City of York

Special Tax Assessment for Rehabilitated Historic Properties (Bailey Bill)

Application for Preliminary Certification

(***Note: Special Tax Assessment Applies to City Property Taxes Only***)

The City of York Code of Ordinances authorizes a Special Tax Assessment for Rehabilitated Historic Properties that meet the criteria for eligibility. Upon Final Certification, eligible properties will receive a special assessment equal to the pre-rehabilitation value for a period of ten years. The provisions of the Special Tax Assessment for Rehabilitated Historic Properties shall be administered pursuant to the City of York Code of Ordinances, Section 40-39, and Section 5-21-140 of the South Carolina Code of Laws, 1976, as amended. This application is used by the City of York for the purpose of granting Preliminary Certification to eligible properties. A separate application will be required for Final Certification once the rehabilitation work has been completed. Completed applications, including all required attachments, may be dropped off at City Hall, 10 N. Roosevelt Street to the attention of the Planning Director.

Property Information					
Name of Historic Property:					
Street Address:					
City:		**State:**	SC	**Zip Code:**	
TM #:	- -	**Fair Market Value:**		$	
How did you determine the fair market value of the property? (Select one. Please submit appropriate documentation with your application)	☐ Property appraisal completed by a real estate appraiser licensed by the State of South Carolina. ☐ Sale price as delineated in a bona fide contract of sale within twelve months of the time the application is submitted ☐ Most recent appraised value published by the York County Tax Assessor.				

Applicant Information					
Name of Property Owner:					
Mailing Address:					
City:		**State:**		**Zip Code:**	
Phone:	( ) -	**Fax:**	( ) -	**Email:**	

Historic Designation	
Eligibility Requirements	☐ Yes ☐ No The property is located within the City's Local Historic District as designated in the City's Official Zoning Map.
Please provide a BRIEF overview of the historical significance of the building.	
In what year was the primary structure(s) built?	
Have there been any major alterations or additions to the structure(s)? (Select one)	☐ Yes ☐ No

If yes, please include the dates and description of any alterations.	

Project Information

Project Start Date: (Month/Year)	/	Estimated Completion Date: (Month/Year)	/
Total Estimated Project Cost:		$	

What type of improvements will be undertaken as part of this project?
(Select all that apply. Please attach a detailed description of the work to be completed with your application.)

- ☐ Repairs to the exterior of the designated building.
- ☐ Alterations to the exterior of the designated building.
- ☐ New construction on the property on which the building is located, including site work.
- ☐ Alterations to interior primary public spaces, as defined by the reviewing authority.
- ☐ Any remaining work where the expenditures for such work are being used to satisfy the minimum expenditures for rehabilitation, including, but not limited to, alterations made to mechanical, plumbing and electrical systems.

Required Attachments

Applications will not be reviewed until all required attachments have been submitted.

- ☐ Signed and completed City of York Application for Preliminary Certification.
- ☐ A Certificate of Appropriateness application and required documentation has been submitted .
- ☐ A map showing the location of the property.
- ☐ Color photographs showing the interior and exterior of the building, including, but not limited to, any areas to be rehabilitated.
- ☐ A detailed description of proposed work. (If an application has been submitted for federal Investment Tax Credits, you may attach a copy of the proposed work from the federal form.)
- ☐ Architectural floor plans showing the pre-rehabilitation conditions.
- ☐ Architectural floor plans showing the proposed rehabilitation work.
- ☐ Documentation of fair market value (a valid appraisal, contract of sale, or appraised value published by the York County Assessor are acceptable).

Optional Attachments

- ☐ There is a fee required for the review of rehabilitation work. The fee may be paid at the time the applicant applies for Preliminary or Final Certification; however, Final Certification will not be given until the fee has been paid in full. Fees shall be made payable to the City of York. The amount of the fee shall be as follows:
  - For owner-occupied, non-income producing properties, the fee shall be $150.00.
  - For income-producing or non-owner occupied properties, the fee shall be $300.00.

Under penalty of perjury, I certify that all information included in this application is true and correct. I understand that this property shall not be eligible for the Special Tax Assessment for Rehabilitated Historic Properties until final certification has been granted by the City of York pursuant to the City of York Code of Ordinances, Section 40-39 and Section 5-21-140 of the South Carolina Code of Laws, 1976, as amended

Applicant Signature _____ Date _____

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- ☐ Completed application and all required attachments were received on _____.
- ☐ This property meets the Historic Designation Criteria of the City of York Code of Ordinances, Section 40-39.
- ☐ The work described in the application appears to meet the Standards for Rehabilitation of the City of York Code of Ordinances, Section 40-39.
- ☐ The total estimated project cost meets Minimum Expenditures for Rehabilitation requirements of the City of York Code of Ordinances, Section 40-39.
- ☐ Scheduled for Historic Review Board review on _____.
- ☐ Historic Review Board recommended ☐ Approval ☐ Denial on _____.
- ☐ Preliminary Certification ☐ Granted ☐ Denied on _____.
- ☐ Applicant notified on _____.

Application Processed by:

Notes: