
SANITARY SEWER GRANT AGREEMENT

THIS AGREEMENT made this 24 day of April, 2008, by and between the City of Napoleon, a Municipal Corporation, 255 West Riverview Avenue, Napoleon, Ohio, (hereinafter referred to as "City") and ROBERT L. DENNIE, (hereafter referred to as "Homeowner").

WHEREAS, Napoleon has initiated a program of construction grants for removing clear water connections from the sanitary sewer system, and

WHEREAS, said grants are for two-thirds (2/3) of construction cost up to a maximum sum of twenty-five hundred dollars (\$2,500.00):

A. In consideration of Homeowner, whose real property is located at 805 STROUG ST. doing the following work at said location: SEPERATION OF STORM & SANITARY SERVICE

City agrees to pay \$ 2,266.51 for such work subject to the following terms and conditions:

1. Homeowner shall produce satisfactory evidence of ownership in said real estate. ✓
2. Homeowner shall produce two (2) written estimates of the construction cost prior to commencement of the work. ✓
3. Homeowner shall contract with MOORE'S PLUMBING & J.L. GLAUZ & SONS, a registered contractor with the City ("Contractor") to perform said work.
4. Homeowner understands and agrees that there is permitted only one (1) grant per property for the lifetime of this program.
5. Homeowner shall permit periodic City inspection of the work being performed by the Contractor.

6. Homeowner agrees that this Agreement shall not be construed as creating a joint venture, partnership, or master-servent relationship; further, the City shall not be considered to have any responsibility whatsoever to Contractor for the payment of Contractor's bills; further, Homeowner shall hold City harmless from the same.

7. Homeowner agrees to hold harmless the City, its officers, agents, employees and volunteers against any and all claims that may arise out of use of any grant funds and/or the performance of inspections being made by the City; further, Homeowner agrees to indemnify the City, its officers, agents, employees and volunteers against any and all claims for injury or damage to person or property that may be asserted by any person as a result of any action or non-action of the City, its officers, agents, employees and volunteers associated or in connection with this Agreement or services provided hereunder.

8. Homeowner shall notify the City of the date the work is to commence and shall provide City with a construction schedule. All Work must be completed no later than JUNE 1, 2008.

9. Homeowner agrees any change in the original estimate amount must be approved in advance by the City if the amount is larger than first estimated.

10. Homeowner agrees that the City shall have thirty (30) days after final inspection of the work and upon the City receiving paid receipts from Homeowner evidencing that the Contractor has been paid in full, whichever comes last, to pay the Homeowner the amount specified in paragraph (A) above.

11. In the event that a new storm sewer and/or sanitary sewer tap is needed in connection with the work, the City will waive the sewer tap fee and will not be counted as part of the amount specified in paragraph (A) above.

12. This Grant Agreement shall only be amended as to the scope and size of the project by attaching hereto a copy of such amendment, in writing.

13. This Agreement is binding on the parties, their heirs or successors and assigns.

14. This Agreement shall be controlled under the laws of Ohio.

Robert L. Sumner
Homeowner

Homeowner

City of Napoleon

Jon A. Bisher
Dr. Jon A. Bisher, City Manager

Approved as to form and correctness:

David M. Grahn
David M. Grahn, City Law Director

* * * * *

Certification of Funds

Attest:

I, Gregory J. Heath, Finance Director of the City of Napoleon, Ohio hereby certify that the money to meet this Agreement has been lawfully appropriated for the purpose of the agreement and is in the treasury of the City of Napoleon, Ohio or is in the process of collection to the credit of the appropriate fund free from prior encumbrance.

Gregory J. Heath
Gregory J. Heath, Finance Director

City of NAPOLEON

SANITARY SEWER GRANT APPLICATION

ORDINANCE 154-01

DATE: 10/25/07

NAME: ROBERT L. DENNIE

ADDRESS: 805 STRONG ST. NAPOLEON

PHONE #: 419-592-2145 CELL #: _____

The Homeowner Grant Program is hereby established for the removal of clean water connections subject to the following rules:

Grants are available for two-thirds (2/3) of the construction cost of removing clean water connections from the sanitary sewer system up to a maximum of two thousand five hundred dollars (\$2,500.00). The grants are available on a first come, first served basis until the funds set aside for the program in a calendar year are completely depleted.

Have you ever applied for this type of grant for the above property before?

YES NO If yes please explain: _____

Are you the owner of the above property? YES NO

If no please explain: _____

A. The City will inspect the premises and provide the homeowner with a description of the scope of the work which would be eligible for the grant **PRIOR** to the homeowner obtaining estimates.

