



Village of Fox River Grove

50/50 SIDEWALK PROGRAM REQUEST FORM

Owner _____ Phone # _____

Address _____ Work # _____

Sidewalk to be: Replaced* or New Construction* *either side of the driveway.*

Length: _____ Width: _____ Total Sq. Ft. _____

Cost per square foot when: Replaced _____ Constructed* _____

Cost _____

Sidewalk to be: Replaced* or New Construction* *through the driveway.*

Length: _____ Width: _____ Total Sq. Ft. _____

Cost per square foot when: Replaced _____ Constructed* _____

Cost _____

Concrete Raising Cost _____

Cost for complete Job _____

Village Payment _____

Owner Payment _____

Contractor: _____

If additional information is needed, contact the Village at 847-639-3170

Please sign request form after Village staff has calculated the cost.

Owner Signature _____