



**CITY OF TAMPA
GROWTH MANAGEMENT & DEVELOPMENT SERVICES
HISTORIC PROPERTY AD VALOREM TAX EXEMPTION APPLICATION
PART II –REVIEW OF COMPLETED WORK**

SECTION 3

Instructions

Upon completion of the restoration, rehabilitation or renovation project, complete this part of the application with attached photographs of the completed work (views of site improvements, exterior and interior work for buildings) and submit to the City of Tampa Historic Preservation & Urban Design Office. Please call (813) 274-8920 for an appointment for your submittal. The **COLOR** photographs must be at least 3” x 5” and preferably formatted in a landscape orientation. Photographs should be the same angles and views as the *before* photographs included in Part I-Preconstruction/Section 2, of the application. Also included should be a comprehensive description of the photographs. Type or print clearly. The final recommendation of the ARC/BLC Board, with respect to the requested Historic Preservation Property Tax Exemption, is made on the basis of the photographs and descriptions in Part II.

1. Property identification and location:

Property Identification Number (PIN) or Folio Number: _____

Address of property: Street _____

City _____ County _____ Zip Code _____

2. Data on restoration, rehabilitation, or renovation project:

Project starting date _____ Project completion date: _____

Estimated cost of entire project: \$ _____

Estimated costs attributed solely to work on historic buildings or archaeological site: \$ _____

3. Owner Attestation: I hereby apply for the historic property tax exemption for the restoration, rehabilitation or renovation work described above and in Section 3, Part II of the Historic Ad Valorem Tax Exemption Application submitted for this project. I attest that the information provided is, to the best of my knowledge, correct, and that in my opinion the completed project conforms to *The Secretary of the Interior’s Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings*, and is consistent with the work described in Section 3, Part II of the Application. I also attest that I am the owner of the property described above or, if the property is not owned by an individual, that I am the duly authorized representative of the owner. Further, by submission of this Application and Request for Review of Completed Work, I agree to allow access to the property by representatives of the Historic Preservation & Urban Design Office, where such office exists, and appropriate representatives of the local government from which the exemption is being requested, for the purpose of verification of information provided in the Application and this Request. I understand that, if the requested exemption is granted, I will be required to enter into a Covenant with the City of Tampa and Hillsborough County granting the exemption in which I must agree to maintain the character of the property and the qualifying improvements for the term of the exemption. I also understand that falsification of factual representations in this Application or Request is subject to criminal sanctions pursuant to the Laws of Florida.

Print Name

Signature

Date

Complete the following if signing for an organization or multiple owners (See next page for additional owners):

Title

Organization name

Mailing Address _____

City: _____ State: _____ Zip Code: _____ Phone #: _____

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List Additional Owners:

Name _____

Street _____

City _____ State _____ Zip Code _____

Name _____

Street _____

City _____ State _____ Zip Code _____

Name _____

Street _____

City _____ State _____ Zip Code _____

If there are additional owners, provide the indicated information for each on a separate sheet of paper.



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Application Review:

Property Identification Number(PIN) or Folio Number: _____

Property Address: _____

The City of Tampa Historic Preservation & Urban Design Office has reviewed Part II, Section 3 (Request for Review of Completed Work) of the Historic Property Ad Valorem Tax Exemption Application for the above named property and hereby:

- () Determines that the completed improvements to the property **are consistent with the Secretary of the Interior’s Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings**, and other criteria set forth in Chapter 1A-38, F.A.C., and, therefore, **recommends approval** of the requested historic preservation tax exemption.
- () Determines that the completed improvements to the above referenced property **are not consistent with the Secretary of the Interior’s Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings**, and other criteria set forth in Chapter 1A-38, F.A.C., and, therefore, **recommends denial** of the requested historic preservation tax exemption for the reasons stated in the Review Comments below.

Review Comments:

Signature _____
Dennis Fernandez, Manager, Historic Preservation & Urban Design

Date _____