



# NEIGHBORHOOD REVITALIZATION PROGRAM

## Neighborhood Revitalization Program TAX REBATE APPLICATION

Part One:

Complete, sign, and turn in this portion of the application with a copy of your building permit to the Bourbon County Appraiser’s Office with a \$50 application fee within 60 days of the issuance of permit.

Property Owner’s Name: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Owner’s Mailing Address: \_\_\_\_\_

Property Address: \_\_\_\_\_ Fort Scott, KS 66701

Building Permit Number: \_\_\_\_\_

The following information can be found on your tax statement. If you do not have your tax statement you may call the County Appraiser’s Office to obtain the information.

Parcel Identification Number: \_\_\_\_\_

Legal Description of Property: \_\_\_\_\_

\_\_\_\_\_

*Use additional sheets if necessary.*

Check one of each for the following.

- Property Use:
- Residential
  - Commercial
  - Industrial
  - Property is within a Historic District on the National Historic Register

Please list the improvements to be made and the cost of each improvement. Be specific. Use additional sheets if necessary.

Improvements:	Cost:

Estimated Total Cost of Improvements:        \$ \_\_\_\_\_

Construction to Begin On:                                \_\_\_\_\_

Estimated Date of Completion:                                \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For County Appraiser's Office Use Only:**

\$50 Application Fee Received

As of \_\_\_\_\_, 20\_\_\_\_\_ the appraised valuation of the above mentioned property is:

Land:                        \$ \_\_\_\_\_

Improvements:            \$ \_\_\_\_\_

Total:                        \$ \_\_\_\_\_

Based upon the above listed improvements and associated cost supplied by the applicant, the improvements

MAY  MAY NOT meet the percentage tests for a tax rebate.

By: \_\_\_\_\_ Date: \_\_\_\_\_



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Part Two:

This portion to be completed by applicant and returned to the Bourbon County Appraiser's Office when construction is complete.

As of January 1<sup>st</sup> of the year following commencement, project was:

- Complete
- Incomplete

Actual Total Cost of Improvements: \$ \_\_\_\_\_

Construction Start Date: \_\_\_\_\_

Date of Completion: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_