



City of Sycamore
Building Department
 541 DeKalb Ave.
 Sycamore, IL 60178
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 www.cityofsycamore.com

APPLICATION FOR PUBLIC SIDEWALK REPLACEMENT

Address: _____

Approximate Area (Sq. Ft.)

_____ **Removal and Replacement of Existing Sidewalk**

_____ **Qualified New Sidewalk Construction**

(Reimbursement rate of \$3.00 per square foot, \$4.00 across driveway)

Contractor: _____

Address: _____

City's Reimbursement Check to be Sent to:

Owner: _____

Address: _____

TO BE COMPLETED BY THE CITY

Sidewalk: Total Length: _____

Average Width: _____

Total Area: _____ **Completed:** _____

Handicapped Ramps at \$25.00 each: _____ **Total:** _____

Reimbursement Total: \$ _____ **(770-8321)**

Measured and Approved By: _____