

Annual Lewistown Downtown Parklet Application, Care, and Maintenance Agreement

Applicant Name: _____

Contact Phone / Email: _____

Requested Parklet Location: _____ Application Date: _____

Thank you for your interest in hosting the Lewistown Downtown Parklet at your business location.
If you are granted the Parklet for half of the **2026** season, you agree to the following:

Agreement

I, _____, hereby agree to abide by all regulations set forth by the Lewistown Downtown Association (LDA) and the City of Lewistown, as outlined below.

PARKLETS ARE PUBLIC SPACE

- The applicant agrees to keep the Parklet free and open to all members of the public.
- No signage is permitted on the Parklet. Minimal décor or supplies are allowed as long as it does not interfere with the Parklet's intended use or accessibility.

DAILY SUPPORT REQUIREMENTS

- Secure and store all movable items (tables, chairs, umbrellas) overnight or when the business is closed.
- Sweep the Parklet surface and surrounding area.
- Clean the Parklet platform, seating, railings, and tables.
- Purchase, water, and maintain all Parklet flowers. If shared between two locations, flower costs will be split equally.
- Remove all trash from the Parklet.
- Report vandalism immediately to the **Police Department (406-535-1800)**, **City Office (406-535-1760)**, and **LDA (406-570-2518)**.
- Submit written repair requests for failing Parklet components to the **City Office (406-535-1760)**.

WEEKLY SUPPORT REQUIREMENTS

- Rinse the area underneath the Parklet.
- Remove debris around the Parklet to ensure proper drainage.
- Provide pest control as needed.

ADDITIONAL REQUIREMENTS

- Applicants will be notified of Parklet placement decisions no later than May 15 of each year.
- **Completed applications may be submitted in one of the following ways:**
 - **Drop off or mail:**
Lewistown City Office
Attn: City Manager
305 W Watson Street, Suite 3
Lewistown, MT
 - **Email:** cityoffice@ci.lewistown.mt.us

Applicant Signature: _____ Date: _____

Business Name: _____

For Office Use Only

Approved: ☐ Disapproved: ☐ Date: _____

Assigned Parklet Dates: _____

Holly Phelps
Lewistown City Manager



Amber Love Davis
LDA Parklet Committee Chair

