

# DEVELOPMENT & GROWTH MANAGEMENT DEPARTMENT ARCHITECTURAL REVIEW COMMISSION/BARRIO LATINO COMMISSION HISTORIC PROPERTY AD VALOREM TAX EXEMPTION APPLICATION PART I – PRE-REHABILIATION

	This section to be com	pleted by Architectural Review	& Historic Preservation staff.
ARC/BLC#	Receipt No.:	Date Received:	Verification of Legal Description □
Public Hearing Date:_		Initials:	
PROPERTY ADDRESS:_			
PROPERTY OWNER	R OF RECORD:		PHONE #:
OWNER MAILING	ADDRESS:		E-MAIL:
CITY, STATE:			ZIP CODE:
AUTHORIZED AGENT:_			WORK PHONE #:
			CELL PHONE #:
AGENT MAILING A	DDRESS:		E-MAIL:
CITY, STATE:			ZIP CODE:
PROPERTY IDENTIFICAT	TION NUMBER (PIN) OR	FOLIO NUMBER:	
			SED USE:
HISTORIC DESIGNATION	N		
Contributing to Lo	cal Historic District:	☐ Hyde Park ☐ Seminole	e Heights □ Tampa Heights □ Ybor City
☐ Local Historic La	andmark		
are required to attend to Commission/Barrio Lati	the Public Hearing. All pl no Commission."		omplete applications only. The owner and/or agent delineated in "Submission to the Architectural Review mplete.
SIGNED (Property Ov	vner/Agent)	SIGNED	(Property Owner/Agent)
STATE OF FLORIDA –	COUNTY OF HILLSBOR	OUGH	
			al presence or □ online notarization, this operty Owner(s)/Agent(s). Such person(s) is/are se(s)/id card(s) as identification.
		Signature:	
[AFFIX NOTAR	Y PUBLIC SEAL]	Printed Name: _ Notary Public, S My commission	tate of Florida



## DEVELOPMENT & GROWTH MANAGEMENT DEPARTMENT ARCHITECTURAL REVIEW COMMISSION/BARRIO LATINO COMMISSION HISTORIC PROPERTY AD VALOREM TAX EXEMPTION APPLICATION AFFIDAVIT TO AUTHORIZE AGENT

STA	TE OF FLORIDA - COUNTY OF HILLSBOROUGH	
(NA	ME OF ALL PROPERTY OWNERS)	who reside(s) a
(AD	DRESS: STREET, CITY, STATE, ZIP)	(PHONE NUMBER)
beir	ng first duly sworn, depose(s) and say(s):	
1.	That (I /we) are the owner(s) and record title holde	er(s) of the following property:
2.	That this property constitutes the property for whi	ich a request for proposed work: (NATURE OF REQUEST)
	is being applied to the <b>Architectural Review Comm</b>	nission/Barrio Latino Commission.
3.	That the undersigned (has/have) appointed and (d	oes/do) appoint: (Agent Name)
	(Address)	(Phone)
	as (his/her/their) agent(s) to execute any petitio	ons or other documents necessary to affect such petition;
4.	That this affidavit has been executed to induce th	ne City of Tampa, Florida to consider an act on the above described property;
5.	That (I/we), the undersigned authority, hereby ce	ertify that the foregoing is true and correct.
SI	GNED ( <b>Property Owner</b> )	SIGNED ( <b>Property Owner</b> )
_ SI	GNED ( <b>Property Owner</b> )	SIGNED ( <b>Property Owner</b> )
S	TATE OF FLORIDA – COUNTY OF HILLSBOROUGH	1
_	day of, 20, l	e, by means of □ physical presence or □ online notarization, this by the above named Property Owner(s)/Agent(s). Such person(s) a/an state driver license(s)/id card(s) as identification.
15	, are a personally known to me or a produced a	
	[AFFIX NOTARY PUBLIC SEAL]	Signature:  Printed Name:  Notary Public, State of Florida  My commission expires: Serial No if any:



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#### SECTION 1 - EVALUATION OF PROPERTY ELIGIBLITY

Droporty identification and locations

#### Instructions

Your application will not be accepted unless this form is complete and all required supporting materials are provided. In the event of any discrepancy between the application form and other supplementary material submitted (such as architectural plans, drawings, and specifications), the application form shall take precedence. Type or print clearly. Attach additional sheets if necessary.

