

Will it be permanently attached to the property? _____ Yes _____ No

Improvements and associated cost: (provide rough draft drawings and dimensions)

(Use additional sheets if necessary)

Estimated or Actual Cost of Improvements: Materials \$ _____ Labor \$ _____
(Documentation is needed, even hand-written estimates)

Construction estimated to begin on: _____

Estimated date of completion of construction: _____

List of buildings proposed to be or actually demolished: _____

I have read and do hereby agree to follow all application procedures and criteria. I further understand that this application will void six months from the date below, if improvements or construction have not begun.

Signature of Owner

Date

****A non-refundable \$25 application fee must accompany this application.****

Acknowledgement

I have received a copy of the City of Rose Hill, Kansas, 2016 Neighborhood Revitalization Plan and the application form and by my signature, I have read and am applying for a Butler County tax rebate based on my investment and the incremental increase in appraised value of the project after improvements.

One dollar spent is not necessarily equal to one dollar of increased value. Any questions regarding said values should be addressed to the Butler County Appraiser’s Office.

I acknowledge this program is not official until the State Attorney General approves. In such scenario, my \$25.00 NRP application fee will be refunded. City of Rose Hill building permit fees associated with this application will not be refunded.

Signature of Owner

Date

I find this application complete and recommend its consideration for any and all tax rebates subject to the Butler County Kansas taxing authority.

Building Official

Date

Building Permit Number

FOR COUNTY APPRAISER’S USE ONLY

Based upon the above listed improvements and associated costs supplied by the applicant, the improvement **initially may** _____ **or may not** _____ meet the terms for a tax rebate.

By: _____
(Butler County Appraiser’s Office)

Date: _____

Copy to: **Applicant** _____ **County Appraiser** _____ **File** _____

**CITY OF ROSE HILL
2016 NEIGHBORHOOD REVITALIZATION PLAN
APPLICATION FOR TAX REBATE**

**PART II (Optional)
January Status of Completion**

Owner's Name: _____ Daytime Phone No. _____

Owner's Mailing Address: _____

Address of Property: _____

Building Permit # assigned: _____

As of January 1 following commencement of construction, the improvements are approximately _____% complete.

Signature of Applicant

Date

FOR COUNTY APPRAISER'S USE ONLY

As of _____, taxes and special assessments on this parcel of property
are _____ **or are not** _____ delinquent.

By: _____
(Butler County Appraiser's Office)

Date: _____

