



DEPARTMENT OF PUBLIC WORKS
148 W. ILLINOIS AVENUE • PALATINE, IL 60067-6816
(847) 705-5200 • publicworks@palatine.il.us
www.palatine.il.us

**LEAD & GALVANIZED STEEL WATER SERVICE LINE
REPLACEMENT COST SHARING PROGRAM**

The Village Council has approved a Lead & Galvanized Steel Water Service Line Replacement Cost Sharing Program for residential customers in the Village of Palatine. The goal of the program is to assist homeowners in an effort to eliminate all lead and galvanized steel water service lines in the Village of Palatine. This program is completely voluntary.

HOW IS PARTICIPATION DETERMINED?

Participation is voluntary and is available to all residential properties with an existing lead or galvanized steel water service line. Based upon contact initiated by the resident, the Department of Public Works will provide instructions and an application form for pre-approval of the reimbursement amount. Residents who wish to participate in the Lead & G.S. Water Service Line Replacement Cost Sharing Program should fill out and submit the attached application form prior to submitting for a building permit. Any alterations needed to obtain the required building permit should be re-reviewed by Public Works for funding impacts prior to construction.

WHO PAYS TO REPLACE THE LEAD OR GALVANIZED STEEL SERVICE?

Under the Program, the Village will reimburse 100% of the cost to replace the lead service line from the water main to the water shut off valve (b-box) typically located in the parkway, and 3/4 of the cost from the b-box to the meter, up to a \$11,000 maximum reimbursement. The Village will reimburse the homeowner after the work is completed. All permit and inspection fees will be paid by the resident/applicant and are eligible in addition to the reimbursement cap of \$11,000.

WHO PERFORMS THE WORK?

The work is to be performed by a plumbing contractor and sub-contractors, if required, selected by the homeowner. The contractor and sub-contractors must be licensed and bonded to work in the Village of Palatine. The contractor is required to restore all disturbances to the pre-construction condition on public property, including sidewalk removal and replacement, curb and gutter replacement, pavement removal and replacement, and all restoration, as required to complete the project. It is suggested that homeowners obtain at least three proposals.

HOW IS THE REIMBURSEMENT COST CALCULATED?

The reimbursement is calculated as follows:

$$(\text{Proposal Cost} - \text{Itemized Exceptions}) \div \text{Total Length of Water Line} = \text{Project Cost per Foot}$$

$$\text{Project Cost per Foot} \times \text{Length from Water Main to Existing B-Box} = \text{VOP ROW Reimbursement}$$

$$(\text{Project Cost per Foot} \times \text{Length from B-Box to Meter}) \times 3/4 = \text{Private Reimbursement}$$

$$\text{VOP ROW Reimbursement} + \text{Private Reimbursement} + \text{Permit Fees} = \text{Total Reimbursement}$$

(Maximum Reimbursement is \$11,000 plus permit fees)

WHO SHOULD I CALL IF I HAVE ANY QUESTIONS?

The Department of Public Works can answer any questions about the program. Please call us at (847) 705-5200 between the hours of 8:00 a.m. to 4:00 p.m., Monday through Friday.



DEPARTMENT OF PUBLIC WORKS
148 West Illinois Avenue
Palatine, Illinois 60067
(847) 705-5200
publicworks@palatine.il.us

LEAD AND GALVANIZED STEEL WATER SERVICE LINE REPLACEMENT
COST SHARING PROGRAM APPLICATION

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

PART I. PRE-QUALIFICATION FOR REIMBURSEMENT:

PLEASE SUBMIT ONE COPY OF ITEMS A THRU E OF PART I TO THE PUBLIC WORKS DEPARTMENT AT publicworks@palatine.il.us (ELECTRONIC SUBMITTALS ONLY, PLEASE).

A. ON THE HOMEOWNER'S PLAT OF SURVEY THE FOLLOWING MUST BE SHOWN:

1. DETAILED LAYOUT SHOWING SIZE, LOCATION AND DIMENSIONS OF THE PROPOSED WATER LINE PIPING FROM THE NEW TAP AT THE VILLAGE WATER MAIN TO THE NEW B-BOX AND FROM THE NEW B-BOX TO THE EXISTING WATER METER IN THE HOUSE.
2. COMPLETE DISCONNECTION OF THE OLD SERVICE FROM THE CORPORATION STOP ON THE MAIN, REMOVAL OF THE OLD B-BOX AND CURB STOP.
3. SIZE AND MATERIAL OF PROPOSED WATER LINE.
4. PROPOSED SIDEWALK, CURB AND PAVEMENT REMOVAL AND REPLACEMENT.
5. **PARKWAY RESTORATION**
6. HOUSE AND ACCESSORY STRUCTURES.
7. PROPERTY LINES.
8. EXISTING SIDEWALK AND CURB.

