

OWNER'S CONTACT INFORMATION:

DATE: \_\_\_\_\_

\_\_\_\_\_  
NAME

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
(City Staff Member)

City of West Peoria  
Planning & Community Development  
2506 W Rohmann Ave  
West Peoria, IL 61604

Dear \_\_\_\_\_ (City Staff Member)

I, \_\_\_\_\_, am the sole owner of the property located at \_\_\_\_\_, in the City of West Peoria. Currently, \_\_\_\_\_ leases or rents this property from me.

I am aware that \_\_\_\_\_ plans to participate in the City of West Peoria Paint Program. I fully support his/her efforts to improve the appearance of my residential structure(s). Furthermore, I agree to participate in any necessary procedures in order to receive financial assistance by the City of West Peoria for the repainting of my residential property. I hereby consent to the tenant mentioned above participating in this program and receiving the entire reimbursement from the City.

Sincerely,

\_\_\_\_\_  
Property Owner or Authorized Representative

\_\_\_\_\_  
Authorized Representative Relationship to  
Property Owner (If Applicable)