

**SIDEWALK REPAIR / REPLACEMENT PROGRAM  
PROPERTY OWNER APPLICATION**

Property Owner Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Preferred Method of Contact: \_\_\_\_\_ Email \_\_\_\_\_ Letter By Mail

Sub-Division / Neighborhood: \_\_\_\_\_

By checking this box, I/we certify that I/we have read the guidelines and I/we understand that this application will be considered based on the results of the inspection by the Public Works Department and the availability of funds. I/we understand that decisions are final and there will be no appeals or exceptions to sidewalk eligibility requirements. If this application is not approved, I/we understand that I/we may not re-submit the sidewalk for this address again for one year from the date of this application.

By checking this box I/we as property owner(s) dedicate the repaired and replaced sidewalk panels to the City of Oklahoma City for public use and benefit.

By checking this box I/we as property owner(s) agree to pay 50% of the estimated cost of the sidewalk repair or replacement upon receipt of the inspection by and in accordance with the estimate provided by the Oklahoma City Public Works Department. Failure to timely pay such costs will invalidate this application and will make this application ineligible for the Program.