

APPLICATION FOR CITY SIDEWALK AND/OR CURBING REPLACEMENT

Location of Project: 709 W. CLINTON ST.

JAMES WULF
Owner Name _____ Address _____

NAPOLÉON 43545 419-906-2230
City Zip Phone

Type of work to be performed: curbing replacement _____ Sidewalk Replacement

Total length of curbing to be replaced _____ Total square footage of sidewalk to be replaced 228 120 sf

Estimated cost \$952.00 \$360.00 @ \$3.00/sf

24' x 5' = 120 sf
AD

It is required that the City approve the replacement of sidewalks and curbing before the work commences

All construction must comply with the latest City of Napoleon Engineering Specifications and/or ODOT specifications, whichever is applicable. Non-compliant work will not be eligible for reimbursement. **Specifications are available upon request.** Inspection is required by the City prior to replacement of concrete and after the work is completed to retain eligibility.

The City will reimburse the owner for sidewalk replacement in the right-of-way at a rate of three dollars (\$3.00) per square foot, if installed in accordance to City specifications. The City will reimburse the owner for curbing replacement in the right-of-way at a rate of forty dollars (\$40.00) per linear foot, **if installed in accordance to City specifications.**

Reimbursement is made to the owner of the property, not the contractor. It is required that the owner provides a paid copy of the invoice from the contractor who performed such work (if applicable).

Name of City registered contractor who performed such work; (If none involved mark "Self")

City Lic.# _____

James Wulf
Signature of Property Owner

8-5-24
Date

This form must be signed by the City Engineer prior to commencement of work in order to be eligible for reimbursement according to the above schedule. Inspection by the City is required prior to placement of concrete and after work is completed. A "WORK IN RIGHT OF WAY" PERMIT IS REQUIRED BEFORE WORK MAY COMMENCE.

This project, as specified above, is hereby approved for construction and is eligible for reimbursement in accordance with the schedule herein. All work must conform to the City of Napoleon specifications.

City Engineer

Date

City Purchase Order Number _____

City Permit Number _____