



MAILBOX LEVELING PROGRAM APPLICATION

Yes! I would like to participate in the Little Elm Mailbox Leveling Program at the following address and be approved for 50% reimbursement through the Little Elm Public Works Department.

Applicant Name: _____

Address: _____

Phone Number: _____

Email Address: _____

I understand that I, as resident and homeowner, will be responsible for hiring and paying a contractor of my choice for mailbox leveling repairs.

After the mailbox leveling repairs have been completed, I can submit a paid receipt with proof of payment and a reimbursement application to the Little Elm Public Works Department for approval to be reimbursed 50% of the cost paid. In no case shall the reimbursement exceed \$400.00 for a single mailbox repair or \$500.00 for a double mailbox repair. The receipt must be on the contractor's original document and must be less than 90 days old.**

- Before photos of the mailbox to be leveled or a copy of your HOA/Town of Little Elm courtesy notice must be attached to this program application. Please take a front and side picture of the mailbox prior to repair.
- After photos of the repaired mailbox must be attached to the reimbursement application. Please take a front and side picture of the completed mailbox.

Signature: _____ Date: _____
Homeowner

Official Use Only

Street Supervisor	Approved/Denied	Date
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Public Works Director	Approved/Denied	Date
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** An approved application is necessary prior to repair completion or else reimbursement from the Town will not be permitted. An approved application expires 6 months from approval date.

Project # _____