SHERMAN COUNTY
NEIGHBORHOOD REVITALIZATION PLAN
TAX REBATE APPLICATION

*A non-refundable $50.00 application fee must accompany this application*

PART A & B
Residential; Agricultural; Commercial

Owner’s/Business Name________________________________________________________________________________________

Owner’s/Business Mailing Address________________________________________________________________________________

Email Address: ______________________________________________   Phone #_________________________________________

Proposed Property ___________________________________________ Parcel # _____________________

Legal Description of Property (use additional sheets if necessary)

Proposed Property Use (check all that apply)

___Residential   ( )New ( )Rehab ( )Rental ( )Owner-Occupied   ( )Single Family   ( )Multi-Family (# of Units__)

___Agriculture   ( )New ( )Rehab ( )Rental ( )Owner-Occupied   ( )Ag Building

___Commercial/Industrial   ( )New ( )Rehab ( )Rental ( )Owner-Occupied

Other_____________________________________________________________________________________________________

Do you own the Land?  Yes___ No___  Are your Taxes Current?   Yes___ No___

Is Project on a Foundation?  Yes___ No___  Is Project permanently attached to the property?   Yes___ No___

Building Permit # ___________________________________________ Proposed Property Dimensions__________________________

(permit required in city limits)

List any buildings to be demolished_______________________________________________________________________________

Start Date _____________________________________  Date of Completion__________________________________

Cost of Improvements: (please provide copies of project plans and estimated cost documents)

Labor__________________________________________  Material______________________________________________

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

___ All Contractor Built   ___ Pre-built Unit moved on site   ___ Modular Building   ___ Owner Built
___ Contractor Built w/Owner participation (% of participation______ Hours_____ Value___________)
___ Other

NEW RESIDENTIAL (complete all that apply)

Story Height_________ Basement Size_________ Heating/Cooling_________

Square feet of Finished Area:     Ground Floor_________ Upper Floor_____ Basement_______ Building_______

#of Bedrooms_________ # of Bathrooms_________ Square feet of Unfinished Area_______ Paving/Concrete_________

Framing Material______________ Exterior Wall Material______________ Roofing Material______________

Describe Improvements
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

RESIDENTIAL REMODEL (complete all that apply)

Square Feet of Area Added______________     ( )Basement ( )Ground Floor ( )Upper Floor

Area to be Remodeled ( )Living Room     ( )Dining Room ( )Bedroom ( )Bathroom ( )Kitchen ( )Basement
( )Other______________________________

Area to be Added ( )Living Room ( )Dining Room ( )Bedroom ( )Bathroom ( )Kitchen ( )Basement
( )Garage ( )Outbuilding ( )Other__________________________

Framing Material______________ Exterior Wall Material______________ Roofing Material______________

Heating/Cooling______________ Paving/Concrete______________

Describe Improvements
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

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AGRICULTURAL/COMMERCIAL (complete all that apply)

Agricultural ________ or Commercial___________

NEW ________ or REMODEL____________, if remodel what area_________________________________

Type of Building________________________________ Use of Building_________________________________

Building Dimensions______________________________ Exterior Wall Material__________________________

Wall Height ________________________

Describe Improvements

__________________________________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________________________________

I have read and do hereby agree to follow all the application procedures and criteria. I have not started any construction prior to making this application. I understand a final itemized statement of costs will need to be turned in when I have completed by project, this will be necessary to receive my rebate. 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.

_________________________________________________    _________________________________
Signature of Owner        Date
STATUS OF CONSTRUCTION COMPLETION

Owner’s/Business Name_____________________________________________________________

Proposed Property ___________________________ Parcel # _________________________

Original Application Date ___________________________

_____ Incomplete Project as of January 1, 20___, following commencement.

_____ Complete Project as of January 1, 20___, following commencement.

The Construction project applied for was considered complete on ___________________________

*An itemized statement of costs will need to be turned in, this will be necessary to receive the rebate.

If the project is partially complete you will need to complete and return Part C before December 15___. If the project is complete you will need to complete and return Part C and also provide the final itemized costs of the project before December 1 _____.

Please Note Failure to provide documentation in a timely manner could result in termination of the program.

Owner’s Signature____________________________________ Date ________________