



STORMWATER MANAGEMENT COMMISSION

Replacement Cost Questionnaire

4. Do you have a fireplace? Yes No
 Is it brick, stone or masonry? Yes No
 Is it a double, i.e., does it open into more than one room? Yes No

5. Each residence is assumed to have one bathroom with a toilet, sink and shower and/or tub, a kitchen sink, a water heater, laundry tub, washing machine hook-up, and an outdoor faucet.

Do you have any additional plumbing fixtures? Yes No
If so, please list them here:

6. What type of cooling and heating system do you have? Check the appropriate type:

- | | |
|--|--|
| <input type="checkbox"/> Central air conditioning | <input type="checkbox"/> Forced air heating |
| <input type="checkbox"/> Oil-fired heating | <input type="checkbox"/> Floor or wall furnace |
| <input type="checkbox"/> Electric baseboard or panel | <input type="checkbox"/> Hot water baseboard |
| <input type="checkbox"/> Other heating system? Describe: _____ | |

7. If your residence has any additions, please provide the following information:

- Porch square feet: _____
 concrete floor wood floor solid walls screened finished ceiling
- Breezeway square feet: _____
 concrete floor wood floor solid walls screened finished ceiling
- Patio or deck square feet: _____
 concrete floor wood floor
- Balcony square feet: _____
- Carport square feet: _____
- Attached garage square feet: _____
- Garage siding: same as main building
 or Describe: _____

8. Please provide an estimate of what you think your property is worth? _____

Please mail this completed form to:

Sharon Østerby
Lake County Stormwater Management Commission
500 W. Winchester Road
Libertyville, IL 60048

Or email this form as an attachment to: sosterby@lakecountyil.gov



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Statement of Interest

1. Property Owner(s) _____
2. The person(s) completing this form is/are the owner(s) of the property located at _____
3. The Lake County Stormwater Management Commission (SMC) administers a program to buy out flood-prone properties.
4. Prerequisites include: Property owner volunteers to participate in this program; your building is eligible based on program criteria; the grant application is funded. If these prerequisites are met, the SMC will pay for a fair market value appraisal of your property and will make an offer to buy your property. You will have the option to accept the offer, to reject the offer, or to contest the offer and have your own appraisal done.
5. **This program is voluntary and non-binding.** You are not required to participate in this program or to sell this property and may drop out of the program at any time. At no time will the SMC consider use of its power of eminent domain to acquire your property should negotiations fail.
6. If you accept the acquisition offer, the SMC will pay the following Sellers closing costs [Title report and Title Insurance, parcel survey, and Title Company's closing fees].
7. Please call Sharon Østerby at 847/377-7706 should you have any questions.

Please check the appropriate box and sign the space to the right.

- I am interested in participating in this program _____
- I am not interested in participating in this program _____

Filling in this form is only a statement of interest and does not bind the homeowner to sell their home.

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Flood-Prone Property Survey

Name: _____

Address: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____ Email: _____

Age of Home: _____

Foundation Type: _____

Basement: Yes _____ No _____

Type of Residence: (Owner Occupied-Primary Residence, Owner Occupied-Secondary Residence or Rental):

Do you participate in the National Flood Insurance Program? Yes _____ No _____

Policy Number: _____

Insurance Company: _____

Flooding History (please provide past flooding information such as dates, level of flooding, locations of affected areas, insurance claims, and any other pertinent information):
