

Attachment C

Application for Downtown Derry Revitalization Tax Relief Program



Site Property Owners:	Application # _____
Last name:	First name:
Last name:	First name:
Street Address:	
Address continued:	
Town/City	
State	Zip code

Property Address in Derry NH for Tax Relief Application		
Property name (if any):		
Street Address:		
Address continued:	Map:	Block: Lot#

Application fee of \$150.00 made out to Town of Derry NH: check # _____
NOTE: The applicant will need to pay reasonable costs associated with the Town recording the Covenant, between applicant and the Town, should this application be approved by the Town Council.

Is this a "renovation" project, or a "removal and replacement" project?

If renovation, proceed to next question. If replacement is proposed, also complete Section 9.

Year(s) built Square footage of existing building(s):

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Eligible or listed on state or National Register of Historic places? Yes ____ No ____ (see www.nh.gov.nhdhr). If “yes” describe how you intend to meet the US Secretary of Interior Standards for Historic Preservation:

Existing use(s) Include number of residential units and square footage per other use:

Proposed uses:

Does the Proposed Use(s) require a Change in Use?

Will the proposed use include additional residential units?

If yes, please describe, including if the units are eligible for subsidy or if they are market-rate rentals:

Is the proposed site located within an adopted Tax Increment Financing District?

Are there any federal, state or local grant funds that have been used on this property, or are proposed for this property? Describe below, including amounts, uses and dates of repayments.

NOTE that any use of federal or state funds that do not need to be repaid (grants) for the site after an application is submitted or approved may reduce or eliminate the tax relief.

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Project Description:

Describe the proposed work, cost and schedule for completion. The numbers below will be compared to the Building Permit application. NOTE: To be eligible for this tax relief incentive, the actual costs of the project must be at least 15% of the pre-rehabilitation assessed value, or \$75,000, whichever is less. Pre-application work is not eligible to be considered as part of the new costs.

Start date: Completion date: Total cost: \$

A. Structural (including roofs, foundations, basements, outbuildings, HVAC)

Description:

Projected completion date:

Cost: \$

B. Exterior alterations (including any work on exterior walls, signs, doors, entryway or sidewalks, lawns)

Description:

Projected completion date:

Cost: \$

C. Interior alternations (including ceilings, walls, doors, flooring, windows, lighting)

Description:

Projected completion date:

Cost: \$

D. Electrical

Description:

Projected completion date:

Cost: \$

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E. Plumbing

Description:

Projected completion date:

Cost: \$

F. Mechanical

Description:

Projected completion date:

Cost: \$

G. Accessibility, Fire and Safety

Description:

Projected completion date:

Cost: \$

H. Other

Description:

Projected completion date:

Cost: \$

Applicant may attach copies of contracts with contractors, plot or building plans, building permit applications, sketches, renderings or photos that could help explain the project and how it meets the program requirements.

Section 9: Additional Requirements for the Removal of a Structure and Replacement:

Any application for replacement of a qualifying structure shall also submit a New Hampshire Division of Historic Resources "Individual Inventory Form" prepared by a qualified architectural historian and a letter from the Derry Heritage Commission that identifies any and all historic, cultural, and architectural value of the structure(s) that are proposed to be replaced, and the property where they are sited. Prior

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demolition will void this application. This application shall not be considered complete until such time as the Individual Inventory Form and letter are submitted.

Important Notice regarding “Original Assessed Value”: Per RSA-79-E 13(II) the base or original assessed value for any tax relief period is only set after the following two conditions are met:

1. Approval by the Town Council by vote at a meeting, and:
2. The applicant entering into a covenant with the Town and satisfactory to the Town to protect the public benefit.

The applicant shall not commence any of the improvements included in this application – including the demolition to any existing structure(s) - until such time as the application has been approved by Council. Improvements before that time will not count against the 15% or \$75,000 minimums.

Affidavit:

I have read and understand the Downtown Derry Revitalization Tax Relief Incentive and accompanying state legislation (RSA 79-E) and attachments, and am aware that this will be a public process including a public hearing overseen by the Town Council, to discuss the merits and eligibility of this application. I understand that there will be a subsequent need to grant a covenant in the property’s deed to the Town of Derry and will pay any reasonable expenses associated with the drafting and recording of the covenant.

I understand I will have to provide insurance coverage on the applicant property(s).

I understand this application will not be determined complete nor forwarded to the Council for their action until all the necessary information is provided to the Town.

Applicant Signature

Print Applicant’s Name

Date

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Planning Department acceptance as Complete: _____ date: _____

Action taken by Town Council, the reason(s) for the Finding of Public Benefit, or if denied, the reason(s) for that denial:

Duration, conditions and other considerations, including requirements for insurance:

Date of vote: