TOWN OF MUNSTER 50/50 PUBLIC SIDEWALK REPLACEMENT PROGRAM

NAME:	DATE SUBMITTED
ADDRESS:	EMAIL:
PRIMARY PHONE #	OTHER PHONE #
Please mark the appropriate boxes \(\mathbb{Z}\) below:	
SIDEWALK CONDITION	RELATED FEATURES
☐ Trip Hazard – inches	☐ Working underground Sprinkler
☐ Buckled / Tilted	☐ Wireless Pet Fence
☐ Sunken / Holds Water	Trees within 3 feet of sidewalk
☐ Cracked / Pitted	☐ Visible Tree Roots next to walks
Payment / Billing Public Works provides the Clerk-Treasurer's Office with the homeowner. The Clerk-Treasurer's Office will be	th an estimate for the work as a basis for the initial bill to sill residents their portion of half the cost with payment re is potential for additional concrete work needed due to
Ö	itial & secondary bill possibility if extra work required)
OFFICE USE:	
DATE INSPECTED: SEH Sidewalk RATIN	G New Sidewalk RATING
# of Squares: # of Lifts INITIAL ESTIMATE	\$: FINAL COST \$: