

**CLOUD COUNTY NEIGHBORHOOD REVITALIZATION DISTRICT 2010
APPLICATION FOR TAX REBATE**

Date _____ Fee \$100 _____ Fee \$150 (Late) _____ Application no. _____

The late fee applies to any project commenced more than 30 days prior to making application

Building Permit Date (City of Concordia) _____ Building Permit Date (City of Clyde) _____

Permit Number (City of Concordia) _____ Permit Number (City of Clyde) _____

(PLEASE PRINT OR TYPE)

PART 1

OWNER'S NAME _____ DAYTIME PHONE _____

OWNER'S MAILING ADDRESS _____

PROPERTY ADDRESS (Construction Site) _____

PARCEL IDENTIFICATION NUMBER _____
(Get Parcel ID number from your tax statement)

LEGAL DESCRIPTION OF PROPERTY _____

(Add additional page if necessary)

IS THE PROPERTY LOCATED IN THE CONCORDIA TIF DISTRICT? Yes No

PROPERTY TYPE (Check one) Residential Commercial/Industrial/Agriculture

AGE OF PRINCIPAL BUILDING (existing structure) _____

WILL ANY BUILDINGS BE DEMOLISHED Yes No

LIST AND DESCRIPTION OF PROPOSED IMPROVEMENTS _____

(Be specific - use additional page if necessary)

Please complete other information on back

COST OF IMPROVEMENTS \$ _____ Actual Estimated

(Should include all materials & Labor)
(Please include invoices, quotes, blue prints, sketches, etc.)

DATE CONSTRUCTION WILL COMMENCE _____

DATE CONSTRUCTION SHOULD BE COMPLETE _____

BY _____
(Property Owner's Signature)

DATE _____

PART 2

For Property owner's Use Only

AS OF JANUARY 1 FOLLOWING COMMENCEMENT OF CONSTRUCTION THE IMPROVEMENTS ARE:

COMPLETE

INCOMPLETE

BY _____
(Property Owner's Signature)

DATE _____

For County Appraiser's Use Only

APPRAISED VALUATION PRIOR TO CONSTRUCTION

\$ _____

BY _____
(County Appraiser)

DATE _____

APPRAISED VALUATION AFTER CONSTRUCTION

\$ _____

NET DIFFERENCE(basis)

\$ _____

THE IMPROVEMENTS MADE TO THIS PROPERTY DO DO NOT MEET THE REQUIRED INCREASE IN APPRAISED VALUATION (\$30,000)

BY _____
(County Appraiser)

DATE _____

For County Clerk's Use Only

ARE THE APPLICANT'S PROPERTY TAXES (Real & Personal) CURRENT AND ALL INTEREST, PENALTIES AND SPECIAL ASSESSMENTS PAID? YES NO

BY _____
(County Clerk's Office)

DATE _____