

APPLICATION FOR CITY OF CARROLL HOUSING INCENTIVE PROGRAM

Please type or print

Property address: _____

Legal Description or Parcel Number: _____

Applicant: _____

Address: _____

City: _____ **State:** _____

Phone: _____

Current Property Value (from assessor's records)

Land: \$ _____ **Building(s):** \$ _____

Brief Description of Project: _____

Estimated Cost of Actual Building Improvements: \$ _____

Start Date: _____

Estimated or Actual Completion 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: _____ **Date Signed:** _____

City Council Action:

_____ Approved Date: _____

_____ Disapproved Date: _____

Reason for disapproval: _____