

LATERAL REHABILITATION ASSISTANCE PROGRAM APPLICATION

The City Council of the City of Prattville has recently established to Lateral Rehabilitation Assistance Program, ("LRAP"), to assist residents in the corporate limits of the City of Prattville who have deteriorated sewer laterals in the replacement of such. For the full text of the applicable ordinances, please see the City of Prattville Code of Ordinances, Chapter 117 –Stormwater Regulations, Article I. –Erosion and Sedimentation Control, Division 1.—Generally, Sections 117-21 and 117-22.

In light of these ordinances, if your property has been determined to have a deteriorated sewer lateral, it is required to be replaced. This can be accomplished by either (1) having the private sewer lateral replaced in full at the owner's expense, or (2) participating in the LRAP program to assist with the replacement of the private sewer lateral.

If you have been notified by the Department of Public Works that you have a deteriorated sewer lateral and if you wish to participate in this program, please complete this application and return it to the Department of Public Works by mail at 101 W. Main Street or in person at 530 Doster Road, Prattville, AL 36067. If your application is accepted, you will be provided a contract to complete and sign for the terms and conditions of the LRAP program.

| FIRST NAME | LAST NAME | D.O.B. | Social Security Number |
|--------------|------------|---------------|------------------------|
| | | | |
| HOME PHONE | WORK PHONE | CELL PHONE | EMAIL |
| | | | |
| HOME ADDRESS | | | |
| | | | |

SECTION 1: APPLICANT INFORMATION

SECTION 2: PROPERY INFORMATION

| STREET | CITY | STATE | ZIP |
|-------------------------------|------|-------|----------|
| | | | |
| NEIGHBORHOOD/SUBDIVISION NAME | | | COUNCIL |
| | | | DISTRICT |
| | | | |

SECTION 3: DESCRIPTION OF LATERAL DEFICIENCY

WHEN DID THIS PROBLEM FIRST BEGIN?

PLEASE PROVIDE A LIST OF THE BUSINESSES AND PERSONS YOU HAVE CONTACTED FOR THIS PROBLEM. PROVIDE BUSINESS NAME, CONTACT'S NAME, TITLE AND CONTACT INFORMATION, AS APPLICABLE.

WHO IS YOUR WATER SERVICE PROVIDER, AND ARE YOU CURRENT ON YOUR WATER BILL?

DO YOU HAVE TITLE/OWNERSHIP OF THE PROPERTY WITH THE DEFICIENCY? IF SO, PLEASE PROVIDE A COPY OF YOUR DEED OR MORTGAGE RECORD.

TO THE BEST OF YOUR KNOWLEDGE, DESCRIBE THE WORK THAT WILL HAVE TO BE PERFORMED TO CORRECT YOUR SEWER LATERAL.

SECTION 4: ACKNOWLEDGEMENTS AND SIGNATURES

I attest that to the best of my knowledge, the information provided in this application is true and complete. I consent to the disclosure of such information for purposes of verification and evaluation related to my application for assistance. I understand that misstatement of relative facts will result in the disqualification of the aforementioned property for assistance.

I understand that the completion of this application in no way guarantees assistance of any type by the City of Prattville.

| PRINTED NAME | SIGNATURE OF APPLICANT | DATE |
|--------------|------------------------|------|
| | | |
| | | |

SECTION 5: ITEMS REQUIRED FOR COMPLETE APPLICATION

- A \$50.00 NON-REFUNDABLE APPLICATION PROCESSING FEE
- COPY OF DEED OR MORTGAGE RECORD
- TWO (2) RECENT UTILITY BILLS (NO MORE THAN 30 DAYS PAST THE DATE OF APPLICATION)
- OTHER RELEVANT DOCUMENTATION TO DEMONSTRATE THE SEVERITY OF THE SEWER LATERAL PROBLEM