



Historic Preservation Program Application Form Housing & Neighborhood Development

This is a fillable PDF, applicants are encouraged to fill out this form electronically and email. Applicants are also encourage to provide additional pages, if necessary. Applications are reviewed on a quarterly basis and are due on the ^{2nd} Wednesday of March, June, September, and December.

A. Applicant Information:				
Owner Type (check one):	<input type="checkbox"/> Individual(s)	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> LLC	<input type="checkbox"/> Corporation
Building Owner(s):				
EIN or SS #:				
Address:				
Contact Person:				
Phone:				
Cell Number:				
Email Address:				

B. Contractor Information:				
Contractor Company Name:				
Commercial License #:				
Address:				
Contact Person:				
Phone:				
Cell Number:				
Email Address:				

C. Property/Building Information:				
Building is located in (check one):				
<input type="checkbox"/> Historic (H) Overlay District				
<input type="checkbox"/> Neighborhood Conservation (NC)				
<input type="checkbox"/> Property Listed in the National Register of Historic Places				
<input type="checkbox"/> Eligible to be listed in the National Register of Historic Places				
Property Address:				
Number of Buildings:				
Year(s) Constructed:				
CLT#:				
Current Usage:				
Zoning:				

D. Current Indebtedness							
Furnish information on BUILDING-REALTED debts, notes, and mortgages payable.							
Type	To Whom Payable	Original Amount	Original Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment
1 st Mortgage		\$		\$	%		
2 nd Mortgage		\$		\$	%		
Other Building Lien		\$		\$	%		
Other Building Lien		\$		\$	%		
Total			Total			Total	

E. Current Tenancy			
Use additional pages if necessary			
Unit Number and Name	Type (retail, office, residential, etc.)	Current Rent	Will this building renovation result in increased rent?
		\$ /mo.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, new rent - \$ /mo.
		\$ /mo.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, new rent - \$ /mo.
		\$ /mo.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, new rent - \$ /mo.
Total		\$ /mo.	Total new rental income =\$

F. Project Overview	
Describe in detail the proposed "project" being undertaken (e.g. repair of brick, window and door replacement). This narrative should describe the same project outlined by the financials (Attach additional pages if necessary).	
When will the project begin?	When will the project end?

G. Proposed Project Cost & Additional Investment	
Attach quote from contractor detailing the work to be completed.	
Requested Amount from City	\$
Amount Provided by Owner (Before Agreements in Place)	\$
Amount Provided by Owner (After Agreements in Place)	\$
Total Project Amount	\$

Please describe any additional private investment committed to this project:

In addition to the Historic Preservation project, what other investments are involved?

H. Project Objectives/Community Benefit

Describe the goals/projects objectives.

Describe how this project will benefit the long-term the surrounding community.

I. Disadvantaged Business

Will the project advance disadvantaged businesses, defined as minority of woman owned business, or small business? ☐ Yes ☐ No If yes, please explain below:

J. Business & Development Experience

Please describe experience in executing similar projects.

K. Attachments

Check if submitted. If not submitted, please explain why in the space below, to the right

<input type="checkbox"/> Yes <input type="checkbox"/> No	Historic photos and Existing Conditions	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Proof of Listing in National Register of Historic Places or Eligible for Listing	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Letters of Commitment (Others involved in financing)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Financial statement for each building owner	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Detailed Construction Budget	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Detailed Construction Timeline	

Disclosure

By signing and submitting this application, the applicant hereby agrees to the following:

1. Applicant agrees that the acceptance of this application does not commit the City to enter into an agreement, to pay any costs incurred in its preparation to participate in subsequent negotiations, or to contract for the project. Further, the acceptance of this application does not constitute an agreement by the City that any contract will be entered into by the City. The city expressly reserves the right to reject any or all applications or to request more information from the applicant.

Should assistance be provided applicant/borrower agrees:

1. To comply with all applicable provisions of federal statutes and regulations concerning equal employment opportunities for persons engaged in rehabilitation work undertaken in connection with program assistance.
2. To keep such records as may be required by the City in connection with the work to be assisted.
3. To not discriminate upon the basis of race, color, sex, marital status, disability, religion or national origin in the sale, lease, rental, use or occupancy of the property to be assisted.
4. To allow no member of the governing body of the City of Knoxville and no employee of the City of Knoxville to have any interest, direct or indirect, in the proceeds of any loan or in any way contract entered into by the borrower for the performance of work financed, in whole or in part, with the proceeds of the loan.
5. That NO financial assistance will be provided if the project involves the permanent and involuntary displacement of tenants unless the applicant agrees to provide financial assistance to the tenants at levels consistent with the Federal Relocation and Real Property Acquisition Act, as amended. Such assistance granted will not, however, be counted in the private match requirement.

In addition, the applicant is aware of the following:

1. If assistance is given, an audit of the project may be required.
2. The applicant will be obligated to maintain the building improvements for a period equal to the terms of the loan.
3. Financial assistance will not be provided if property taxes or special assessments are in arrears.

****Please note that incomplete applications will not be considered for funding.***

Signature

Title (if applicant is a company representative)

Print Name

Date

Applicant Submission

Submit completed application to: Jillian Love
Housing & Neighborhood Development
City of Knoxville
P.O. Box 1631 400 Main
Street
Knoxville, TN 37901
jlove@knoxvilletn.gov

**REQUEST FOR VERIFICATION OF MORTGAGE
CITY OF KNOXVILLE
COMMUNITY DEVELOPMENT DEPARTMENT**

Name, Address, and Zip Code of Applicant for Loan

Account No _____

Name, Address, and Zip Code of Lending Institution

Date of Request _____

Address of Mortgaged Property

NOTE TO LENDER: The applicant identified above has authorized this Agency to obtain verification of the status of existing mortgages on the above property. The requested information is required for us in connection with an application for financing through the City of Knoxville's Historic Preservation Program funded through the U.S. Department of Housing and Urban Development's Block Grant Program. The requested information in this verification is for the confidential use of this Agency and the U.S. Department of Housing and Urban Development. Please furnish the information requested below and return this form, using the stamped, addressed envelope provided.

Mortgage Data

Financial Data

Date of Mortgage _____ Original Amount \$ _____ Date of Maturity _____ Present Balance \$ _____

Type of Mortgage: ☐ Conventional ☐ FHA ☐ VA

Are payments current? ☐ Yes ☐ No

If not current, state amount in arrears \$ _____

Monthly Payment To: _____

Principal & Interest: _____

Mortgage Insurance Premium: _____

Real Estate Taxes: _____

Fire Insurance: _____

TOTAL MONTHLY PAYMENT: _____

Other Remarks: _____

State the amount of termination fee or prepayment penalty payable upon full prepayment of the loan. \$ _____

Has the account been satisfactory: ☐ Yes ☐ No

Authorization by applicant: I authorize the mortgagee to furnish to the public body (identified in Financial Data) the mortgage above.

Date of Authorization

Signature

The above information is furnished in strict confidence in response to your request.

Name, Address, and Zip Code of agency to which form is to be returned:

Date

Signature

Housing & Neighborhood Development

Jillian Love

P.O. Box 1631

Knoxville, TN 37901

jlove@knoxvilletn.gov

Title