

**CITY OF MORRISON**  
**ECONOMIC DEVELOPMENT / HISTORIC PRESERVATION**  
**BUILDING IMPROVEMENT PROGRAM**  
**REQUEST FOR REIMBURSEMENT**

FOR OFFICE USE ONLY

Date Received \_\_\_\_\_

Refund amount \_\_\_\_\_

I, (We) hereby request reimbursement of building improvement expenses in accordance with the provisions of the Morrison Economic Development / Historic Preservation Building Improvement Program. I (We) certify that all work has been completed per the proposal submitted in the **REQUEST TO PARTICIPATE**.

Building Address \_\_\_\_\_

Building Owner \_\_\_\_\_

Owners Address \_\_\_\_\_

Name of Business (if applicable) \_\_\_\_\_

Total project cost \_\_\_\_\_

Please attach a copy of the paid invoice

\_\_\_\_\_

Date

\_\_\_\_\_

Owner's (Applicant's) signature

Please return to the City of Morrison  
200 West Main St  
Morrison, IL 61270