

NEIGHBORHOOD REVITALIZATION PLAN FOR CLOUD COUNTY, KANSAS 2021

APPLICATION FOR TAX REBATE

Date _____ Fee \$200 _____ Application no. _____

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 _____

OWNER'S EMAIL _____

PROPERTY ADDRESS (Construction Site) _____

PARCEL IDENTIFICATION NUMBER _____

(Get Parcel ID number from your tax statement. Begins with 015)

LEGAL DESCRIPTION OF PROPERTY _____

(Add additional page if necessary)

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)

COST OF IMPROVEMENTS \$ _____ Actual Estimated

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

WILL ANY LABOR BE PERFORMED BY PROPERTY OWNER? YES NO

IF YES WHAT WILL BE COMPLETED BY PROPERTY OWNER? _____

DATE CONSTRUCTION WILL COMMENCE _____

DATE CONSTRUCTION SHOULD BE COMPLETE _____

BY _____
(Property Owner's Signature)

DATE _____

(Print Name)

I have read and understand the terms and conditions of the plan and agree to adhere to all dates and deadlines.
Initial Here

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
INCREASE IN APPRAISED VALUATION (\$20,000)

DO DO NOT MEET THE REQUIRED

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 _____

Application no. _____

PART 2

For Property owner's Use Only

PART 2 MUST BE RETURNED TO COMPLETE THE REBATE PROCESS

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

COMPLETE

BY _____
(Property Owner's Signature)

DATE _____

(Print Owner's Name)