Τ.	Property identification and location	)II.					
	Property Identification Number (PIN) or Folio Number:						
		(Attach a copy of the owner's deed to the property.)					
	Property Address:						
	City:	Cou	unty:		Zip Code:		
	☐ Contributing to the local		Historic D	istrict	$\square$ Local Historic Landmark		
2.	Owner information:						
	Name of individual(s) or organization	on owning the pro	pperty:				
	Mailing Address:						
	City:						
3.	Owner Attestation: I hereby attest the property described above or the Application, I agree to allow access Preservation Division and appropri for the purpose of verification of in granted, I will be required to entermaintain the character of the prop	nat I am legally the to the property b ate representative of formation provide into a Covenant v	e authority in charge of t by representatives of the es of the local governme ed in this Application. I a with the local governmer	he property. Fu City of Tampa A nt from which t Ilso understand Its granting the	rther, by submission of this Architectural Review & Historic he exemption is being request that, if the requested exempti exemption, in which I must ag	ed, on is	
Pri	nt Name (Property Owner)		Signature		Date		
Pri	nt Name (Property Owner)		Signature		Date		
	mplete the following if signing for an cumentation of authorization.	organization or n	nultiple owners (see next	t page for additi	onal owners) and attach		
	le	Organizatio	on name				



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### **SECTION 1 – EVALUATION OF PROPERTY ELIGIBLITY**

Additional Owners				
Name:				
Mailing Address:				
City:	State:	Zip Code:	Phone #:	
Name:				
Mailing Address:				
City:	State:	Zip Code:	Phone #:	
Name:				
Mailing Address:				
City:	State:	Zip Code:	Phone #:	
Name:				
Mailing Address:				
City:				
Name:				
Mailing Address:				
City:	State:	Zip Code:	Phone #:	

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



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### **SECTION 1 – EVALUATION OF PROPERTY ELIGIBLITY**

4. Description of Physical Appearance:	
Date of Construction Date(s) of Alteration(s)	
Has building been moved? ☐ NO ☐ YES If so, when?	
5. Statement of Significance:	
	I

### 6. Photographs and Maps:

Attach general photographs and a location map of the property.



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Feature 1	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Photo no Drawing no	
	l
Foothing 2	
Feature 2	Describe work and impact on existing feature:
FeatureApprox. date of feature	Describe work and impact on existing realure.
Approx. date of feature	
Describe existing feature and its condition:	
-	
Photo no Drawing no	
Feature 3	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describes and alternative for above and the second like	
Describe existing feature and its condition:	
Photo no Drawing no	



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Feature 4	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Photo no Drawing no	
Feature 5	Describe work and impact on existing feature:
Feature Approx. date of feature	Describe work and impact on existing reacure.
Approx. date of reactife	
Describe existing feature and its condition:	
Photo no Drawing no	
Feature 6	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Describe existing reactive and its condition.	
Photo no Drawing no	



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Feature 7	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe evicting feature and its conditions	
Describe existing feature and its condition:	
Photo no Drawing no	
Feature 8	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
-	
Photo no Drawing no	
Feature 9	
Feature 9 Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Photo no Drawing no	



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Feature 10	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Photo no Drawing no	
Prioto no Brawing no	
Feature 11	
Feature	Describe work and impact on existing feature:
Approx. date of feature	
Describe existing feature and its condition:	
Describe existing reactive and its containering	
Photo no Drawing no	
Feature 12	
Feature 12 Feature	Describe work and impact on existing feature:
Approx. date of feature	Describe work and impact on existing reature.
The provided of reactive	
Describe existing feature and its condition:	
Photo no Drawing no	



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SECTION 1 – EVALUATION OF PROPERTY ELIGIBLITY and SECTION 2 – DESCRIPTION OF IMPROVEMENTS

Ар	plication Review				
	Property Identification Number (PIN) or Folio Number:				
	Property Address:				
	e City of Tampa Architectural Review & Historic Preservation Division has reviewed Part I, Sections 1 and 2 of the Historic perty Ad Valorem Tax Exemption Application for the above-named property and hereby:				
( )	) Certifies that the above referenced property <b>qualifies as a historic property</b> consistent with the provisions of s. 196.1997 (11), F.S.				
( )	Certifies that the above referenced property <u>does not qualify as a historic property</u> consistent with the provisions of s. 196.1997 (11), F.S.				
( )	Determines that the proposed improvements to the above referenced property <u>are consistent</u> with <u>The Secretary of Interior's Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings</u> , and the criteria set forth in Chapter 1A-38, F.A.C.				
( )	) Determines that the proposed improvements to the above referenced property <u>are not consistent</u> with <u>The Secretary of Interior's Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings</u> 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. <i>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.</i>				
Re	view Comments:				
	Signature  Dennis Fernandez  Architectural Review & Historic Preservation Manager				

Date:\_\_\_