Vision

Print Name of Garden Advocate Click or tap here to enter text.

Signature _____ **DATE** Click or tap to enter a date.