B. At least two (2) written estimates of the construction cost must be submitted to the City. **NO** work may be started until the grant agreement is signed by **BOTH** the homeowner and the City.

C. Contractors must meet the City's normal sewer contractors' registration requirements.

D. Notwithstanding any Ordinance, Resolution or Policy to the contrary, if a new storm sewer and/or sanitary sewer tap is needed in connection with the work, the City will waive the sewer tap fee.

E. The City must be notified of the date work is to begin and of the construction schedule. The City will inspect the work periodically during construction.

F. Any changes in the work from the original estimate must be approved by the City in advance if it results in a larger grant than originally approved.

G. The city will perform a final inspection after completion of all work.

H. Reimbursement will be made by the City to the homeowner based on **PAID** receipts submitted to the City.

I Robert L. Denno have read and fully understand the above and agree to all terms and conditions of this agreement on this day 10/25/07 20 .

Robert L. Denno

Applicants signature

10/25/07

Date

MOORE'S PLUMBING



O-829 County Road 11C
Napoleon, OH 43545
(419) 599-1993

PLUMBING

Work Order

2479

TO: Robert Dennis
805 Strong St
Napoleon Ohio 43545

DATE OF ORDER <u>4-18-08</u>	HOME TELEPHONE <u>572-2145</u>
ORDER TAKEN BY	WORK TELEPHONE
CUSTOMER ORDER NO.	<input type="checkbox"/> DAYWORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA
STARTING DATE	<input type="checkbox"/> OVERTIME <input type="checkbox"/> OTHER
JOB NAME / NO.	
JOB LOCATION	
INVOICE DATE	JOB TELEPHONE

CHECK MARKS DENOTE: <input type="checkbox"/> WORK TO BE DONE <input type="checkbox"/> WORK COMPLETED	TROUBLESHOOT / INSPECT	UNCLOG / CLEAN	REPAIR	RELACE	INSTALL	ROUGH IN	FINISH WORK	TERMS:
								DESCRIPTION OF WORK:
NO HEAT								
NO WATER								
BURST PIPE(S)								
THAW PIPE(S)								
INSULATE PIPE(S)								
BLOCKAGE - WASTE SYSTEM								
KITCHEN								
SINK								
INSTANT HOT								
WATER FILTER								
DISPOSAL								
DISHWASHER								
BATH (1) (2) (3)								
LAVATORY								
WATER CLOSET								
BATHTUB								
SHOWER STALL / HEAD								
WHIRLPOOL / SPA / HOT TUB								
LAUNDRY								
WASHING MACHINE								
FAUCET(S)								
SILL COCK								
SUPPLY LINE(S)								
TRAP(S) / DRAIN(S)								
FILTER(S)								
GATE / BALL VALVE(S)								
WATER LINE(S)								
WELL / WATER PUMP								
PRESSURE TANK								
WATER SOFTENER / COND.								
SUMP / EFFLUENT PUMP								
WATER HEATER								
BOILER - STEAM / HOT WATER								
SAFETY VALVE								
CIRCULATOR								
ZONE VALVE								
BASEBOARD(S) / RADIATOR(S)								
FURNACE								
BURNER								
HEAT PUMP								
AIR CONDITIONER								
WASTE / SEWER LINE(S)								
VENT PIPE(S)								

LABOR	HRS.	RATE	AMOUNT
Run Sump Pump water to Storm Drain			
TOTAL LABOR			
QTY.	MATERIAL	UNIT	AMOUNT
	All parts & Labor		\$75.00

pd ck# 2476
4-24-08

WORK ORDERED BY:	TOTAL MATERIALS
I hereby acknowledge the satisfactory completion of the above described work.	TOTAL LABOR
X <u>Robert Dennis</u> 4-23-08 SIGNATURE DATE	TAX
<h1>Thank You!</h1>	OTHER CHARGES
	TOTAL <u>\$75.00</u>

INVOICE NUMBER	INVOICE DATE
2447	3-3-08

MOORE'S PLUMBING



TO:

Robert Dennis
 805 Strong St.
 Napoleon, Ohio 43545

O-829 County Road 11C
 Napoleon, OH 43545
 (419) 599-1993

DATE	DESCRIPTION	CHARGES	CREDITS	BALANCE
3-7-08	initial # 2447			1,250.-
pd	CR # 2462 3-17-08			
INVOICE TOTAL				1,250.-

Thank You

INVOICE TOTAL 1,250.-

J.L. GLANZ & SONS
Trenching & Backfilling
 6 Lakeview Drive
 NAPOLEON, OHIO 43545

