



## VETERAN'S MARKER REQUEST FORM

Name and War (if applicable) for Marker: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Requestor's Address (*proof of residency required*): \_\_\_\_\_

Requestor's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Person on Marker (*I hereby attest that I am related to this person by blood or marriage*): \_\_\_\_\_

### Eligibility requirements for requesting a Veterans Marker:

- A. Person being honored must be deceased;**
- B. Person being honored must have served in the United States Armed Forces from the period of WWI to present day, but not necessarily in conflict; For proof, visit <http://vetrecs.archives.gov/>**
- C. Person requesting marker must live within the corporate city limits of Duluth.**
- D. There is a lifetime limit of five requests per person. This is my \_\_\_\_\_ request.**

- I understand that this marker will be placed where the City deems appropriate and that I may not request special placement.
- I understand and agree that if I physically modify, relocate or otherwise alter the appearance or location of the marker, the marker may no longer be displayed and I may forfeit my ability to make future application.
- I understand and agree that markers will only be made and displayed for those persons where proof of enlistment or commission in the United States military is provided.
- I understand and agree that displays such as flowers, bows, etc. may be placed on the marker while on display, but any mementoes will be discarded by the City when the marker is placed in storage.

If the Requestor's Application is ineligible based on the requirements above, the Requestor may submit the request to the Mayor, City Mgr. or City Council for further consideration.

A one-time donation of \$100 is suggested for the initial installation and on-going maintenance of the requested marker(s).

My signature below affirms that I have read the above conditions and that I agree to abide by them and that if I choose not to sign, my marker request WILL NOT be processed.

Requestor's Name: (print) \_\_\_\_\_ Signature \_\_\_\_\_