



**Sheffield
LakeOhio**

2026 Resident Garden Program Application

(formerly Community Garden)

Resident & Plot Information Resident Information

Full Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Last Year/Season Gardened with the City (if applicable): _____

Previous Plot Number(s): _____

Current Season Information

Number of Plots Requested: _____ (Maximum of two plots per resident, subject to availability)

Preferred Plot Location (select one): Gary Green Park Freedom Park City Hall Plot Size & Number (list first and second choices for a 4' x 8' plot):

1st Choice: Location & Plot #: _____

2nd Choice: Location & Plot #: _____

Do you plan to plant winter crops (Nov 1 – March 31)? Yes No

Garden Liaison Application (Optional)

Would you like to be considered for the Garden Liaison position? Yes No

If yes, please briefly explain why you would like to serve in this role:

Crop Intentions

Spring/Summer Crops (e.g., Tomatoes, Lettuce, Peppers, Kale, Garlic): _____

Winter Crops (Nov–Mar, if approved): _____

Program Rules & Responsibilities

- * Plots are assigned for one growing season at a time. Gardeners must keep plots maintained and free of weeds.
- * If you must abandon your plot, notify the City immediately.
- * Watering: City will fill troughs at least twice per week; additional watering is the gardener's responsibility.
- * Respect others: Do not harvest from plots not assigned to you.
- * Personal tools are your responsibility.
- * Winter crops must be indicated on application for fall clearance planning.
- * Garden Liaison serves as primary contact between City and gardeners.
- * No use of harmful chemicals, illegal substances, or inappropriate behavior.
- ***Growing marijuana or any illegal plants is strictly prohibited.
- *** City may revoke plot for rule violations.
- * Security: Combination lock will be provided; do not share with unauthorized persons.

Agreement

I agree to abide by the above rules & conditions for participation in the Sheffield Lake Resident Garden Program.

I understand that growing marijuana or any illegal plants in my garden plot is strictly prohibited.

I attest that the information provided is accurate.

Signature: _____ Date: _____

Submit completed form to: City of Sheffield Lake Resident Garden Program Email: CMoore@Sheffieldlake.net or Drop off at City Hall: 609 Harris Rd Questions? Contact the Garden Liaison at 440-949-7141 or [\[CMoore@Sheffieldlake.net\]](mailto:CMoore@Sheffieldlake.net)(mailto:CMoore@Sheffieldlake.net)