



# Application for Historic Property Rehabilitation Tax Exemption

Iowa Code Section 427.16

This application must be filed or mailed to your city or county assessor by February 1 of assessment year.  
It must be postmarked no later than February 1.

Iowa assessors' addresses can be found at the **Iowa State Association of Assessors Web site**.

<b>Applicant Contact Information</b>	
<small>PLEASE PRINT</small>	
Name: _____	
Phone Number: _____	eMail: _____

Number \_\_\_\_\_

Legal Description: \_\_\_\_\_

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

Titleholder or contract buyer: \_\_\_\_\_

Address, if different than above: \_\_\_\_\_

Existing property use:    Ag     Res     Com     Ind

Additional property tax relief or financial assistance

Allowed:        No \_\_\_\_\_ Yes \_\_\_\_\_ (Attach documentation , if yes.)

Completion Date: \_\_\_\_\_ Cost: \_\_\_\_\_

Attach any plans or blueprints. Include documents previously filed and approved by State Historical Office.

The owners of the above property do hereby make application for the Historic Property Rehabilitation Tax Exemption in accordance with the provisions of Iowa Code section 427.16.

I declare under penalty of perjury that I have reviewed this claim and to the best of my knowledge and belief, it is true, correct, and complete.

\_\_\_\_\_  
Date                      (\_\_\_\_\_)                      \_\_\_\_\_  
                                 Telephone Number                      Claimant's Signature

### To Be Completed By The Assessor

Application received: _____				
Priority assigned:	1	2	3	4
Dist. _____	Map _____	Parcel _____		
I hereby certify that the above property is eligible to receive the tax exemption as provided by Iowa Code section 427.16.				
				_____ Assessor
Annual report of exemptions to be sent to County Auditor by July 1 each year.				