LEWIS COUNTY
NEW YORK

PLANNING AND COMMUNITY DEVELOPMENT
P: 315-376-5422| F: 315-377-3137

Casandra Buell
Director
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Request for Reimbursement

Septic System Replacement Program

To receive reimbursement for your septic system project, you, the property owner, must complete this form in its entirety and submit it to the County along with supporting cost documentation. This reimbursement request must be submitted within 90 days of project completion to:

Lewis County Planning & Community Development
7660 North State Street
Suite 324
Lowville, NY 13367

Septic System Project Information:

1. Septic System Project Completion Date:
2. Name of Property Owner:
3. Mailing Address:
4. Daytime Telephone Number:
5. Street Address of Septic System Project:
6. Type of Building Septic System Services:

   ☐ Residential ☐ Multi-Family ☐ Small Business

7. Septic System Project Contractor Information

   Contractor Name:

   Contractor Address:

   Contractor Phone Number:

   Septic System Contractor's EIN (Federal Tax Identification Number):
   (Provide only if you are directing payment to Contractor)

8. Description of Completed Septic System Project

   Total eligible cost of septic system project:

   Total reimbursement amount requested:

   Date of Completion:

9. Do you, the property owner, authorize the reimbursement payment to go directly to your septic system contractor?

   ☐ Yes ☐ No

10. Please submit copies of the documentation listed below:

    Contractor Invoice(s)

    Proof of Payment(s)

Failure to provide the above-mentioned documentation will likely result in the delay or rejection of your reimbursement request.

I herby certify that the information contained in this request is true and accurate, that I am the owner of the above-referenced septic system, and that I have not received money from any other source to pay the costs requested to be reimbursed hereunder.

Signature of Property Owner Date

For County Use Only

Expenses aggregating $_____ have been incurred and documented by the Property Owner for project costs which, based upon information provided by the Property Owner, constitute as eligible costs under the Septic System Replacement Program.

Signature of Authorized County Official Date

Lawrence Dolhof Chairman, Board of Legislators

Printed Name Title