

Part 1 - City of Independence, Kansas

Neighborhood Revitalization Program - Application for Property Tax Rebate

Applicant Information

Owner's Name:

Mailing Address:

Daytime Phone Number:

Email Address:

Property Address:

Legal Description of Property:

Parcel Identification Number (Use the number on your tax statement or call the County Appraiser's Office 620-330-1050):

Building Permit Number (if applicable):

Project Information

Current Use of Property:

Proposed Use of Property:

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Proposed Improvement (check applicable categories):

Commercial: New Rehab Rental Owner-occupied

Industrial: New Rehab Rental Owner-occupied

Residential: New Rehab Rental Owner-occupied

List all Improvements & Associated Costs (attach drawings, dimensions and/or estimates):

Description	Materials	Labor
Total Project Cost:	Estimated Date of Completion:	

Did you qualify and receive a Homestead Refund from the State of Kansas? Yes No

If so, what is the amount of the refund?	
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Acknowledgment and Agreement

I have read and agree to follow all application procedures and eligibility criteria under the City of Independence Neighborhood Revitalization Plan. I understand this application will expire one year from the date below if improvements or construction have not begun. I also agree to complete any required documentation or follow-up materials as requested.

I understand that any delinquency in real estate taxes or special assessments on any property I own in Montgomery County will disqualify me from receiving a rebate for that tax year, and any rebate lost due to delinquency cannot be retroactively restored.

If I become delinquent a second time under the same application, I will be permanently disqualified from receiving any further rebates for that specific project. This disqualification does not prevent me from submitting a new application for a different project, provided I am fully compliant at that time. Tax delinquency caused by escrow mismanagement will not count against me for disqualification purposes.

I also acknowledge that construction or improvements must be completed within two years of the application approval date unless a written request for a one-time extension of up to 12 months is approved by the City Commission.

Signature of Owner:	Date:
Signature of Co-Owner (if applicable):	Date:

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Administrative Review

City Clerk Approval:

Signature of City Clerk:	Date:
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Building Inspector Approval:

The project is located inside the Independence City limits and outside the 100-year floodplain.

Signature of Building Inspector:	Date:
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For County Appraiser's Use Only

The above improvements meet the minimum investment requirement for new or rehab projects.

Signature of County Appraiser:	Date:
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The appraised valuation of this property is:

Land = \$	Improvements = \$	Total = \$
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Montgomery County Appraiser's Office

For County Treasurer's Office Use Only

As of _____, 20____, taxes on this parcel: Are current Are not current

Signature of County Treasurer:	Date:
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Submission Instructions

Return Part 1 of the completed application within 60 days of building permit issuance to:

City Clerk's Office
City Hall
120 N. 6th Street
Independence, KS 67301

A \$100 non-refundable check, made payable to the Montgomery County Appraiser, must be included with Part 1 of the application. For questions, call 620-332-2500, Ext. 702 or email CityClerk@IndependenceKs.gov.

Part 2 - City of Independence, Kansas
Neighborhood Revitalization Program - Application For Tax Rebate
Certification Of Construction Completion

This form (Part 2) must be completed, signed, and submitted to the City Clerk's Office after the project is finished. However, it is only valid if the \$100 non-refundable application fee was submitted with Part 1 of the application within 60 days of building permit issuance.

Final cost and a list of any changes from the original application (Part 1) must be included with this form.

The owner is required to provide receipts for the construction of the structure or improvement.

Owner's Name:
Daytime Phone #:
Owner's Mailing Address:
Parcel Identification #:
Date of Completion:
Certificate of Occupancy Date (if applicable):
Total Project Cost: \$

Owner Certification

I hereby certify that the project applied for under the City of Independence Neighborhood Revitalization Program is complete, and all required building inspections have been completed.

Signature of Owner: _____

Date: _____

Signature of Co-Owner (if applicable): _____

Date: _____

Acknowledgment of Neighborhood Revitalization Project Completion

Reviewed and Approved by: _____ Building Inspector

Date: _____

County Appraiser Certification

This certifies that the construction project at the above location has been inspected and verified for the Neighborhood Revitalization Program.

Signature of County Appraiser: _____

Date: _____

STATEMENT AS OF _____, 20_____

Received application & fee of \$_____

By: _____ County Clerk

Date: _____