

Town of Glenrock Sidewalk Grant Application

NAME: _____

MAILING ADDRESS: _____

TELEPHONE: _____

PROJECT LOCATION: _____

DESCRIPTION: _____

(May include pictures)

TOTAL LOW BID \$ _____

(Please attach three bids/contractor's estimates showing a detailed breakdown of the costs of materials and labor)

MAXIMUM AWARD - 50% OF TOTAL COST NOT TO EXCEED \$500