



**Village of La Grange Park
Downspout Disconnection Assistance Program**

The Village requires that this Reimbursement Application form is completed for residents seeking a reimbursement for a simple disconnection up to \$100 per household. Each downspout is limited to \$25 unless a small section of new roof gutter is necessary to ensure discharge to permeable ground (without impact to neighboring property). Costs covered under this program include: elbows, discharge extension, splash pad, cement/cap, and small section of new roof gutter (if necessary).






General Information

Name: _____
 Address: _____
 Daytime Phone: _____ Evening Phone: _____
 Email Address: _____

Are you the homeowner of the address listed above? Yes ____ No ____
 Please note the number of downspouts on your property: ____
 Please note the number of those requiring disconnection: ____

Purchased Items for Reimbursement (PLEASE ATTACH ORIGINAL RECEIPTS)

Indicate the items you purchased for which you are seeking reimbursement:

Elbow 	Quantity _____	Cost Each _____	Total _____
Discharge Extension 	Quantity _____	Cost Each _____	Total _____
Splash Pad 	Quantity _____	Cost Each _____	Total _____
Gutter Section (small) 	Quantity _____	Cost Each _____	Total _____
Cement or Cap and Sealant 	Quantity _____	Cost Each _____	Total _____

TOTAL: _____ **TOTAL:** _____

I certify that the information as provided in this application form is true and correct. I further certify that the disconnections made are done so as to be permanent by sealing the sewer pipe with cement or cap and permanent seal. I will not reconnect my downspout to the Village's combined sewer system. I understand that the Village will conduct future program audits to ensure that the disconnection was complete and remains intact.

Signature _____ Date _____

Please mail application to the Village of La Grange Park, 447 N. Catherine Avenue, La Grange Park, IL 60526
 Attention Forrest Tucker or drop off at Village Hall 8:30AM to 5PM Monday – Friday excluding holidays.

This Section is for Internal Processing Purposes

Date Received: _____

Reviewed by Project Coordinator: _____ (signature)

Amount Approved: _____

Reviewed by Building Department: _____ (signature)

Reviewed by Finance Director: _____ (signature)

Check Issued on Date: _____

Copy for Grant File: _____ (Deputy Clerk signature)

Other Notes:

Village of La Grange Park

Homeowner Downspout Disconnection Program Agreement

I the undersigned homeowner as required by the Village of La Grange Park Ordinance No. 1001 and in accordance with the Downspout Disconnection Assistance Program agree to maintain the disconnection of my downspouts from the combined sewer system for a minimum of 10 years. This is to include all downspouts on my property except those that have been granted exemptions. The undersigned agrees for the duration of this agreement to allow access to the property listed below by Village of La Grange Park representatives or its agents to confirm compliance. This agreement will become active on the date signed below. The agreement will remain in force until 10 years from the undersigned date or until ownership of the property is legally transferred.

The invalidity or unenforceability of any of the provisions hereof shall not affect the validity or enforceability of the remainder of this Agreement.

Address

Printed Name of Homeowner	Signature	Date
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Nothing set forth in this Agreement shall be deemed a waiver by the Village of any defenses or immunities relating to any person or entity or their property, that are or would be otherwise available to the Village or its Representatives under the provisions of the Illinois Local Government and Governmental Employees Tort Immunity Act, or that are otherwise available to local governments and their corporate authorities, officers, employees, agents and volunteers under the common law of the State of Illinois or the United States of America.

www.lagrangepark.org