

Infrastructure Services Department 82 Erie Street, 3rd Floor Stratford ON N5A 2M4

> (519) 271-0250 Ext. 5222 infrastructure@stratford.ca www.stratford.ca

# Application for Basement Isolation and Weeping Tile Sump Pump Subsidy Program

### 1. Applicant Information:

Owner Name	
Owner's Mailing Address	
Owner's Phone Number(s)	
Address Where the Work is Being Completed	

## 2. Estimates and Plan Information:

Please identify cost estimates secured for the work. Amounts listed must include taxes. Note: the lowest or any price for an individual item will not necessarily be accepted.

Estimate Number	Name of Firm	Weeping Tile Sump Pump: From Storm	Weeping Tile Sump Pump: From Sanitary	Sewage Ejector	Backwater Valve: Storm	Backwater Valve: Sanitary
1.		\$	\$	\$	\$	\$
2.		\$	\$	\$	\$	\$
3.		\$	\$	\$	\$	\$

For Staff Use:

Work Approved and Amount Approved for Each of: \$	\$	\$	\$	\$	
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Date Application Received: \_\_\_\_\_ Date Application Approved: \_\_\_\_\_

Approving Staff Signature: \_\_\_\_\_

#### 3. Inspection Report (For Staff Use)

Inspection	<ul> <li>Backwater Valve</li> <li>Sump Pump</li> <li>Sewage Ejector</li> </ul>
Type of Weeping Tile Connection	<ul><li>Inside</li><li>Outside</li></ul>
Permit Number	
Date Approved	
Name of Inspector	

#### 4. Cost Verification and Release

Total Cost of Work	
Work Completed by	
Date Work Completed	

Please Attach:

□ Final Invoice and Proof of Payment

I hereby release the Corporation of the City of Stratford from any and all future claims, damages, or losses to myself or to my property, including but not limited to sewer surcharging or flooding, arising from or attributable to the installation, operation or maintenance of any component of the installation including sump pumps, sewage ejectors, back water valves and related assemblies subsidized by the City of Stratford.

Signature of Owner

Date

#### **Notice of Collection**

The personal information collected on this form is collected by the Corporation of the City of Stratford under the authority of the Municipal Act, 2001, and will be used by Infrastructure and Development Services staff for the purpose of administering the Basement Isolation and Weeping Tile Sump Pump Subsidy Program, and in the delivery of public works programs and services in the City. Questions about the collection and use of this information may be made to the City Clerk, P.O. Box 818, Stratford, Ontario, N5A 6W1, or by telephone 519-271-0250 ext. 5329 during business hours.



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5. Payment Approval (For Staff Use)	
Backflow Valve (maximum of \$675)	
Sump Pump (Inside Weeping Tile Connection, maximum of \$2,500)	
Sump Pump (Outside Weeping Tile Connection, maximum of \$3,000)	
Sewage Ejector Installation (maximum of \$2,000):	

Staff Signature:		Date:	
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