



# The Village of Glenview

Capital Projects / Inspectional Services Department  
2500 East Lake Avenue  
Glenview, IL 60026  
847-904-4320

## Overhead Sanitary Sewer Conversion Cost-Sharing Reimbursement Program

### REQUEST FOR REIMBURSEMENT CHECKLIST

Property Address: \_\_\_\_\_

- 1. Approved Inspection Checklist
- 2. Internal television DVD of the new/rehabilitated sanitary service identifying location and date of inspection on the audio
- 3. Proof of payment, in the form of waivers and paid receipts that all costs associated with the installation of the overhead system, the removal of the foundation drain and all other storm connections (if appropriate) and the rehabilitation of the sanitary lateral have been made

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

.....  
(For Village Use Only)

Inspections Complete \_\_\_\_\_ Date: \_\_\_\_\_

Sanitary Service DVD reviewed \_\_\_\_\_ Date: \_\_\_\_\_

Eligible costs \$ \_\_\_\_\_

Amount of reimbursement \$ \_\_\_\_\_

Paid Receipt received