



Town of Pittsfield, NH

Community Revitalization Tax Relief Incentive

INSTRUCTIONS TO THE APPLICANT:

The following documents contain what you will need to complete your application for tax relief to revitalize your building. PLEASE read everything carefully. The application materials are based upon the requirements set forth by NH RSA 79-E. You will need to fill out the application, take part in a public hearing with the Board of Selectmen, and execute a covenant with the Town. If you have any questions with the application, the process, or what to expect, please call the Pittsfield Town Administrator at 435-6773.

Thank you for your interest in the Community Revitalization Tax Relief Incentive and good luck with your application and restoration project.



TOWN OF PITTSFIELD, NEW HAMPSHIRE

COMMUNITY REVITALIZATION TAX RELIEF INCENTIVE (RSA 79-E)

APPLICATION FORM

OFFICE USE ONLY

(do not write in shaded area)

Date Application Submitted: _____ Application & Fee (\$50) Received by: _____

Building Information

Building Name (if any): _____

Building Address: _____

Pittsfield Tax Map: _____ Lot: _____ Zoning District: _____ MCRD Book: _____ Page: _____

Contact throughout this application process will be made through the applicant listed below.

The property owner may designate an agent as the coordinator for the project. This person (the applicant) shall attend public hearings, will receive comments, recommendations, staff reports, and will communicate all case information to other parties as required. **The Property Owner may act as the Applicant. If so, list under Applicant's Name, "Owner", and complete owner's information as requested.**

Applicant(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Owner(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Existing Building Information

Existing Uses (describe current use, size, and number of employees): _____

Gross Square Footage of Building: _____ Year Building was Built: _____

Is the building listed on or eligible for listing on the National Register of Historic Places? Yes No

Is the building listed on or eligible for listing on the state register of historic places? Yes No

Is the building located within and important to a locally designated historic district? Yes No

Project Description

Proposed Use(s) (describe use, size, and number of employees): _____

Is this a change of use associated with this project? Yes No

If yes, please describe: _____

Will the project include new residential units? Yes No

If yes, please describe: _____

Will the project include affordable residential units? Yes No

If yes, please describe: _____

Has an abatement application been filed or has an abatement been awarded on this property within the past year? Yes No

If yes, please describe: _____

Will any state or federal grants be used with this project? Yes No

If yes, describe and detail any terms of repayment: _____

Replacement of Qualifying Structure

Does the project involve the replacement of a qualifying structure? Yes No

If yes, the owner shall submit with this application the following:

1. A New Hampshire division of historical resources individual resource inventory form, prepared by a qualified architectural historian.
2. A letter from the New Hampshire division of historical resources that identifies any and all historical, cultural, and architectural value of the structure or structures that are proposed to be replaced and the property on which those structures are located.

Note: The application for tax relief shall not be deemed to be complete and the governing body shall not schedule the public hearing on the application for replacement of a qualifying structure as required under RSA 79-E:4, II until the inventory form and the letter, as well as all other required information, have been submitted, if required.

Public Benefit (RSA 79:E-7)

In order to qualify for tax relief under this program, the proposed substantial rehabilitation must provide at least one of the public benefits listed below. Any proposed replacement must provide one or more of the public benefits listed below to a greater degree than would a substantial rehabilitation of the same qualifying structure.

Does the project provide the following public benefits?
(Check all that apply)

- Enhances the economic vitality of the designated area. Yes No

If yes, please describe: _____

- Enhances and improves a culturally or historically important structure. Yes No

If yes, please describe: _____

- Promotes development of the designated area, providing for efficiency, Yes No safety, and a greater sense of community, consistent with RSA 9-B.

If yes, please describe: _____

- It increases residential housing in urban or town centers. Yes No

If yes, please describe: _____

Other issues and matters applicant deems relevant to this request: _____

Substantial Rehabilitation

Describe the work to be done and estimated costs.

1. Attach additional sheets if necessary and any written construction estimates.
2. Attach any project narratives, plot plans, building plans, sketches, renderings, or photographs that will help explain this application.

Structural: _____

\$

Electrical: _____

\$

Plumbing/Heating: _____

\$

Mechanical: _____

\$

Other: _____

\$

Total Estimated Project Cost: \$0.00

Expected project start date: _____

Expected project completion date: _____

Applicant/ Owner Signature

To qualify for this tax relief incentive, the costs of the project must be at least 15% of the pre-rehabilitation assessed value or \$75,000, whichever is less.

I/we certify the estimated costs are reasonable and the costs of the project meet the above requirement.

