



# Town of North Hempstead 2024 Native Plant Residential Rebate Program Application



## Applicant Information

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

Email: \_\_\_\_\_

Project Street Address: \_\_\_\_\_

City, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Are you a new applicant or repeat applicant? \_\_\_\_\_

## Project Information

Use the 'Preparing, Designing and Maintaining Your Native Plant Garden' document for assistance with answering these questions. Please see the 'Terms and Conditions' document for all details on the program, including requirements and recommendations in designing your garden.

*Type of Garden (Rain Garden or Native Plant Garden):* \_\_\_\_\_

*Will you be creating a new garden space or adding plants to an existing garden?*

New Garden                       Adding plants to existing garden

*If you will be creating a new garden, will you be replacing lawn grass/turf with your garden?*

Yes                       No

**Purpose of Garden.** Why do you want to create your rain or native plant garden? Please provide a brief description (1 or 2 sentences) on what you hope to accomplish with your garden.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Garden Dimensions** (For example 10 ft x 10 ft= 100 square feet) Your garden must be a minimum of 50 square feet total to meet reimbursement requirement.

\_\_\_\_\_ = \_\_\_\_\_ square feet

**Garden Location.** Include if garden is in front or back yard and relation to house or other structures ex. In front of house along the path.

\_\_\_\_\_

**Garden Conditions.** Which of the following best describes your sun conditions, soil type and soil moisture? If you are planting multiple gardens, please explain which gardens have which conditions.

Light:             Full sun                       Part sun             Part shade             Shade

Soil Type:        Sandy                       Loam                       Clay

Soil Moisture:  Dry                               Average                       Wet

Additional Details: \_\_\_\_\_

***Invasive Species Removal*** - Will you be removing invasive plants before planting your garden? If yes, please explain. See webpage for information on invasive species: <https://northhempsteadny.gov/invasive>

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***Native Plants List*** - Please provide a list of all the native plants you plan to use in your garden and the number of each. Include common and botanical/scientific names as in the example below. This list may change based on purchasing availability. See 'Native Plant List' document for information on plants and to determine what plants will be reimbursable.

***Follow this example:***

Butterfly weed (*Asclepias tuberosa*)- 10 plants

Switchgrass (*Panicum virgatum*)- 12 plants

Flowering Perennials- must have 3 or more plants of each plant species/type

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Grasses/ Sedges/ Rushes- must have 3 or more plants of each plant species/type

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Trees and Shrubs

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Ferns- must have 3 or more plants of each plant species/type

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

***How much money are you applying for? The maximum amount you can apply for is \$350.*** Utilize your plant list as well as research on plant costs to determine the total budget needed. **Do not purchase plants until your application has been approved.**

\$ \_\_\_\_\_

**Basic Garden Layout** - At minimum you must provide the shape of your garden, the size/dimensions of your garden and the location of each plant type. See 'Preparing, Designing and Maintaining Your Native Plant Garden' document for information on how to create this.

**Required Attachments- make sure to include the following documents when submitting this completed application**

- Proof of residency in the Town of North Hempstead
- Photograph(s) of proposed garden location (include aerial image if possible)
- Basic garden layout

**Declaration**

I have read and agree to all information provided in the document entitled 'Town of North Hempstead Native Plant Residential Rebate Program 2024 Terms and Conditions' and certify that the information provided in and with this application is true and correct. This must be signed for application to be complete.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please send completed application and all attachments to:**

**Email (preferred):**

[Sustain@northhempsteadny.gov](mailto:Sustain@northhempsteadny.gov)

**Mail:**

Town of North Hempstead  
Department of Planning and Environmental Protection  
210 Plandome Road  
Manhasset, NY 11030  
Attn: Meagan Fastuca