

**COUNTY OF SUMNER
NEIGHBORHOOD REVITALIZATION PLAN**

Part 1 (A)

APPLICATION FOR TAX REBATE

(A non-refundable \$100.00 application fee must accompany this application.)

*****A COPY OF BUILDING PERMIT IS REQUIRED BEFORE COUNTY CAN ACCEPT APPLICATION *****

*******PICTURES WILL BE TAKEN FRIDAY'S AFTER APPLICATION IS RECEIVED*******

Application Number _____ Cama Parcel ID Number _____

Owner/List of Owners's Name _____

_____ Phone No: _____

Owner's Mailing Address _____

Address of Property _____ School District _____

Legal Description of Property _____

.....
PROPOSED PROPERTY USE
.....

Residential: () New () Rehab () Rental or () Owner-Occupied
 () Residence () Other (Explain) _____
 () Single Family () Multi-Family Number of Units _____

Commercial: () New () Rehab () Rental () Owner-Occupied

Industrial: () New () Rehab () Rental () Owner-Occupied

Agriculture: () New () Rehab () Rental () Owner-Occupied

.....
Does this Applicant own the land? _____ Yes _____ No

Would you have proceeded with this project if this program was not available? Yes No

Will it be permanently attached to the property? _____ Yes _____ No

I have read and do hereby agree to follow all application procedures and criteria. I further understand that this application will be void one year from the date below if improvements or construction has not begun on this project. I further agree to complete the questionnaire (s) attached to this application.

_____ Date _____
Signature of Owner

TAX STATUS VERIFIED	CURRENT	DELINQUENT
REAL ESTATE	()	()
PERSONAL PROPERTY	()	()
SPECIAL ASSESSMENTS	()	()
SIGNATURE OF SUMNER COUNTY TREASURER PERSONNEL _____		DATE _____

PART 2 - CONSTRUCTION PHASE DATA

APPLICATION NUMBER _____ CAMA PARCEL ID NUMBER _____

GENERAL

Please check one of the following that best describes the construction of your property.

- All Contractor built (turn key) Pre-built home moved on site Modular home
- Contractor built with owner participation All owner built Other _____

Amount of owner participation _____ Hours _____ Percent of project _____ Value _____

NEW RESIDENTIAL

Story height _____ Basement size _____ Heating and cooling _____

Sq. foot finished living area – basement _____ Ground floor _____ Upper floor _____

No. of bedrooms _____ No. of bathrooms _____ Sq. foot of unfinished area _____

Garage size _____ attached detached

RESIDENTIAL REMODEL

Sq. foot of living area added _____ Basement Ground floor Upper floor

Rooms to be remodeled (Please mark all that apply)

- living room bedroom bath kitchen
- dining room basement other _____

Rooms to be added (Please mark all that apply)

- living room bedroom bathroom kitchen
- dining room basement other _____

AGRICULTURAL

Type of building _____ Use of building _____

Building dimensions _____ Exterior wall material _____

Location of building _____

COMMERCIAL

Type of building _____ Use of building _____

Size of building _____ Wall height _____ Exterior wall material _____

AGRICULTURAL or COMMERCIAL REMODEL

Area to be remodeled _____ Type and use of Building _____

YOUR CONSTRUCTION RECEIPTS MUST ACCOMPANY THIS FORM

Materials \$ _____ Labor \$ _____ Total Cost \$ _____

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Part 3

CONSTRUCTION PROGRESS /PERCENT COMPLETE STATUS

(To be filed with County Appraiser on or before December 1)

Application Number _____ Cama Parcel ID Number _____

Owner's Name _____

Owner's Mailing Address _____

Address of Property _____ School District _____

Date of Original Application _____ Building Permit No. _____

_____ % complete as of December 1 following commencement.

_____ Date construction project applied for was considered complete.

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CLOSING TAX STATUS

TAX STATUS VERIFIED	CURRENT	DELINQUENT
REAL ESTATE:	()	()
PERSONAL PROPERTY	()	()
SPECIAL ASSESSMENTS	()	()

Signature of Sumner County Treasurer Personnel

DATE

SIGNATURE OF OWNER

DATE