Initial here: _____

I/We understand that failure to meet this threshold or the listing unreasonable construction costs will result in the denial of the application and forfeiture of the application fee.

Initial here: _____

I/we have read and understand the Community Revitalization Tax Relief Incentive, RSA 79-E, and am/are aware that this will be a public process including public hearing to be held to discuss the merits of this application and the subsequent need to enter into a covenant with the Town and pay all reasonable expenses associated with the drafting/recording of the covenant.

Initial here: _____

The undersigned hereby certifies the foregoing information is true and correct:

Signature (printed name) Date

NOTES:

Property must be located in downtown Pittsfield (see map in this packet)

Please attach any plans, sketches, renderings or photographs that would help explain the application.

TOWN OF PITTSFIELD, NEW HAMPSHIRE
COMMUNITY REVITALIZATION TAX RELEIF INCENTIVE (RSA 79-E)
APPLICATION REVIEW

Applicant: _____ Location: _____ Tax Map: _____ Lot: _____

_____ Date application filed _____ Date fee (\$50) received

_____ Date of public hearing _____ Notice for public hearing
 (within 60 days of application receipt) (at least seven days before hearing)

_____ Date Board of Selectmen to issue decision (within 45 days of hearing)

DEPARTMENT REVIEW
 (Initial & Date)

Building
 Department:
 (review of total
 estimated project
 cost & comments)

Comment(s):

 Initial Date

Planning Board:
 (PB approval, site
 plan conditions, &
 comments)

Comment(s):

 Initial Date

DEPARTMENT REVIEW

(Initial & Date)

Zoning Board of Adjustment:
(ZBA approval & comments)

Comment(s):

Initial Date

ASSESSING REVIEW

Pre-Rehabilitation Assesses Valuation of Building

\$

Estimated Cost of Rehabilitation (application page 2)

\$

Percentage – Cost of project to valuation

Is the structure located in one of the designated areas?

Yes No

Does the cost of rehabilitation exceed 15% of the pre-rehabilitation assessed value of the structure or \$75,000, whichever is less?

Yes No

Assessor:

Comment(s):

Initial Date

TOWN OF PITTSFIELD, NEW HAMPSHIRE
COMMUNITY REVITALIZATION TAX RELEIF INCENTIVE (RSA 79-E)
BOARD OF SELECTMEN - REVIEW/DECISION

Does the project provide at least one of the following public benefits?
 (Check all that apply)

- Enhances the economic vitality of the designated area. Yes No
- Enhances and improves a culturally or historically important structure. Yes No
- Promotes development of the designated area, providing for efficiency, safety, and a greater sense of community, consistent with RSA 9-B. Yes No
- It increases residential housing in urban or town centers. Yes No

THE APPLICATION IS:	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
Substantial Rehabilitation Tax Relief Incentive granted for: (up to 5 years beginning with completion of rehabilitation)	years
Tax Relief Incentive for New Residential Units granted for: (up to an additional 2 years, 4 years if affordable housing)	years
Tax Relief Incentive for Rehabilitation of Historic Places in accordance with the U.S. Secretary of Interior's Standards for Rehabilitation granted for: (up to an addition 4 years)	years
Total Relief Period	years

The above decision was made by majority vote of the Pittsfield Board of Selectmen on _____
 after a public hearing held on _____.

 Chair, Pittsfield Board of Selectmen

 Date

COVENANT TO PROTECT PUBLIC BENEFIT
FILED WITH DEED Per RSA 79-E:8 (Community Revitalization Tax Relief Incentive)

I (We) _____ (owner) of _____ located in the Town of Pittsfield, County of Merrimack _____ and the State of New Hampshire, for [myself/ourselves] successors and assigns, for consideration of tax relief granted, agree to the following Covenants imposed by The Town of Pittsfield, County of Merrimack, State of New Hampshire, in exchange for property tax relief due to the substantial rehabilitation of said property this Covenant to Protect Public Benefit in accordance with the provisions of RSA 79-E for a term of _____ years or other agreed time up to twice the period of tax relief on the following historic or other structure located within the Pittsfield Center Historic District (as depicted by Map 6-3 in the Town of Pittsfield 2000 Master Plan), including the land necessary for the function of the building (the PROPERTY), described as follows.

The Property is described as a portion of Tax Map _____ Lot _____ in the Town of Pittsfield. Also reference Grantor's title by [Warranty] deed recorded at Book _____ Page _____ in the Merrimack County Registry of Deeds.

