



Department of Public Works
16226 Wausau Avenue, Bldg. C, South Holland, IL 60473
708.339.2323 * Fax 708.687.2028 * www.southholland.org

Parkway Tree Reimbursement Program Reimbursement Request Form

Name: _____

Address: _____

Phone Number: _____ Email: _____

I have attached a copy of the *paid in full bill/invoice* for the purchase and installation of _____ parkway tree(s).

I request the Public Works Department inspect the tree(s) to verify the plantings have been completed and to process this reimbursement as allowed by the program.

- Only trees that are pre-approved qualify for reimbursement. See the full brochure on www.southholland.org
- The Village of South Holland will pay up to half the cost (\$150 maximum). Homeowner is responsible for remaining costs. Please allow 3-4 weeks for processing.

I agree to:

- water the tree(s) at least once a week with 10-12 gallons of water (more as needed during periods of high heat and drought)
- maintain a mulch ring 12-18" in diameter around the tree(s) @ 3-4" deep to help conserve moisture, control weeds, and protect roots from extreme heat and cold

Resident Signature: _____ Date: _____

Please return this form with a copy of the *paid in full bill/invoice* either in person at the Public Works Office or, by mail to:

Village of South Holland - Public Works Department
16226 Wausau Ave., Building C
South Holland, IL 60473

For Office Use Only:

Date Received: _____

Copy of paid Bill/Invoice Attached: _____

List Number: _____

Number of Trees Planted: _____

Species & Size: 1. _____

2. _____

Reimbursement Approval: _____ Amount: _____