

Applicant Information:

Name of Property Owner(s)

Phone

Mailing Address of Property Owner(s)

Email

Address of Property to be Abated

Parcel Number

Project Information:

Type of Property? Owner Occupied Rental If rental, number of dwelling units: _____

Type of Construction? New Construction Renovation of Existing Dwelling

Total Cost of New Construction or Renovation

Date of Project Completion

Brief Description of New Construction or Renovation

Please Note:

- Valuation of the new construction and/or improvements will be made by the Franklin County Auditor's office.
- The Housing Officer may revoke the tax abatement any time after the first year if the property has building code violations or if delinquent taxes are owed on the property.
- Any person denied tax abatement by the Housing Officer may appeal in writing to the Community Reinvestment Area Housing Council which shall have the right to overrule any decision of the Housing Officer. Appeals from a decision of the Housing Council may be taken to the Franklin County Court of Common Pleas.
- This tax abatement is authorized by City of Gahanna Resolution SR-0016-2009 passed by Gahanna City Council on September 21, 2009. Gahanna City Council may rescind the resolution granting tax abatement at their discretion.

I affirm under penalties of falsification that this application, including any supporting documents and statements, has been examined by me and to the best of my knowledge and belief, is true, correct, and complete.

Signature of Property Owner(s)

Date

For City Use Only

As Housing Officer for the City of Gahanna, I certify that the project described herein meets the necessary requirements for the Community Reinvestment Area program and that this project will receive _____% tax abatement for a period of _____ years. The abatement term shall begin on the project completion date. This application meets the requirements for abatement under Ohio Revised Code section 3735.67(D)(1) _____ (D)(2) _____ (D)(3) _____.

Anthony Jones, Gahanna Housing Officer

Date

Date

1. Review Completed _____
2. Site Visit _____
3. Letter to Property Owner _____
4. County Notified _____