



# Town of Riverhead

## Adopt-A-Park

Parks Office – 55 Columbus Avenue Riverhead NY 11901

[schandel@townofriverheadny.gov](mailto:schandel@townofriverheadny.gov)

631-727-3200 x733

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

Group Contact Person: \_\_\_\_\_

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

Park or Beach: \_\_\_\_\_ Date Tools/Supplies Needed: \_\_\_\_\_

### Tool check-out Form

I acknowledge receipt of the following materials and supplies provided by the Town and agree to return all reusable materials and supplies and any unused materials and supplies clean and in good repair to the Parks Office during regular business hours.

Quantity	Item Description

For Office Use Only:

Date Returned: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Condition equipment/Supplies returned: Good/Poor Explain: \_\_\_\_\_

### Supply Request Form

Please complete and return this form if you or your group needs to replace basic supplies or check out additional equipment. (This form should be returned at least 2 WEEKS PRIOR to the date in which you need the supplies.) This form does not replace the Supply Check Out Form that must be signed when supplies are picked up.

Quantity Needed	Item
	Trash Bag(s)
	Garbage Pickers (2)
	Broom (s)
	Rake (s)

Other Supplies Requested: \_\_\_\_\_

Delivery Method: \_\_\_ I can pick up my supplies at the Parks Office

\_\_\_ I would like to schedule a time to meet at my park.