

## **PROFESSIONAL SERVICES REIMBURSEMENT AGREEMENT**

235 Hickory St, Pewaukee WI 53072—villagehall@	@villageofpewaukeewi.gov—262-691-5660	
	PROPERTY INFORMATION	
Property Address:	Tax	Key: PWV
Property Owner's Name:	Phor	ne Number:
RESPONSIBLE P	PARTY INFORMATION - All invoices will be maile	ed to this address.
Business Name:	F	-EIN:
Person Responsible for Payment / Bu	usiness Contact Name:	
Mailing Address:		
Responsible Party / Contact Phone No	umber:	_
Responsible Party / Contact Email Ad	ldress:	
AGREEMENT / SIGNATURES - Property Owner signature is required.		
to the Village for that professional's to whole, the Village Treasurer shall change Also, be advised that pursuant to the are the responsibility of the property. By signing this form, I, the undersignes, if the Village Attorney, Village Enganger sultants retained by the Village in ord of my activities, whether at my requestions.	ined by the Village in order to complete a pro- time and services and such service is not a se- arge those service fees incurred by the Village e Village of Pewaukee Code of Ordinances, ce y owner or responsible party. and, have been advised that pursuant to the Vigineer, Village Planner, or any other Village party and the request of the Village, I shall be ursuant to the Village of Pewaukee Code of Complete and Services.	ervice supplied to the Village as a set to the applicant/property owner. Ertain other fees, costs, and charges Village of Pewaukee Code of Ordinanctorofessional staff or other expert convides services to the Village because responsible for the fees incurred. In
The Village will place fees from un incurred services.	paid invoices on the real estate tax bill of th	e property that corresponds to the
Property Owner Signature:	Printed Name:	Date:
Applicant Signature:	Printed Name:	Date:
For Office Use Only	Staff Initials: Dat	e Received: