



**Garden Maintenance Application**

PLEASE ANSWER ALL QUESTIONS.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone number: \_\_\_\_\_

How many people currently reside at this property? \_\_\_\_\_

Please tick **one** of the following, are you a:

- GHA Tenant  Owner Occupier   
 Private Tenant  RSL (Registered Social Landlord) Tenant

Please list everyone who lives in your household, including yourself:

Title	Forename	Surname	Age	Date of birth

Are all the above residents who are between 16 & 69 years unable to maintain the garden as a direct result of a permanent medical condition? **Yes**  **No**

Are they in receipt of at least one of the following; Blue Badge, Registered blind or Disability Living Allowance? **Yes**  **No**

**Please attach official confirmation of the above**

Are you a registered council tax payer? **Yes**  **No**

Note: - If at any future time Glasgow City Council find that the information supplied on the application form was fraudulent then the applicant will be liable for all maintenance costs that have occurred. If any information on this form is incorrect please contact 0141 287 5064.

**DECLARATION**

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

I declare that the information given in this application is true and accurate. I hereby give authority to the Executive Director of Land and Environmental Services to alter the garden layout and design for ease of maintenance if so required. I undertake to inform Glasgow City Council of any changes in my circumstances.