B. COMPLETED IRS FORM W-9. LINK TO IRS ONLINE FILL-IN FORM:

<http://www.irs.gov/pub/irs-pdf/fw9.pdf>

LEAD LINE REIMBURSEMENTS ARE NOT ELIGIBLE FOR 1099 REPORTING.

C. COMPLETED VENDOR DEMOGRAPHIC INFORMATION FORM:

ATTACHED TO THIS APPLICATION. THE STATE OF ILLINOIS REQUIRES THE VILLAGE OF PALATINE TO COLLECT THIS INFORMATION. THE RESIDENT IS CONSIDERED THE VENDOR SINCE THEY RECEIVE THE REIMBURSEMENT CHECK. DO NOT PROVIDE THE CONTRACTOR INFORMATION ON THIS FORM.

D. CONTRACTOR'S PROPOSAL:

1. ITEMIZE ITEMS IN COMPLIANCE WITH DESIGN STANDARDS. (SEE ATTACHED DETAILS FOR WATER SERVICE DISCONNECTION AND NEW WATER SERVICE.). THE FOLLOWING ITEMS ARE NOT QUALIFIED FOR REIMBURSEMENT INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:

- CARPET
- FLOORING
- DRY WALL
- FINISHES OF ANY SORT OTHER THAN CONCRETE
- LANDSCAPE ENHANCEMENTS
- PRIVATE PROPERTY TREES
- TEMPORARY WATER FACILITIES
- DEPOSITS

NO OTHER WORK WILL BE ALLOWED AS PART OF THE PERMIT THAT IS NOT EXCLUSIVELY RELATED TO THE REPLACEMENT OF A LEAD WATER SERVICE, SUBJECT TO DEPARTMENT OF PUBLIC WORKS REVIEW.

2. INCLUDE RESTORATION/REPLACEMENT OF ALL DISTURBED SIDEWALK, PAVEMENT AND PARKWAY AREAS.
3. INCLUDE TRANSFER OF ELECTRICAL GROUNDING WIRE/CLAMP TO STREET SIDE OF NEW WATER SERVICE PIPING & EXTENSION IF NECESSARY, PER NEC.
4. UPON VILLAGE APPROVAL OF THE BUILDING PERMIT APPLICATION THE CONTRACTOR CAN PROCEED WITH INSTALLATION.
5. ALL NECESSARY INSPECTIONS SHALL BE SCHEDULED WITH THE BUILDING DEPARTMENT AS INDICATED ON THE APPROVED BUILDING PERMIT.
6. AFTER ALL WORK IS COMPLETE AND ALL VILLAGE INSPECTIONS ARE APPROVED A SUBMITTAL CAN BE MADE FOR REIMBURSEMENT ACCORDING TO THE INSTRUCTIONS IN PART II BELOW.

E. WATER SERVICE PIPE SIZE WORKSHEET

F. CONTRACTOR VERIFICATION OF EXISTING WATER SERVICE MATERIAL

G. THIS FORM SIGNED:

SIGNED (APPLICANT): _____ DATE: _____

PART II. REIMBURSEMENT REQUEST SUBMITTAL

PLEASE SUBMIT THE FOLLOWING ITEMS TO THE PUBLIC WORKS DEPARTMENT AT publicworks@palatine.il.us (ELECTRONIC SUBMITTALS ONLY, PLEASE) IN ORDER TO PROCESS THE REIMBURSEMENT:

- A. PAID RECEIPT FROM CONTRACTOR (MARKED "PAID IN FULL" ON RECEIPT).
- B. COPY OF VILLAGE APPROVED FINAL INSPECTION REPORTS.

VILLAGE SHALL MAKE REIMBURSEMENT PAYMENT WITHIN 45 DAYS AFTER RECEIVING ALL NECESSARY DOCUMENTS. REIMBURSEMENTS ARE ISSUED TO OWNERS/APPLICANTS, NOT CONTRACTORS.

(FOR VILLAGE USE ONLY)	
AMOUNT PRE-APPROVED FOR REIMBURSEMENT: \$ _____	DATE: _____
FINAL INSPECTION APPROVAL: _____	DATE: _____
PAID RECEIPT RECEIVED BY: _____	DATE: _____
FINAL REIMBURSEMENT AMOUNT APPROVED: \$ _____	DATE: _____



Village of Palatine
200 East Wood Street
Palatine, IL 60067

Vendor Demographic Information

Vendor Name	Email	Phone	Date
-------------	-------	-------	------

Is the Vendor...

