



# City of Mentor-on-the-Lake

5860 Andrews Road, Mentor-on-the-Lake, OH 44060-2827  
Phone: (440) 257-7216 Fax: (440) 257-2766  
www.CityMOL.org

## RESIDENT WORK REQUEST

I, \_\_\_\_\_, owner of the property located at \_\_\_\_\_, Mentor-on-the-Lake, Ohio, hereby request that the Mentor-on-the-Lake Service Department perform the following work to my property:

- \_\_\_\_\_ Install driveway culvert pipe
- \_\_\_\_\_ Replace driveway culvert pipe
- \_\_\_\_\_ Reset driveway culvert pipe
- \_\_\_\_\_ Re-ditch
- \_\_\_\_\_ Other \_\_\_\_\_

I authorize the City to perform said work, and agree that I am responsible for the cost of all materials used. The estimated cost for the work requested is \$\_\_\_\_\_, which is due prior to being placed on the list for completion. I understand that this is only an estimate, and I will be responsible for any additional charges, payable within 30 days of the completion of the project. If there is a surplus, I agree that the City will refund the difference within 30 days of project completion. Additionally, I acknowledge that any concrete or asphalt repair will be my sole responsibility.

I hereby acknowledge the City of Mentor on the Lake Codified Ordinance, Chapter 1024, which states if I fail to pay the charges due in their entirety, the City will certify said costs to the Lake County Auditor to be placed for collection on the tax duplicate.

\_\_\_\_\_  
Owners Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone

\* \* \* \* \*

### OFFICE USE ONLY

Deposit Amount: \_\_\_\_\_

Completed Date: \_\_\_\_\_

Balance Due/(Refund): \_\_\_\_\_

Date: \_\_\_\_\_

Total Cost: \_\_\_\_\_

Date File Closed: \_\_\_\_\_