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## PROFESSIONAL SERVICES REIMBURSEMENT NOTICE

Please read and sign the following Notice:

Pursuant to the Code of the Village of Summit Section 14-19, the Summit Village Board has made a determination that whenever the services of the Village Planner, Village Engineer, Village Attorney, or any other Village professional staff results in a charge to the Village for that professional's time and services, and such service is not a service supplied to the Village as a whole, the Village Clerk shall charge that service for the fees incurred by the Village to the property owner incurring those fees (without regard to the outcome of the request). Also, pursuant to the Code of the Village of Summit Section 14-19, certain other fees, costs, and charges are the responsibility of the property owner even if the request is not approved.

I/we, the undersigned, have been advised that, pursuant to the Village of Summit, if the Village Planner, Village Engineer, Village Attorney or any other Village professional provides services to the Village because of my/our activities, whether at my/our request or at the request of the Village, I/we shall be responsible for the fees incurred by the Village (even if my/our request is not approved). In addition, I/we have been advised that pursuant to the Village of Summit, certain other fees, costs, and charges are my/our responsibility, even if my/our request is not approved.

The undersigned will receive the first billing once charges are incurred and monthly thereafter so the undersigned remains up to date regarding any current charges.

## PLEASE PRINT LEGIBLY

Information for the Owner and/or Party responsible for the Invoices:

Name		Phone Number	
Mailing Address			
Information for the Property that is the subject of the Re	equest:	e-mail address	
Owner's Name			
Property Address		e-mail address	
Tax Key Number of the Property that is the subject of the	e Request: SUMT _		
Signature of the Property Owner(s) and Applicant(s) and	Current Date:		
Property Owner	Date		_
Applicant	Date		
Village Official that accepted the form:			

## H:\FORMS\Shoreland Application Forms\2024 Reimbursement Form.doc