



Neighborhood Revitalization Tax Rebate Application

To be completed by the applicant:

Owner of Record: _____

Phone & Email: _____

Mailing Address: _____ Property Address: _____

Proposed/Existing Use of Property:

_____ Commercial _____ Single-Family Residential _____ Multi-Family Residential

Description of Property Improvements:

Estimated Start Date: ___/___/___ Total Cost of Improvements: _____

Estimated Completion Date: ___/___/___

_____ Pictures of project area attached _____ Property tax statement attached

_____ Proof of insurance

_____ Application fee (\$25 for residential projects; \$100 for commercial projects)

Owner of Record Signature: _____ Date: _____

To be completed by the City of Lenexa:

Application received: ___/___/___ _____ Property located in the NRD

Current tax year: _____ _____ Property taxes current

Base year: _____ Property value: _____

_____ Date: _____

Neighborhood Revitalization District Administrator

_____ Building permit

Date of substantial completion: ___/___/___ _____ Appraiser notified

Date submitted to Appraiser: ___/___/___