

Healthy Landscapes: Clean Water Starts at Home
University of Rhode Island Cooperative Extension Home*A*Syst and GreenShare
Programs

Town of North Kingstown Demonstration Site Questionnaire

1. What is the **Name** (s) of property owner(s)? _____
2. What is the **Address of the Property** (Street, Town, Zip Code)?

3. What is the **Mailing address** of property owner(s) if different from above:

4. What is your:
 ***Telephone number** (s) _____
 ***email address** _____
5. If there is a **Caretaker or Manager**, what is their **Telephone number**? _____
6. What is the **Total Acreage** of the property (including house and buildings)? _____
7. Are you on **Town Water** _____ or a **Private Well** _____ (check one or both)
8. Are there any **Surface Water Resources** (pond, wetland, stream, coastline, etc.) on or immediately abutting the property? **Yes** _____ **No** _____

If so, please identify them _____

9. Approximately how much **Area** is maintained in **Lawn and Garden** (square feet)? _____
10. Please identify the use of any **Remaining Property Acreage** (i.e. woodland, pasture or corral areas, meadow, field reverting to shrubs and trees, recreational areas, etc.)

11. Do you have any **Pets**?
 * If so, **How many** _____
 * Do they remain primarily **Indoors** _____ **Outdoors** _____

12. Do you have any **Domestic or Exotic Large Animals** (horses, donkeys, cows, sheep, goats, pigs, poultry, llamas, emus, etc.). **Yes** _____ **No** _____

* If so, please identify the type and number of each.

a) _____ # d) _____ #
b) _____ # e) _____ #
c) _____ # f) _____ #

13. Is your Landscaping currently performed by a: (please select all that apply)

- * **Professional Landscaper** _____
- * Other non Professional (Student, Neighbor, etc.) _____
- * Do your own landscaping _____
- * Other (please explain) _____

14. Are their specific **Landscape Protection Issues** that you would like to address with this opportunity?

15. Are there any **Special Concerns** in allowing limited, supervised public access to your property? (Locked gates, guard dogs, security systems, hazards, etc.)

16. What is the best time to contact you?

17. Best time and day of the week to arrange for a site visit of your property?

Time _____

Day _____

For the final sites selected, the property owners will be asked to sign an agreement acknowledging the need and allowing for limited, supervised public access; maintaining the practices for the duration of the project.

THANK YOU FOR YOUR INTEREST IN THIS IMPORTANT PROJECT!