- | | | |
|-------------------------------|-----------|----------|
| 1. A Women Owned Business? | YES _____ | NO _____ |
| 2. A Veteran Owned Business? | YES _____ | NO _____ |
| 3. A Minority Owned Business? | YES _____ | NO _____ |

Does the Vendor hold any certifications for the above categories?	YES _____	NO _____
---	-----------	----------

Is the Vendor Self-Certifying and qualifies as a small business under U.S. Small Business Administration (SBA) standards?	YES _____	NO _____
---	-----------	----------

Name of Subcontractor: _____

Is the Subcontractor...

- | | | |
|-------------------------------|-----------|----------|
| 1. A Women Owned Business? | YES _____ | NO _____ |
| 2. A Veteran Owned Business? | YES _____ | NO _____ |
| 3. A Minority Owned Business? | YES _____ | NO _____ |

Does the Subcontractor hold any certifications for the above categories?	YES _____	NO _____
--	-----------	----------

Is the Subcontractor Self-Certifying and qualifies as a small business under U.S. Small Business Administration (SBA) standards?	YES _____	NO _____
--	-----------	----------

Additional sheets must be submitted for each additional subcontractor.

Signature of Person Completing this Form:

Please complete and return this form to the Village of Palatine, 200 E. Wood Street, Palatine IL 60067 Attn: Accounts Payable or return via email to findept@palatine.il.us.



BUILDING & INSPECTIONS DIVISION

200 EAST WOOD STREET • PALATINE, IL 60067-5339
Telephone (847) 359-9042 • Fax (847) 776-4733
www.palatine.il.us

Water Service Pipe Size Worksheet- Residential (Flush Tank Only)

This form is required to be submitted for any residential project that proposes to add additional plumbing fixtures. The addition of plumbing fixtures could result in the need to increase the existing water service size.

Incomplete forms will not be accepted.

Address of Project _____ Owner Name _____

Existing Water Service Size _____

Verified by: _____ Licensed Plumber _____ License #
Signature required
_____ Architect of Record _____ License #
Signature required

Proposed Water Supply Fixture Units (Calculation)

Per Illinois State Plumbing Code-Section 890, Appendix A, Tables M and N

Water Closet (Toilets)	3 x _____ = _____
Lavatory	1 x _____ = _____
Bathtub	2 x _____ = _____
Shower	2 x _____ = _____
Kitchen Sink	2 x _____ = _____
Dishwasher	1 x _____ = _____
Laundry Tub	3 x _____ = _____
Clothes Washer	2 x _____ = _____
Total	= _____ W. S. F. U.

Required Pipe Size

(check the appropriate box)

<input type="checkbox"/> 1/2" service	(2 - 7 W.S.F.U.)
<input type="checkbox"/> 3/4" service	(8 - 19 W.S.F.U.)
<input type="checkbox"/> 1" service	(20 - 34 W.S.F.U.)
<input type="checkbox"/> 1 1/4" service	(35 - 59 W.S.F.U.)
<input type="checkbox"/> 1 1/2" service	(60 - 119 W.S.F.U.)

Please consult the Village of Palatine Fee Schedule for the costs associated with increasing the existing water service size.



DEPARTMENT OF PUBLIC WORKS
148 West Illinois Avenue
Palatine, Illinois 60067
(847) 705-5200
publicworks@palatine.il.us

CONTRACTOR VERIFICATION OF EXISTING WATER SERVICE PIPING MATERIAL

Resident Name: _____

Resident Address: _____

Phone: _____

E-MAIL: _____

Contractor Certification:

I, _____ of _____,
Name Company

Have inspected the above referenced property and hereby certify that the incoming existing water service piping material from the street has been identified as: _____

