

## HISTORIC PRESERVATION PROPERTY TAX EXEMPTION APPLICATION

PART 2 – FINAL APLICATION FOR REVIEW OF COMPLETED WORK

**Instructions:** Upon completion of the restoration, rehabilitation or renovation, return this form with photographs of the completed work (both exterior and interior views for buildings) to the the City of Gainesville Historic Preservation Office, as applicable. These photographs must provide a comprehensive description of the completed work. They should be the same views as the *before* photographs included in the Preconstruction Application. Type or print clearly in black ink. The final recommendation of the Division of Historical Resources or the Local Historic Preservation Office, as applicable, with respect to the requested historic preservation property tax exemption is made on the basis of the descriptions in this Request for Review of Completed Work.

1. Property identification and location:
Property Identification Number B-9 LOTS 182 BK 6 (HIGHLAND HE16475)
Address of property: Street 1039 NE 3PD ST
City 6AINESVILLE County ALACHUA Zip Code 32601
2. Data on restoration, rehabilitation or renovation project:
Project starting date: AUL 2017 Project completion date SEPT 2015
Estimated cost of entire project: \$ # 254,300
Estimated costs attributed solely to work on historic buildings or archaeological sites: \$254,300
Owner attestation: I hereby apply for the historic preservation property tax exemption for the restoration, rehabilitation or renovation work described above and in the Preconstruction Application for this project which received approval on
Title Organization Name
Social Security or Taxpayer Identification Number
Mailing Address 1039 NE 32D ST  City 6 AINESUILE State FL Zip Code 3260 M
City 6 AINESVILLE State F Zip Code 3260 M
Daytime Telephone Number (352-) 355-5002  RECEIVED  PLANNING DIVISION

	dditional Owners:						
	REBECCA DARNELL						
Street	1039 NE 320 ST						
City _	6AINESVILLE State	R	Zip Code 32601				
Social	Security or Taxpayer Identification Number						
Name		-					
-			Zip Code				
If ther	e are additional owners, provide the indicate	ed informat	ion for each on a separate sheet of paper.				
			EVIEW OF COMPLETED WORK ffice or Division Use Only				
Proper	ty Identification Number						
Proper	ty Address						
			s reviewed Part 2 (Request for Review of Completed oplication for the above named property and Hereby:				
( )	Determines that the completed improvements to the above referenced property <u>are consistent</u> with the Secretary of the Interior's Standards for Rehabilitation and Guidelines for Rehabilitation Historic buildings, and the criteria set forth in Chapter 1A-38, F.A.C., and, therefore, <u>recommends approval</u> of the requested historic preservation tax exemption.						
( )	Determines that the completed improvements to the above referenced property <u>are not consistent</u> with the Secretary of the Interior's Standards for Rehabilitation and Guidelines for Rehabilitation Historic buildings, and the criteria set forth in Chapter 1A-38, F.A.C., and, therefore, <u>recommends denial</u> of the requested historic preservation tax exemption.						
Reviev	v Comments:						
			×				
Additio	onal comments attached? Yes ( ) No ( )	Signature	)				
			printed name				
		Doto					



## PLANNING AND DEVELOPMENT SERVICES DEPARTMENT **PLANNING DIVISION**

PO Box 490, Station 12 Gainesville, FL 32627-0490 P: (352) 334-5023

F: (352) 334-3259

## PUBLIC NOTICE SIGNAGE AFFIDAVIT

PUBLIC NOTICE SIGNAGE AFFIDAVIT						
Pet	ition Name	AD		m TAX	EXEMPTION	
Ар	plicant (Owner or Agent)	Tim "	DALRY	npie RE	BELLA DARNE	ELL_
Tax	Tax parcel(s)					
Bei	ng duly sworn, I depose and say the fo	llowing:				
1.	That I am the owner or authorized agent representing the application of the owner and the record title holder(s) of the property described by the tax parcel(s) listed above;					
2.	That this property constitutes the property for which the above noted petition is being made to the City Of Gainesville;					
3.	That this affidavit has been executed to serve as posting of the "Notice of Proposed Land Use Action" sign(s) which describes the nature of the development request, the name of the project, the anticipated hearing date, and the telephone number(s) where additional information can be obtained. In addition, the applicant has securely posted the sign(s) on the property along each street frontage, at intervals of not more than four hundred (400) feet, and set back no more than ten (10) feet from the street and visible from the street. If the property does not abut a public right-of-way, signs have been placed at the nearest public right-of-way with an indication of the location of the subject property.					
4.	That the applicant has posted the sign(s) at least fifteen (15) days prior to the scheduled public hearing date; or for Historic Preservation Certificate of Appropriateness applications, at least ten (10) days prior to the scheduled public hearing date.					
5.	That the applicant shall maintain the and approval process and that the sign taken on the development application	gns shall be				
6.	6. That I (we), the undersigned authority, hereby certify that the foregoing statements are true and correct.  7. TIM DALRYWPUE REBECCA DARNELL  8. Applicant (signature)  Applicant (print name)					
Bef the of_ bee und Put	ATE OF FLORIDA, UNTY OF ALACHUA fore me the undersigned, an officer du laws of the State of Florida, on this	y appeared nat he/she fethat he/she	_ day who having ully e signed. _Notary	M M	iotary Public State of Florida isa M Tomlinson ly Commission FF 057451 xpires 11/15/2017	aspx

FOR OFFICE USE ONLY		
Petition Number	Planner	

