



Return to Tracy Taylor:

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Via mail: Department of Public Works
PO Box 1130
Oshkosh, WI 54903-1130

In person: Room 301, City Hall
215 Church Avenue

**APPLICATION FOR REIMBURSEMENT OF COST
FOR PRIVATE-SIDE LEAD WATER SERVICE LATERAL REPLACEMENT**

Eligible applicants will receive a fifty percent (50%) reimbursement for the cost of private-side lead water service lateral replacement, up to a \$1,500 maximum reimbursement. This application form will not be accepted unless it is completely filled out, signed, dated, and returned with a copy of the actual payment receipt from the plumber/contractor that replaced the lead water service lateral.

Eligible properties include private homes, K-12 schools, and licensed day cares. Commercial or business properties only qualify if they also have a residential dwelling unit.

Property Address: _____

Property Owner(s): _____

Plumber/Utility Contractor Contact Name: _____

Plumbing/Utility Contractor Company Name: _____

Date of Work Performed: _____ Total Contract Amount: _____

I hereby certify the information provided on and with this application is true and accurate to the best of my knowledge. I further certify to the Use of American Iron and Steel, as mandated in the U.S. Environmental Protection Agency's State Revolving Fund programs; to following all applicable state regulations, including Ch. 145, Wis. Stats., SPS 382 and 384, Wis. Admin. Code, and applicable local ordinances and regulations; and that all private-side lead water service lateral replacements resulted in the complete removal of the private-side lead water service lateral and associated materials from the property's curb stop to the water meter within the structure. I also certify that a good faith effort was made to solicit subcontractors (if used) meeting the DBE requirements, listed below:

DAVIS-BACON WAGE RATE REQUIREMENTS

Funding for private-side lead water service line replacement is being provided by the U.S. Environmental Protection Agency. Therefore, the federal Davis-Bacon wage rate requirements **will** apply in the following circumstance:

-) The property is owned by a business entity (trust, LLC, etc.); will be using a plumbing/utility contracting firm that has employees (who are not owners of this firm); and an owner of that plumbing/utility contracting firm did not perform one hundred percent (100%) of the work.

Davis-Bacon wage rate requirements **will not** apply in the following circumstances:

-) The property is owned by an individual or individuals.
-) The property is owned by a business entity (trust, LLC, etc.) and an owner of the plumber or utility contractor completing the work completes one hundred percent (100%) of the work.
-) The total cost of the LSL replacement is less than \$2,000.

The City of Oshkosh will assist in determining property ownership and whether or not the Davis-Bacon wage rate requirements apply.

The plumber/utility contractor must obtain a copy of the Davis-Bacon wage rate determination that is in effect when they sign the contract for the work that requires compliance with the Davis-Bacon wage rates, which must be submitted to the City with the reimbursement application form. The Davis-Bacon wage rates can be located at the following website: <https://www.wdol.gov/dba.aspx>. The construction type to be selected on the website is “Residential”.

The plumber/utility contractor must also provide a certified payroll to the City on the U.S. Department of Labor’s Payroll form with the reimbursement application form.

Plumber’s Signature

Property Owner’s Signature

Date

Date

Phone

Phone

Email Address

Email Address

**A COPY OF THE PAYMENT RECEIPT FROM A LICENSED PLUMBER/UTILITY CONTRACTOR
MUST ACCOMPANY THIS APPLICATION IN ORDER TO BE ELIGIBLE FOR
REIMBURSEMENT.**

Lateral replacement verified: _____ By Whom: _____

Approved payment amount: _____

Staff Signature: _____

Date: _____