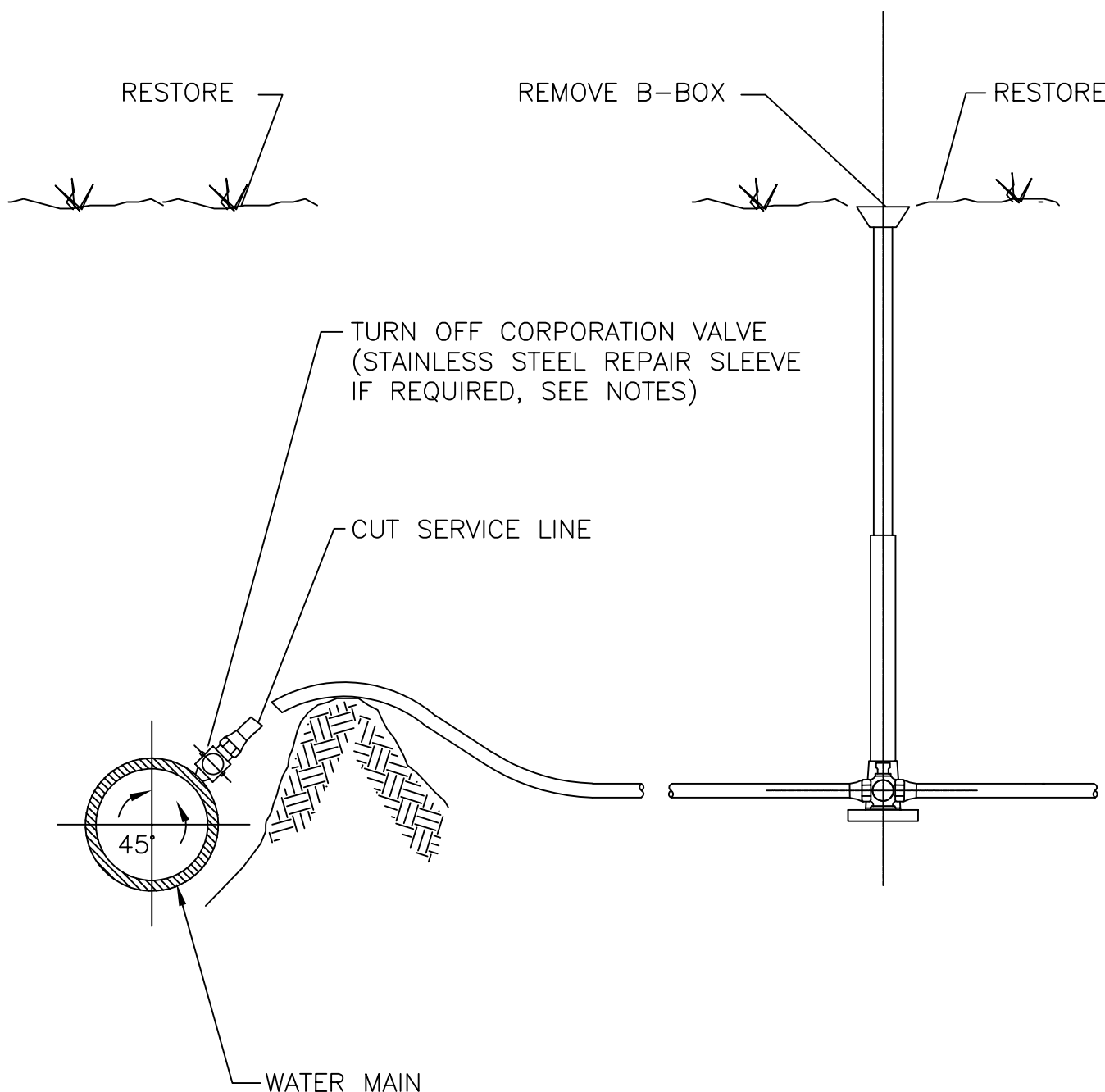
SIGNED (Contractor): _____ **DATE:** _____

Company Name: _____

Company Address: _____

Phone: _____

E-MAIL: _____



NOTES:

ALL DISTURBED AREAS SHALL BE RESTORED TO ORIGINAL, OR BETTER, CONDITION. WATER SERVICE DISCONNECTIONS 3/4 AND 1" SHALL BE SHUT OFF AT WATER MAIN IF THE CORPORATION VALVE LEAKS, CORPORATION SHALL BE REMOVED, AND STAINLESS STEEL REPAIR SLEEVE SHALL BE PLACED OVER THE TAP.

