



375 1st Ave East Wendell ID 83355

208-536-5161

SIDEWALK REPAIR GRANT APPLICATION

Owner Applicant Name: _____

Circle one: Residential Commercial

Mailing Address: _____

Phone Number(s): _____

Project Location Address: _____

Project description: _____

Size of project: _____ Square Feet: _____ Estimated Cost: _____

Attach Copies of Sidewalk Bids:

_____ \$ _____

_____ \$ _____

Certification:

By signing this application, I certify that, 1) I am the legal owner of the property where the proposed sidewalk repair project will take place, 2) that all the information on this application and accompanying material is true and accurate to the best of my knowledge. If awarded a grant, I agree to comply with all the rules and conditions set forth in the application packet and on the permit forms.

Signature: _____ Date: _____