CITY OF TAMPA
PLANNING & DEVELOPMENT
HISTORIC PROPERTY AD VALOREM TAX EXEMPTION APPLICATION
PART I – PRE-CONSTRUCTION

SECTION 1

Evaluation of Property Eligibility:

Your submission cannot be evaluated unless the application is complete and all required supporting materials are provided. In the event of any discrepancy between the application form and other supplementary material submitted with it (such as architectural plans, drawings and specifications), the application form shall take precedence. Type or print clearly. If additional space is needed, attach additional sheets.

1. Property identification and location:

Property Identification Number or Folio Number (from tax records):_____
Attach legal description of property

Address of property: _____

City_____ Zip Code_____

( ) In a Local Historic District   ( ) A locally designated Landmark
( ) In a National Register District

Name of historic district (if applicable)_____

2. Owner information:

Name of individual or organization owning the property_____

_____

Mailing address_____

City_____ State_____ Zip code_____

Daytime Telephone Number (_____) _____
If the property is in a multiple ownership, attach a list of all owners with their mailing addresses.

3. Owner Attestation:

I hereby attest that the information I have provided is, to the best of my knowledge, correct, and that I own the property described above or that I am legally the authority in charge of the property. Further, by submission of this Application, I agree to allow access to the property by representatives of the City of Tampa Architectural Review & Historic Preservation Office and appropriate representatives of the local government from which the exemption is being requested, for the purpose of verification of information provided in this Application. I also understand that, if the requested exemption is granted, I will be required to enter into a Covenant with the local governments 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.

_____   _____   _____
Name   Signature   Date

Complete the following if signing for an organization or multiple owners:

_____   _____
Title   Organization name

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Evaluation of Property Eligibility:

4. Description of Physical Appearance:

Date of Construction_____ Date(s) of Alteration(s)_____

Has building been moved? ( ) Yes ( ) No   If so, when?_____

5. Statement of Significance:

6. Photographs and maps:
Attach photographs and maps to application.

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SECTION 2

Description of Improvements:

Property Identification Number or Folio Number _____

Property Address_____

Feature 1

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 2

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 3

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

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SECTION 2

Description of Improvements:

Feature 4	
Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 5	
Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 6	
Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

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SECTION 2

Description of Improvements:

Feature 7

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 8

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 9

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

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SECTION 2

Description of Improvements:

Feature 10

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 11

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

Feature 12

Feature_____ Approx. date of feature_____ Describe existing feature and its condition: Photo no._____ Drawing no._____	Describe work and impact on existing feature:

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SECTION 1 – ELIGIBLITY AND SECTION 2 – DESCRIPTION OF IMPROVEMENTS

Application Review:

Property Identification Number (PIN) or Folio Number: _____

Property Address:_____

The City of Tampa Architectural Review & Historic Preservation Office has reviewed the Pre-Construction Historic Ad Valorem Tax Exemption Application for the above named property and hereby:

( ) Certifies that the above referenced property **qualifies as a historic property** consistent with the provisions of s. 196.1997 (11), F.S.

( ) Certifies that the above referenced property **does not qualify as a historic property** consistent with the provisions of s. 196.1997 (11), F.S.

( ) Determines that the proposed improvements to the above referenced property **are consistent** with the Secretary of Interior's Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings, and the criteria set forth in Chapter 1A-38, F.A.C.

( ) Determines that the proposed improvements to the above referenced property **are not consistent with the Secretary of Interior's Standards** for Rehabilitation and Guidelines for Rehabilitating Historic Buildings, and the criteria set forth in Chapter 1A-38, F.A.C. All work not consistent with the referenced Standards, Guidelines and criteria are identified in the Review Comments. *Recommendations to assist the applicant in bringing the proposed work into compliance with the referenced Standards, Guidelines and criteria are provided in the Review Comments.*

Review Comments:_____
_____ _____
_____
_____
_____

Signature _____

Dennis Fernandez, Manager, Architectural Review & Historic Preservation

Date_____