

# SIDEWALK PROGRAM APPLICATION

Job Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_

I agree to the terms of \$1.50 per sq. ft. being reimbursed by the City of Maryville through the City's Sidewalk program, as funds are available. This reimbursement is subject to meeting all requirements of the City of Maryville Ordinance, Chapter 545, Article III, Sections 545.250 and 545.260. On a corner lot the sidewalk must be replaced with handicap accessibility. **All work requires three (3) inspections. They are as follow: 1 - before excavation, 2 - before concrete is poured and after forming is complete and 3 - when entire project is complete.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Preliminary Inspection Date: \_\_\_\_\_ Inspected By: \_\_\_\_\_

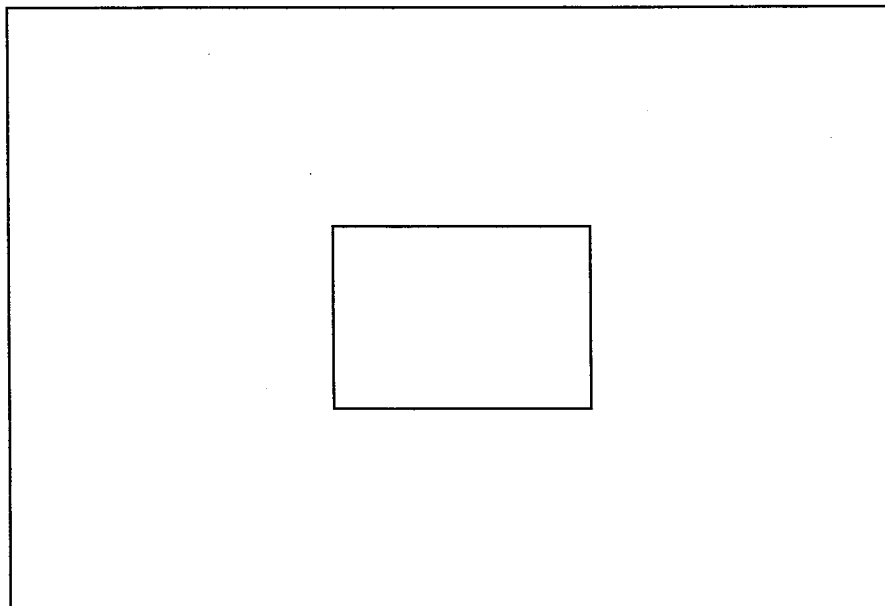
Sq. Ft. \_\_\_\_\_ x \$1.50 = \_\_\_\_\_ (Amount to be reimbursed by City)

Final Inspection Date: \_\_\_\_\_ Inspected By: \_\_\_\_\_

Approved / Denied (For Reimbursement)

Inspectors Signature \_\_\_\_\_ Date \_\_\_\_\_

Date processed for payment: \_\_\_\_\_



N  
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**Reimbursement approval is good for 60 days. If the project is not completed by \_\_\_\_\_ a new application will need to be filled out.**