CITY OF WEST POINT

Application of Eligibility for City-Wide Urban Revitalization Tax Exemption

Pursuant to the provisions of Iowa Code Chapter 404 and West Point City Council Resolution No. 695-15 and accompanying Revitalization Plan, application is being made herewith for an Urban Revitalization Tax Exemption. Qualified real estate is eligible to receive a 100% taxation exemption on actual value increased by the improvements for a period of 3 years (Actual value increases of at least 10% for residential or multi-residential assessments and at least 15% for commercial assessments. Industrial classifications are not eligible for City exemptions but may be eligible for exemptions at the state level; please contact the Lee County Assessor's office.)

APPLICANT (OWNER OF RECORD): _____

ADDRESS: _____

_____

PHONE/CELL PHONE: _____

ADDRESS OF PROPERTY CLAIMED FOR EXEMPTION: _____

_____

EXISTING PROPERTY USE (Circle one): Vacant Residential Multi-residential Commercial Agricultural

TYPE OF IMPROVEMENTS (Circle one): New Construction/Addition General Improvements

DETAILS OF IMPROVEMENT (Attach drawing indicating details):

_____

_____

CURRENT PROPERTY VALUE: _____

ESTIMATED OR ACTUAL COST OF IMPROVEMENTS: _____

ESTIMATED OR ACTUAL DATE OF COMPLETION: _____

For Residential Rental Property:

Number of Units: _____ Date of Occupancy: _____

Name of Tenants occupying the building, if known (attach additional sheets if necessary):

_____

The applicant certifies that all information and documentation in this application is given for the purpose of obtaining an exemption from taxes and is true, correct, and complete to the best of the applicant's knowledge. Applicant authorizes interior inspection of the structure being claimed for exemption by the County Assessor or Field Staff.

Applicants Signature: _____

Date Signed: _____

Return form to: City of West Point, 313 5th St, PO Box 69, West Point, IA 52656

FOR OFFICE USE ONLY

CITY CLERK'S OFFICE:
The referenced application is/is not in conformance with the requirements of the City-wide Urban Revitalization Plan.

Signature: _____ Date: _____

Building Permit No.: _____ Dated: _____

CITY COUNCIL ACTION:
Date Meeting Held: _____
Application Approved: _____ Application Denied: _____
Comments: _____
_____
_____

COUNTY ASSESSOR:
Current Assessed Valuation: _____
Assessed Valuation with Improvements: _____
Eligible/Not Eligible for Tax Exemption: _____