DATE	Oct 22, 07
NUMBER	

(419) 599-4103

Robert Dennis
805 Strong St.
Napoleon, Ohio 43545

TERMS:

PLEASE DETACH AND RETURN WITH YOUR REMITTANCE

\$ _____

DATE	CHARGES AND CREDITS	BALANCE
	BALANCE FORWARD	
	Install Sewer through wall at house to Tap out front	
	Per Estimate Oct 12, 07	
	Total	1,484 90
	Pd 10/25/07	
	[Signature]	

DUPLICATE

Thank You

PAY LAST AMOUNT
IN THIS COLUMN

J.L. GLANZ & SONS
Trenching & Backfilling
 6 Lakeview Drive
 NAPOLEON, OHIO 43545

STATEMENT

DATE April 8, 08
 NUMBER _____

(419) 589-4103

Robert Dennis
805 Strong St.
Napoleon, Ohio 43545

TERMS:

PLEASE DETACH AND RETURN WITH YOUR REMITTANCE

\$ _____

DATE	CHARGES AND CREDITS	BALANCE	
	BALANCE FORWARD		
	Installing Sump Pump Drain		
90.00 HR.	Backhoe with operator 5 HRS	450	00
19.00 HR.	Lobex 1-man 5 HRS	95	00
16.75	1-6X4 Fernco	18	75
6.18	1-4X4 S.D.R to Schedule 40	6	18
5.75	1-4X2 Reducer	5	75
1.95	1-2" Coupler Strait	1	95
2.10	1-2" 90 ell	2	10
1.80	4-4" S.A.R. Pipe	7	80
		586	93
	Tax for materials	2	94
	Total	589	87
	pd 4-24-08		
	ch# 2477		

DUPLICATE

Thank You

PAY LAST AMOUNT
 IN THIS COLUMN

Clean Water Removal Assistance Program

Mr. Robert L. Dennie

805 Strong Street

Napoleon, OH 43545

April 24, 2008

Company	Invoice Total
Moore's Plumbing	\$75.00
Moore's Plumbing	\$1,250.00
J.L. Glanz & Sons	\$1,484.90
J.L. Glanz & Sons	\$589.87
Total:	\$3,399.77
2/3 of Total Cost =	\$2,266.51
Amount owed to Homeowner:	\$2,266.51

PURCHASE REQUISITION

CITY OF NAPOLEON, OHIO
 255 West Riverview Avenue, P.O. Box 151
 Napoleon, Ohio 43545-0151
 TAX I.D. NUMBER: 34-6400941

REQUISITION NUMBER : 27073

DATE : 4 124 08

REQUESTING DEPARTMENT/DIVISION		TYPE OF PURCHASE ORDER REQUESTED	
Department/Division Number and Name: <u>ENG</u>		<input checked="" type="checkbox"/> REGULAR PO <input type="checkbox"/> BLANKET PO <input type="checkbox"/> MULTI-VENDOR PO <input type="checkbox"/> BY ORD/RES/MOT/CNT <input type="checkbox"/> CONFIRMING/EMERGENCY PO	
Project Number and Name (If Any):		ORD/RES/MOT/CNT #	ASSIGNED PO #
			<u>RG080565</u>

VENDOR INFORMATION		ACCOUNT NUMBER	DEPT OK	TOTAL
VENDOR NAME: (MULTI-VENDOR PO <input type="checkbox"/> YES)	VENDOR NO.	<u>520-6311-57800</u>		<u>2266 51</u>
<u>Robert Davnie</u>	<u>5975</u>	-		
ADDRESS LINE 1: <u>805 Strong St.</u>		-		
ADDRESS LINE 2:		-		
CITY:	STATE:	ZIP CODE:		
<u>NAP.</u>	<u>OH</u>	<u>43545</u>		
PHONE NO.:	FAX NO.:	CONTACT:		

QUOTES (List Three (3) Quotes, When Available)			
VENDOR NO. 1	\$		
VENDOR NO. 2	\$		
VENDOR NO. 3	\$		
(Must = Total Requisition) TOTAL -->			<u>2266 51</u>
ACCOUNT DISTRIBUTION			<u>2266 51</u>

QUANTITY	UNIT	ITEM DESCRIPTION (Include Catalog and/or Part Number if Available)	UNIT PRICE	TOTAL
1		<u>C WRAP for 805 Strong St.</u>		<u>2266 51</u>
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
(Must = Total Distribution) TOTAL REQUISITION - All Items -->				<u>2266 51</u>

