

# Community Reinvestment Area Tax Exemption Program - Area #1

## City of Defiance

Name of Political Subdivision  
(To be filed with the appropriate Housing Officer)

1. \_\_\_\_\_ PH: \_\_\_\_\_  
Name of Real Property Owner
2. \_\_\_\_\_  
Address of Subject Property
3. Exemption sought for: new structure \_\_\_\_\_ Labor Cost \$ \_\_\_\_\_ Material Cost \$ \_\_\_\_\_ Total \$ \_\_\_\_\_  
remodeling \_\_\_\_\_ Labor Cost \$ \_\_\_\_\_ Material Cost \$ \_\_\_\_\_ Total \$ \_\_\_\_\_
4. Description of Project: \_\_\_\_\_
5. Date of project completion: \_\_\_\_\_ (Application **must** be submitted within six months after project is finalized.)
6. Does this project involve a structure of historical or architectural significance? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, attach written certification of such by this designating agency or authorized agent.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

**NOTE: ALL ABOVE INFORMATION MUST BE COMPLETE BEFORE APPLICATION CAN BE ACCEPTED.**

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### FOR OFFICIAL USE ONLY

1. Legal Description of Property Location:
2. Effective Date of appropriate Local Resolution:
3. Verification of construction: new structure \_\_\_\_\_  
remodeling \_\_\_\_\_
4. Project involves structure of historical or architectural significance: Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, written certification of appropriateness of the remodeling has been submitted by the designating agency or authorized agent: Yes \_\_\_\_\_ No \_\_\_\_\_
5. Project meets requirements for an exemption under ORC 3735.67. Period of Exemption for this improvement:  
Remodeling: \_\_\_\_\_ 7 years at 100% for remodeling of one and two family structures over \$2,500  
\_\_\_\_\_ 7 years at 100% for remodeling of dwellings of three or more families. Minimum investment is \$5,000  
\_\_\_\_\_ 7 years at 100% exemption for commercial and industrial projects. Minimum investment is \$5,000  
New Construction:  
\_\_\_\_\_ 15 years at 100% for construction of new dwellings, commercial or industrial structures.

I certify that the project described herein meets the necessary requirements for the Community Reinvestment Area Program in the City of Defiance, Ohio.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Housing Officer

**NOTE: ORIGINAL APPLICATION TO BE FILED WITH COUNTY AUDITOR.**

**Form Dated 9/2007: cancels all previous versions**