

Village of Norridge
4000 N. Olcott
Norridge, Il 60706

Date _____

Public Sidewalk Reimbursement Application

I am requesting reimbursement for public walk replaced at:

Number of square feet of sidewalk replaced _____

@ Current rate of \$2.50 per square foot = _____

Documents required for Reimbursement:

MATERIAL WAIVER OF LIEN

RECEIPT marked "PAID"

Signature: _____

THE APPLICANT IS RESPONSIBLE FOR SOD OR GRASS REPLACEMENT

The Village is *not* responsible for repairs or relocation of sprinkler heads or lines.

PRINT Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____