



**CITY OF CEDAR RAPIDS**  
**Public Works Department**  
**Sidewalk Reimbursement Registration**

**Instructions: Please Type or Print.**

Property Owner Name(s) {as it is to appear on check}:		Phone No.
Number and Street {where check should be mailed}:		Apt. No.
City	State	Zip Code
Email address		

**CERTIFICATION**

Address of Repair (if different from above)		Length/Area of Repair	Cost of Repair
<b>Please Sign Here</b>	Signature		Date

\*\*\* **Please include paid invoice(s) and/or receipt(s)**\*\*\*

**NOTE:**

1. Only sidewalk deemed in need of repair by the City is eligible for reimbursement.
2. Reimbursement is eligible after final inspection of a right-of-way permit.
3. Per City specifications, concrete mix shall be IDOT approved C or M – mix.
4. Per Sidewalk Repair and Reimbursement Policy, reimbursement request must be made within 60 days of repair.
5. In the case of property-owner obtained right-of-way permits, there are restrictions on approved receipts; see FAQs at [www.cityofcr.com/sidewalkrepair](http://www.cityofcr.com/sidewalkrepair).

**Send your completed form and invoice(s)/receipt(s) to:**

Email: [sidewalks@cedar-rapids.org](mailto:sidewalks@cedar-rapids.org)

or

Public Works Department  
City of Cedar Rapids  
500 15<sup>th</sup> Avenue SW  
Cedar Rapids, IA 52404