CAPITAL BUDGETED ITEM: YES NO
 FIXED ASSET/INVENTORY: YES NO
 ADDITIONAL COMMENTS

APPROVED BY: (Signatures)

Employee/Supervisor (As Required) _____ Date 4/24/08

Department/Division Head _____ Date 4/24/08

City Manager _____ Date 24 APR 08

PURCHASE REQUISITION (PR) - GENERAL INSTRUCTIONS

- REQUISITION NUMBER** - Pre-numbered Form for Department/Division use. (EXP: 1260, 5858)
- DATE** - Date Purchase Requisition is Prepared. (EXP: 02-01-99)
- DEPT./DIVISION** - Department/Division Number & Name. (EXP: 2200 Fire/Safety Services)
- PROJECT NO. & NAME** - Project Number and Name (If Any). (EXP: Strong Street Improvements)
- TYPE OF PURCHASE ORDER (PO) REQUESTED** - **Regular**, - Standard PO for Services and Supplies issued prior to ordering and receiving requested services and supplies. (EXP: Supplies, Materials, Contracts, Services, Etc.)
- Blanket**, - Blanket PO issued to One Vendor or a Multi-Vendor for Routine Services and Supplies frequently purchased. (EXP: Office Supplies, Auto Parts, Hardware, Gravel,) (Gasoline, Rock Salt, Specific Projects, Etc.)
- Multi-Vendor**, - PO for Services and Supplies from Multiple Vendors for a Single Purpose or Identified Project. (EXP: Travel Expenses that include Meals, Lodging,) (Mileage, and Fees, each to a Different Vendor.)
- Ord/Res**, - A Regular or Blanket PO Issued under Terms and Conditions of Ordinance, Resolution, Motion or Formal Contract as approved by legislative action or motion of City Council. (EXP: Formally Bid Items, Agreements, Contracts, Etc.)
- Mot/Cnt**, - PO's that are Confirming Service and Supplies ordered by phone, or Emergency Purchases needed prior to PO issued. (EXP: Confirming Phone Orders, Waterline Break, Street) (or Sewer Cave-in, Emergency Services, Etc.)
- Confirm**, - PO's that are Confirming Service and Supplies ordered by phone, or Emergency Purchases needed prior to PO issued. (EXP: Confirming Phone Orders, Waterline Break, Street) (or Sewer Cave-in, Emergency Services, Etc.)
- VENDOR INFORMATION** - Vendor/Company Name, Vendor Number (From Finance), Address, City, State, Zip, Phone Number, FAX Number, Name of Vendor Contact. (EXP: ABC, Co. | No.123; 123 Anywhere Lane, Anywhere, Ohio 43545,) (Phone:419-555-1234, FAX:419-555-4321, Contact: John Smith)
- VENDOR QUOTES** - List Other Vendor Names and Quotes for Items Ordered. (EXP: ABC, Co. - \$390; HIJ, Co. - \$395; XYZ, Co. - \$400)
- ACCOUNT NUMBER, DEPARTMENT OK, DISTRIBUTION TOTAL** - Budgetary Account Distribution for Items Listed on PR. Have other Department Heads Initial when using Accounts Other than your own! NOTE: Total Distribution Must Equal (=) Total Requisition All Items. (EXP: 100-1900-54200 | \$300.00; 100-2200-54200 | FC | \$ 90.00)
- ORDER INFORMATION** - **Quantity**, - Number of Items Ordered Per Listed Line. (EXP: 1 5 12)
- Unit**, - Unit of Order for Each Item. (EXP: Ea,/C,/M,Doz.,Ton)
- Descptn**, - Detailed Description of Items Ordered, Include Part No's. (EXP: Fuel Filters #123, Gasoline 87oct, Tractor Tires)
- Un.Price**, - Price per Unit of Order. (EXP: \$2.00, \$1.00, \$59.95)
- Total**, - Total Cost for Items Ordered. (Quantity x Price) (EXP: 10 | Doz | Electrical Connectors #AB-123 | \$30.00 | \$300.00) (100 | Ft | Number 9,Electrical Wire #924 | \$.90 | \$ 90.00)
- CAPITAL BUDGETED** - Check **YES**, if item is Budgeted in Capital Improvement Program.
- FIXED ASSETS/INV.** - Check **YES**, if items is to be Added to City Fixed Asset Inventory.
- ADDITIONAL COMMENT** - List any Special Comments for treatment of the PR or PO.
- SIGNATURES** - Department/Division Signatures as Required. Minimum of Department Head and City Manager Signature Required for ALL Requisitions.