BOROUGH OF WEST WILDWOOD

MEMORIAL BRICK PAVER APPLICATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

ORDER INFORMATION

Amount per brick 4” x 8” $200 x _____ total $ _____

Amount per brick 6” x 9” $300 x _____ total $ _____

Add a symbol $10 x _____ total $ _____

4x8 Bricks may contain 3 lines with a maximum of 13 characters per line.

8x8 Bricks may contain 5 lines with a maximum of 13 characters per line.

Note: Commas, periods & spaces count as a character. *****Please write legible & in ink.

BRICK #1

__/__/__/__/__/__/__/__/__/__/__/__/__/

__/__/__/__/__/__/__/__/__/__/__/__/__/

__/__/__/__/__/__/__/__/__/__/__/__/__/

BRICK # 2

__/__/__/__/__/__/__/__/__/__/__/__/__/

__/__/__/__/__/__/__/__/__/__/__/__/__/

__/__/__/__/__/__/__/__/__/__/__/__/__/

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Please make checks payable to:
Borough of West Wildwood
Please mail check & order form to:
Borough of West Wildwood
701 West Glenwood Ave
West Wildwood, NJ 08260
Attn: Brick Paver Application
Deadline: For Fall Installations is June and for Spring Installations is December