City of Springfield



Development & Public Works

225 Fifth Street

Springfield, OR 97477

**Low-Income Rental Housing Property Tax Exemption**

City Application Fee of $\_\_\_\_\_\_, includes Lane County Assessor processing fee of $\_\_\_\_\_, which will be refunded to the applicant if this application is not approved.

Notice: You may be subject to other reasonable costs, including appraisal costs if such costs are incurred by the City or County in processing this application, which must be paid prior to final approval being granted.

|  |
| --- |
| **Section A – Applicant Information** |
| **Name/Company:** |
| **Contact Person: Phone:** |
| **Mailing Address:** |
|  |
| **Email Address:** |
| **Is the Applicant:**  ***A public benefit corporation?* Yes\* No**  ***A religious corporation?* Yes\* No**  \*If you answer Yes, please attach as Exhibit A documentation that the applicant is a Public Benefit or Religious Corporation, as defined in ORS 65.044 to 65.067. |
| **Section B – Property Information** |
| **Property Owner:** |
| **Property Address:** |
| **Assessor’s Map and Tax Lot Number(s):** |
| **Portion of Property for which exemption is sought**  ***All* or *The following described portion*:** |
| **Description of the purpose of the project: (Please include the overall description of the project, including number of housing units, broken down by bedroom size and proposed rent prices for each).**  **All of the property for which exemption is sought will be used for this purpose**  **The following described portion of the property will be used for this purpose:** |
| **Project Construction Dates**  ***Commencement of Construction*:**  ***Anticipated Completion*:** |
| **Yes No Will the development cause displacement of low-income persons? If yes, please explain mitigating factors that the City should consider:** |
| **Yes No Will the development cause destruction of historic property?** |
| **Yes No (If you are NOT a public benefit or religious corporation) The required rent payment reflects, or will reflect, the full value of the property tax exemption.** |
| **Describe how the tax exemption will benefit project occupants:** |
| **Yes No The property is *unoccupied*.**  **Yes No The property is *occupied*.** |

The foregoing application, together with the application fee set forth above, is hereby submitted requesting an exemption from ad valorem taxes for the property described herein for a period of twenty (20) years, commencing with the year 20\_\_\_\_\_.

If this application is submitted on behalf of a corporation, association, or partnership, the individual signing this application specifically represents that he/she is authorized to act on behalf of the corporation, association, or partnership.

**Signatures**

DATED this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Applicant

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant or Authorized Representative of Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title of Authorized Representative

STATE OF OREGON )

County of Lane )

) ss.

Personally appeared before me this \_ day of \_\_\_\_\_, 20 \_ ,

the above named \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , and acknowledged the foregoing instrument to be his/her voluntary act and deed.

Notary Public for Oregon

My Commission Expires:

**LIRHPTE Submittal Requirements Checklist**

NOTE: If you feel an item does not apply, please state the reason why and attach the explanation to this form. If you do not supply all the required information and schedules and submit the required fees, this application shall be returned to you and deemed not to have been filed.

**LIRHPTE Application Form**

**Legal Property Description**

**Proof of Ownership or Interest in the Property *(Deed or Option Agreement/purchase contract)***

**Rent Regulatory Agreement *(use City form)***

**Consent to Inspection of Premises *(use City form)***

**Certification of Income Levels of Low-Income Occupants *(use City form if applicant does not have a form)***

**Documentation that the Required Rent Reflects the Full Value of the Property Tax Exemption*****(if applicable)***

**Documentation that the Property will be Offered to or Occupied Solely by Low-Income Persons *(if applicable)***

**Documentation that the Applicant Expends no more than 10% of its Annual Income from Residential Rentals for Purposes other than the Acquisition, Maintenance, or Repair of Residential Rental Property for Low-Income Persons (Public Benefit or Religious Corporations only)**