

**CITY OF EL DORADO  
NEIGHBORHOOD REVITALIZATION PLAN  
APPLICATION FOR TAX REBATE UNDER THE CITY OF EL DORADO**

**PART I**

Owner's Name: \_\_\_\_\_ Daytime Phone No. \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Address of Property: \_\_\_\_\_ School District No. \_\_\_\_\_

CAMA No. \_\_\_\_\_

(Found on your tax statement or call the County Appraiser's Office)

Legal Description of Property:  
(Use additional sheet if necessary)

Proposed Property Use:

RESIDENTIAL:    \_\_\_\_\_ New    **or**    \_\_\_\_\_ Rehab;    \_\_\_\_\_ Rental **or**    \_\_\_\_\_ Owner-occupied  
                                 \_\_\_\_\_ Residence            \_\_\_\_\_ Other (explain) \_\_\_\_\_  
                                 \_\_\_\_\_ Single Family **or**            \_\_\_\_\_ Multi-Family    \_\_\_\_\_ Number of Units

COMMERCIAL:    \_\_\_\_\_ New    **or**    \_\_\_\_\_ Rehab;    \_\_\_\_\_ Rental **or**    \_\_\_\_\_ Owner-occupied

INDUSTRIAL:    \_\_\_\_\_ New    **or**    \_\_\_\_\_ Rehab;    \_\_\_\_\_ Rental **or**    \_\_\_\_\_ Owner-occupied

AGRICULTURE:    \_\_\_\_\_ New    **or**    \_\_\_\_\_ Rehab;    \_\_\_\_\_ Rental **or**    \_\_\_\_\_ Owner-occupied

Improvements and Associated Cost: (provide rough draft drawings and dimensions)

\_\_\_\_\_

(Use additional sheets if necessary)

Estimated Date of Completion: \_\_\_\_\_

Estimated or Actual Cost of Improvements:    Materials \$ \_\_\_\_\_    Labor \$ \_\_\_\_\_  
(Documentation is needed, even hand-written estimates)

List of buildings proposed to be or actually demolished: \_\_\_\_\_

**Approved by Building Official: \_\_\_\_\_ (initials)**

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**PART I**  
Continued

Does the applicant own the land? \_\_\_\_\_ Yes      \_\_\_\_\_ No

Will the proposed project be on a foundation? \_\_\_\_\_ Yes      \_\_\_\_\_ No

Will it be permanently attached to the property? \_\_\_\_\_ Yes      \_\_\_\_\_ No

I have read and do hereby agree to follow all application procedures and criteria. I further understand that this application will void one year from the date below, if improvements or construction have not begun.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Address

\*A non-refundable \$25 application fee must accompany this application.

**FOR COUNTY APPRAISER'S USE ONLY**

Based upon the above listed improvements and associated costs supplied by the applicant, the improvement will \_\_\_\_\_ or will not \_\_\_\_\_ meet the terms for a tax rebate.

By: \_\_\_\_\_  
(Butler County Appraiser's Office)

Date: \_\_\_\_\_

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**PART II  
COMMENCEMENT OF CONSTRUCTION**

Building Permit No. \_\_\_\_\_  
(If applicable)

Construction Estimated to Begin on: \_\_\_\_\_

Estimated date of Completion of Construction: \_\_\_\_\_

By: \_\_\_\_\_  
(Applicant's Signature)

Date: \_\_\_\_\_

Property Address: \_\_\_\_\_

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**PART III  
STATUS OF CONSTRUCTION/COMPLETION**

Permit Number: \_\_\_\_\_

\_\_\_\_\_ Incomplete Project as of January 1 following commencement.

\_\_\_\_\_ Complete Project as of January 1 following commencement.

\_\_\_\_\_ City Final Inspection.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant Signature)

Project Address: \_\_\_\_\_

**FOR COUNTY APPRAISER'S USE ONLY**

The above improvements:

\_\_\_\_\_ Meet the 10% increase in market value minimum investment for residential property.

\_\_\_\_\_ Does **not** meet the 10% increase in market value minimum investment for residential property.

\_\_\_\_\_ Meets the 15% increase in market value minimum investment for commercial/industrial property.

\_\_\_\_\_ Does **not** meet the 15% increase in market value minimum investment for commercial/industrial property.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Butler County Appraiser's Office)

**FOR COUNTY CLERK'S OFFICE USE ONLY**

As of \_\_\_\_\_ 20\_\_, taxes on this parcel \_\_\_\_\_ are current or \_\_\_\_\_ are not current.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Butler County Clerk's Office)