



APPLICATION FOR REIMBURSEMENT OF COST FOR LEAD WATER SERVICE LINE REPLACEMENT

RETURN APPLICATION

Mail: Menasha Utilities, PO Box 340, Menasha, WI 54952
Office: 321 Milwaukee Street, Menasha
Fax: (920) 967-3440
Email: mkrause@wppienergy.org

Eligible applicants will receive reimbursement for 95% of the actual cost up to a maximum of \$2,500 for replacement of their lead water service line by a plumber from the approved plumbers list.

This application form will not be accepted unless it is filled out completely, signed, dated, and returned.

1. Print your full name: _____
Last First M.I.

2. Print address where lead service line was replaced:

3. Print name and address of property owner below, if different from Line 1 and 2 (If property is owned by a business would need to list the business name):

(Reimbursement check will be made payable to the property owner)

4. Date lead water service line was replaced: _____
5. Cost based on the Invoice from plumber to replace the lead service line: \$ _____

*** Copy of the invoice from approved contractor/plumber must accompany this application**

6. Total reimbursement amount requested: \$ _____

- 7. Davis-Bacon Act Payroll Certification **applies only if ALL** these conditions exist:
 - a. The project cost on line 5 is greater than \$2,000 and
 - b. The owner of the residential property on line 3 is a business not an individual and
 - c. The plumber's business has employees and is not a sole proprietorship or partnership where all those who perform the work are also owners.

If all the conditions above exist Davis-Bacon requires contractors to submit a certified weekly payroll for all laborers and mechanics who worked on the job site. **This certified payroll is submitted to the municipality along with this form** and is kept on file in case of a wage dispute. The plumber is required to pay prevailing wage rates and fringe benefits for corresponding classes of laborer employed on similar projects in the area.

Indicate Weekly Payroll Dates Covered by this Certification:

From: _____ To: _____

*****SIGNATURES ON REVERSE SIDE ARE REQUIRED IN ORDER TO BE ELIGIBLE FOR REIMBURSEMENT*****

I hereby certify that the information provided on and with this application is true and accurate to the best of my knowledge. I further certify to the Use of American Iron and Steel, as mandated in the U.S. Environmental Protection Agency's State Revolving Fund programs, to following all applicable state regulations, including ch. 145, Wis. Stats., SPS 382 and 384, Wis. Admin. Code, Davis Bacon, environmental and endangered species construction provisions, and applicable local ordinances and regulations, and that all lead service line replacements resulted in the complete removal of the lead service line and associated materials from the property's curb stop to the water meter within the structure. I also certify that a good faith effort was made to solicit subcontractors (if used) meeting the DBE requirements.

Signature of Property Owner	Daytime Phone	Date
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Signature of Contractor/Plumber completing the work	Daytime Phone	Date
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(Section to be completed by Menasha Utilities)

Water Department Confirmed Complete Lead Removal	Lead or Galvanized	Date
Certified Payroll Verified		
Approval by Utility for Payment	Date	Amount