

CITY OF BROOK PARK, OHIO

ORDINANCE NO.: 7214-1988

CHAPTER 938

GRASS CUTTING SERVICE

938.01 **GRASS CUTTING SERVICE**

There is hereby created a grass cutting service for Senior Citizens and physically disabled residents of the City who reside in a single-family dwelling, and who meet the qualifications as outlined in Section 938.02 of this ordinance.

938.02 **QUALIFICATIONS**

Each registrant shall be a Senior Citizen or physically disabled person as defined herein.

(A) Senior Citizens must satisfy all of the following:

1. At least sixty-five (65) years of age; and
2. Retired, whose earnings excluding retirement benefits, do not exceed the allowable earned income under social security before taxes are taken; and
3. Must be the owner of his/her residency; and
4. May not reside with an able-bodied individual capable of cutting grass; and
5. Shall release the City, its servants, agents and employees from any liability arising out of the providing of this service.

(B) Physically Disabled, regardless of age, must satisfy all of the following:

1. Such individual shall submit a doctor's certification that activity such as grass-cutting would be adverse to the person's health; and
2. May not reside with an able-bodied individual capable of cutting grass; and
3. Shall release the City, its' servants, agents and employees from any liability arising out of grass cutting on the registrant's property.

938.03 **REGISTRATION AND FEE**

Each resident eligible for grass-cutting services must annually make written application with the City of a form and in a manner provided by the Mayor's office; and shall annually pay a non-refundable fee of five dollars (\$5.00).

938.04 **REQUIREMENTS**

Each eligible resident must own, and keep in good working order a lawnmower, which will be operated by City personnel for this program. The grass of each eligible resident will be scheduled for cutting once a week for the duration of each program year of ten (10) weeks. However, in the event it rains on the scheduled day, **OR** if the resident is not home when City personnel arrive the grass will not be cut on that day. Further, in these instances it will not be possible for a make-up of the scheduled day to be arranged.



CITY OF BROOK PARK, OHIO – GRASS CUTTING SERVICE PROGRAM

PLEASE READ ATTACHED ORDINANCE NO. 7214-1988 CHAPTER 938

PLEASE PRINT:

Name _____ Spouse's Name _____

Address _____ Phone No. _____

Date of Birth _____ Spouse's Date of Birth _____

1. Are you and your spouse fully retired? YES _____ NO _____

2. Do you and your spouse have income from any gainful employment? YES _____ No _____

3. Illness or disability? YES _____ NO _____

If yes, explain: _____

4. I have submitted a doctor's certification which states that grass cutting is adverse to my health. (Submit if under age 65 and/or submit if age 65 & not retired) YES _____ NO _____

5. Is there any other person(s) residing at this same address? YES _____ NO _____

If yes, names(s) and birthdate (month & year): _____

*Explain why service is requested: _____

6. I UNDERSTAND THAT:

(a) I must be the owner of a single-family dwelling. YES _____ NO _____

(b) I must own & keep in good working order a lawnmower, which will be operated by city personnel. YES _____ NO _____

(c) The grass cutting service will be done once a week for ten (10) weeks. YES _____ NO _____

(d) In the event it rains on the scheduled day, or if I am not home when the city personnel arrives to cut the grass, or on the July 4th Holiday, the grass will not be cut until the following week/day scheduled. YES _____ NO _____

(e) If a grass catcher is on lawnmower, I will supply a container for grass to be put into. YES _____ NO _____

(f) Grass will not be raked, trimmed, edged, etc. YES _____ NO _____

(g) If eligible, \$5.00 registration fee is not refundable. YES _____ NO _____

7. I herewith deposit \$5.00 as a registration fee, which will be returned to me if I am determined to be ineligible for this service. YES _____ NO _____

8. I hereby release the city, it's servants, agents and employees from any liability arising out of the grass cutting service, on my property. YES _____ NO _____

9. I understand that all of the above must be complied with and that further, the City of Brook Park reserves the right to accept or deny an application based on the information presented. YES _____ NO _____

You will be notified by postcard what day you are scheduled for grass cutting.

Signature _____ Date _____

Remarks _____
