



Village of Riverwoods
 300 Portwine Road
 Riverwoods, IL 60015
 Phone: 847-945-3990

Native Seeding & Plant Plug Cost Share Program Application

Owner's Name:	For Village Use	Permit Number	Application Fee: \$100
Owner's Address:			
Owner's Telephone:	Owner's Email:		
Contractor's Name:			
Contractor's Address:	Contractor's Telephone:		
Contact Person:	Contractor's Email:		

Attach copy of Contractor's Certificate of Insurance & Herbicide Applicators License.

Description of Planned Work

Provide a brief description of proposed work including intent or purpose (attach Program Eligibility Map/Plan if applicable)

Contractor Proposal/Contract, Invoice, & Applicant Reimbursement	For Village Use
1) Total amount invoiced by Contractor	\$
2) Total amount of Village reimbursement requested (50% limit \$2,000)	\$

**Attach copy of Contractor proposal.

Owner Statement of Certification and Village Approval

I, owner of the property shown on the drawing in Riverwoods, Illinois, do hereby state that I am familiar with and certify that all work will be completed in accordance with the Program Eligibility Map/Plan and Contractor Specifications.		For Village Use	
Owner Signature:	Date:	Permit Sign Off Signature:	Date:
		Performance Standard Sign Off Signature:	Date:
Owner Printed Name:	Village Final Reimbursement Approval Signature:		Date: