APPLICATION FOR CITY OF CARROLL HOUSING INCENTIVE PROGRAM

Please type or print

Property address:		
Legal Description or Parcel Nu	mber:	
Applicant:		
Address:		
City:	State:	_
Phone:		_
Current Property Value (from	assessor's records)	
Land: \$	Building(s): \$	
Brief Description of Project:		
Estimated Cost of Actual Build	ling Improvements: \$	
Start Date:		_
Estimated or Actual Completion	on Date:	_

Note: No change may be made once an application is approved without approval of the Carroll City Council.

Acknowledgments:

A copy of the building permit is attached.

The property to which improvements are made conform to all applicable city codes.

The applicant certifies that all information in this application and all information provided in the support of this application is given for the purpose of obtaining a housing incentive from the City of Carroll and is true and complete to the best of the applicant's knowledge. The applicant acknowledges that no incentive will be received unless it is approved by the Carroll City Council. The applicant understands and acknowledges the rules of the Program and acknowledges that incentive eligibility is subject to the Program rules.

Applicant's Signature:	D	Date Signed:	
City Council Action:			
Approved	Date:		
Disapproved	Date:		
Reason for disapproval:			