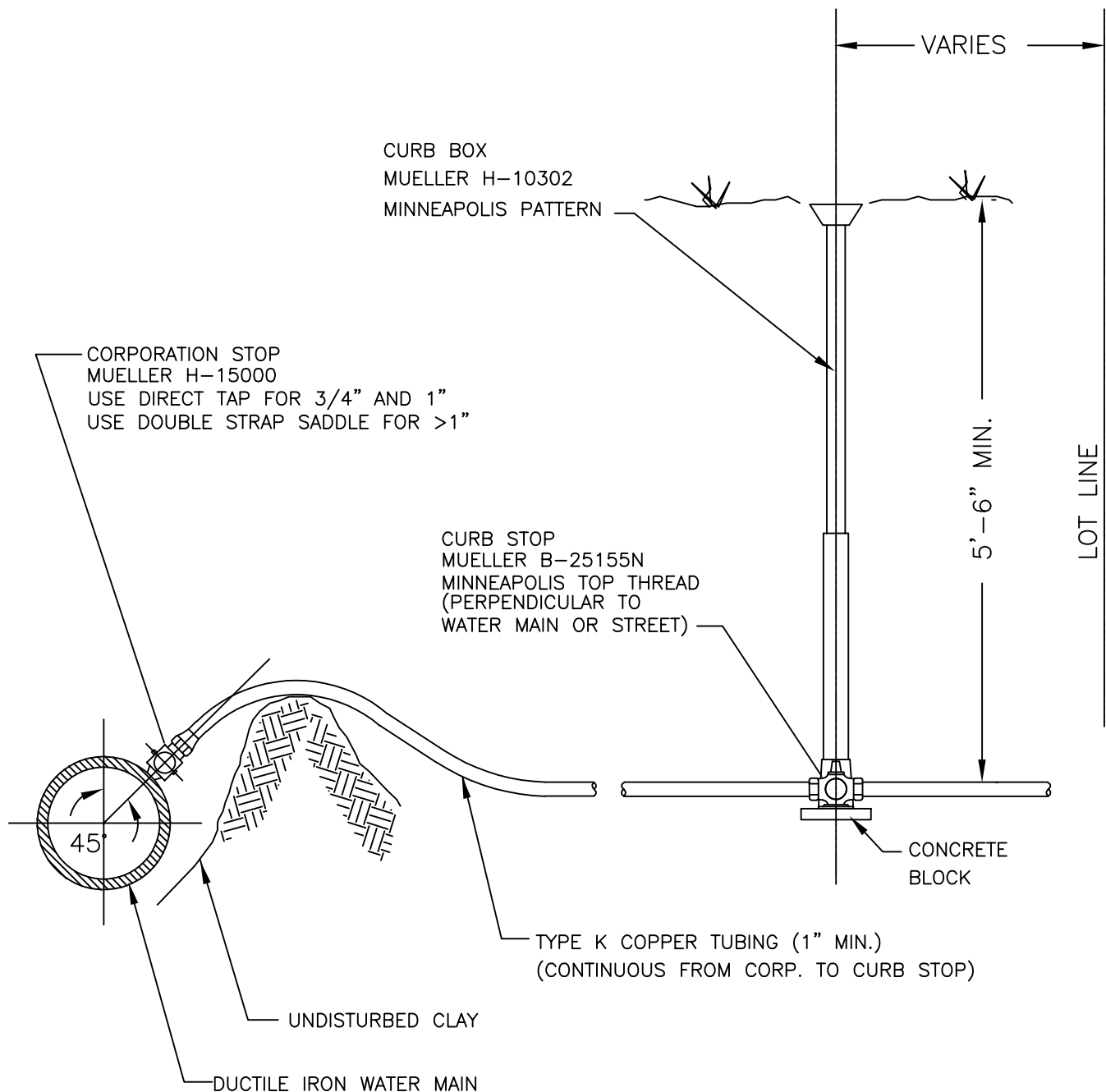
WATER SERVICE DISCONNECTIONS GREATER THAN 1": CORPORATION VALVE SHALL BE REMOVED, AND A STAINLESS STEEL REPAIR SLEEVE SHALL BE PLACED OVER THE TAP.

DISCONNECTION INSPECTIONS AND MAIN SHUT DOWNS SHALL BE COORDINATED WITH PUBLIC WORKS UTILITY DIVISION.

VILLAGE OF PALATINE PUBLIC WORKS

WATER SERVICE DISCONNECTION

REV. 2-27-2020



NOTES:

WATER SERVICE LINE SHALL BE IN A SEPARATE TRENCH 10 FT. FROM THE SANITARY SEWER SERVICE LINE OR IN THE SAME TRENCH BUT ON A SHELF 18" ABOVE THE SEWER LINE, IN WHICH CASE THE SEWER PIPE MATERIAL SHALL BE DUCTILE IRON OR SCHEDULE 40 PVC WITH SOLVENT WELD JOINTS.

TAPS TO HDPE WATER MAIN REQUIRE ELECTROFUSION SADDLE
TAPS TO PVC WATER MAIN REQUIRE STAINLESS STEEL TAPPING SLEEVE

VILLAGE OF PALATINE PUBLIC WORKS

WATER SERVICE

REV. 2-27-2020