



HOUSING DIVISION

APPLICATION FOR TAX ABATEMENT CERTIFICATION

NEW CONSTRUCTION AND REHABILITATION/CONVERSIONS

Phase One: Preconstruction Conditional Approval for Tax Abatement

Phase One: Preconstruction Conditional Approval for Tax Abatement

Phase One Instructions: Please complete A through D (pages 1-3) of this application. You will receive a letter regarding conditional approval or denial of your application for tax abatement

A. Property Information: (Project Site/Address of Property to receive tax abatement)

Street Address: _____

City, State and Zip Code _____

Current Market Value* of Property (Land and Building(s)) _____

*Current Market Value as determined by Property Tax Valuation

Permanent Parcel Number/Sub Lot Number*: _____

*Your property must be located within one of the five (5) Columbus Neighborhood Investment Districts (maps and/or research assistance are available on request and on the web site).

- Area A: Linden, Area B: North of Broad, Area C: South Side, Area D: Hilltop, Area E: South of Main, Area F: Weinland Park, Area G: Franklinton, Gibbard CRA, Oak Street CRA

B. Property Owner Information

Name of Property Owner: _____

Street Address: _____

City, State and Zip Code: _____

Home Phone Number: (____) _____ Work Phone Number: (____) _____

Fax Number: (____) _____ E-Mail Address: _____

Does Property Owner owe:

- 1. Any delinquent taxes to the State of Ohio or a political subdivision of the State? Yes No
2. Any other moneys to the State or a political subdivision of the State that are past due, whether the amounts owed are being contested in a court of law or not? Yes No

D. Applicant Certification for Phase One Preconstruction Application:

The applicant certifies that all information in this application and all information furnished in support of this application are true and complete to the best of the applicant's knowledge and belief. Submission of this application expressly authorizes the City of Columbus to confirm statements contained within this application and to review applicable confidential records. As part of this application, the applicant authorizes the City of Columbus to request, directly to the City Division of Income Tax and/or the Ohio Department of Taxation, to release specific tax records to the City of Columbus, should issues of delinquent taxes arise.

I declare under the penalties of falsification (ORC Section 9.66(C)(1) and 2931.13(D)(1)) that this application, including all accompanying documents and statements, has been examined by me, and to the best of my knowledge are true, correct and complete.

Signature of Owner(s) of property as recorded

Date

Printed Name and Title

Return Pages 1-3 of the application to:

**Steve L. Soble, Manager
Residential Tax Incentive Program
Department of Development
Housing Division
50 W Gay Street, 3rd Floor
Columbus, OH 43215**

For further information regarding this program please call Steve Soble at (614) 645-8621 or by e-mail at lsoble@columbus.gov or visit our web site at <http://td.ci.columbus.oh.us/Neighborhoodsand Residents/housing/developer/NIDrti/nhoodinvestdis.asp>

Please note
Incomplete Applications will not be processed.
Applicant agrees to supply additional information upon request.
Property may be subject to inspection during the abatement period.
All work must be completed by December 31, 2011.

Phase Two: Post Construction Certification for Tax Abatement

Please Note: Phase Two of the Application must be filed within 6 (six) months of issuance of Certificate of Occupancy to be eligible.

Phase Two Instructions: Please complete E through H (pages 4-6) of the application. You will receive a letter regarding final approval or denial of your application for tax abatement certification.

E. Property Information: (Project Site/Address of Property to receive tax abatement)

Street Address: _____

City, State and Zip Code _____

Permanent Parcel Number/Sub Lot Number*: _____

*Your property must be located within one of the five (5) Columbus Neighborhood Investment Districts (maps and/or research assistance are available on request and on the web site).

- Area A: Linden Area B: North of Broad Area C: South Side
- Area D: Hilltop Area E: South of Main Area F: Weinland Park
- Area G: Franklinton Gibbard CRA Oak Street CRA

F. Property Owner Information

Name of Property Owner: _____

Street Address: _____

City, State and Zip Code: _____

Home Phone Number: (_____) _____ Work Phone Number: (_____) _____

Fax Number: (_____) _____ E-Mail Address: _____

G. Final Construction Information

New Construction Final

If applying for new construction, please complete and submit the following:

- Total actual cost of new construction: \$ _____
- Provide the City of Columbus with a copy of the executed contract with a licensed/registered contractor (Attach copy).
- Building Permit Number (Attach copy): _____
- Issuance Date of Building Permit: _____
- Completion Date (Attach copy of **Certificate of Occupancy**): _____
- Proof of ownership (Attach copy): Yes _____ No _____

Home Improvement Final

If applying for home improvement, please complete and submit the following:

- Total actual cost of home improvements: \$ _____. Include with the application documentation to support cost of improvements (Attach copy).

Two acceptable examples are:

- 1) The Affidavit of the draw payments of the construction contract. (Please ensure that the affidavit includes a description of the work completed.)
 - 2) A notarized list identifying the general categories of the work completed, the date the work was completed, and each category's expense. A labor cost for your own work can also be included.
- Provide the City of Columbus with a copy of the executed contract with a licensed/registered contractor (Attach copy).
 - Building Permit Number (Attach copy): _____
 - Issuance Date of Building Permit: _____
 - Completion Date (Attach copy of **Certificate of Occupancy**): _____
 - Proof of ownership (Attach copy)

