



**REQUEST FOR REIMBURSEMENT – REPAIRS OF SIDEWALKS
WITHIN THE DOWNTOWN BUSINESS DISTRICT**

DATE: _____

FROM: _____
Owner (Print)

_____ Address

_____ Phone #

TO: City of Boone
RE: Sidewalk repair as detailed below.

Location: _____

Date Constructed: _____ Contractor: _____

Total Sidewalk Construction cost: _____

Is the repair necessary because the area is impacted by a tree planted by the City of Boone? _____

City Reimbursement: 25% of the cost of the project unless repair work completed for the areas impacted by trees planted by the City of Boone at the rate of 50% of total sidewalk construction cost _____ (Submit copy of contractor invoice with application)

\$ _____ **TOTAL AMT DUE**

Owner Signature: _____

CITY STAFF USE ONLY

Approved by: _____ Date: _____

NOTES: _____