The GRANTEE agrees that the PROPERTY provides a demonstrated public benefit in accordance with the provisions of RSA 79-E:7 inasmuch as the substantial rehabilitation of said property:

- I. Enhances the economic vitality of downtown
- II. Enhances or improves a structure that is culturally or historically important on a local, regional, state, or national level, either independently or within the context of an historic district, town center, or village center in which the building is located
- III. Promotes development of municipal centers, providing for efficiency, safety and a greater sense of community consistent with RSA 9-B or
- IV. It increases residential housing in urban or town centers

[insert particular findings if desired]

The terms of the Covenant hereby granted with respect to the above-described PROPERTY are to be coextensive with the tax relief period and are as follows:

MAINTENANCE OF THE PROPERTY. The GRANTOR agrees to maintain the PROPERTY in a use and condition that furthers the public benefits for which the tax relief was granted and accepted during the term of the tax relief under RSA 79-E.

[Here insert any particular restrictions such as signage, maintenance of building and its surroundings, other structure and so forth, as may be agreed upon between the Grantor and Grantee.]

REQUIRED INSURANCE, USE OF INSURANCE PROCEEDS, AND TIMEFRAME TO REPLACE OR REMOVE DAMAGED PROPERTY. The Property Owner is required to obtain and maintain casualty insurance, as well as flood insurance if appropriate. The TOWN requires a lien against proceeds for any insurance claims to ensure proper restoration or demolition of any damaged structures and property. The TOWN further requires that the restoration or demolition commence within one year following any insurance claim incident otherwise the Property Owner shall be subject to the provisions set forth in RSA 79-E:9, I.

RECORDING. The Town shall provide for the recording of this covenant to protect public benefit with the Merrimack County Registry of Deeds. It shall be a burden upon the property and bind all transferees and assignees of such property. Applicant will be solely responsible for the recording fees.

ASSESSMENT OF THE PROPERTY. The Grantee agrees that the PROPERTY shall be assessed, during the term of the Tax Relief Granted based on the pre-rehabilitation value or another value agreed upon by both parties to address improvements not covered by RSA 79-E. If the terms of these covenants are not met, the Property Tax Relief will be discontinued. Furthermore, the TOWN will assess all taxes to the owner as though no tax relief was granted, with interest in accordance with RSA 79-E:9, II.

RELEASE, EXPIRATION, CONSIDERATION.

I. RELEASE. The GRANTOR may apply to the local governing body of the Town of Pittsfield for a release from the foregoing discretionary tax relief and associated covenant upon a demonstration of extreme personal hardship.

Upon release from such covenants, the GRANTOR shall pay the following consideration to the Tax Collector of the Town of Pittsfield

(a) For a release within the duration of the tax relief period of the RSA 79 E, full value assessment of such structure(s) and land.

II. EXPIRATION. Upon final expiration of the terms of the tax relief and associated covenants tax assessment will convert to present valuation and these covenants will be concluded

III. The Tax Collector shall issue a summary receipt to the owner of such property and a copy to the governing body of the Town of Pittsfield for the sums of tax relief deferred. The local governing body shall, upon receiving a copy of the above-mentioned consideration, execute a release of the Covenant to the GRANTOR who shall record such a release with the Merrimack County Registry of Deeds. A copy of such release or renewal shall also be sent to the local assessing officials if they are not the same parties executing the release or renewal.

IV. If, during the term of the tax relief, the GRANTOR shall fail to maintain the structure in conformity with the foregoing agreement, or shall cause the structure(s) to significantly deteriorate or be demolished or removed, the covenants shall be terminated and a penalty assessed in accordance with Paragraph I(a) above.

ENFORCEMENT.

When a breach of this Covenant to the attention of the GRANTEE, it, shall notify the owner of the property subject to the covenant, in writing of such breach, delivered in hand or by certified mail, return receipt requested. The Owner shall have 30 days after receipt of such notice to undertake those actions, including restoration, which are reasonably calculated to cure the conditions constitution said breach and to notify the Grantee thereof.

If the owner fails to take such curative action, the Grantee may undertake any actions that are reasonably necessary to cure such breach, and the cost thereof, including Grantee's expenses, court costs and legal fees, shall be paid by the owner, provided the said Owner is determined to be directly or indirectly responsible for the breach.

The Grantee, by accepting and recording this Covenant to the deed agrees to be bound by and to observe and enforce the provisions hereof and assumes the rights and responsibilities herein provided for and incumbent upon the Grantee, all in furtherance of the economic development purposes for which this Tax Relief and associated Deed Covenant is delivered.

WITNESS MY HAND this _____ day of _____, 20__.

Witness

Grantor

STATE OF NEW HAMPSHIRE

COUNTY OF _____

Appeared before me this _____ day of _____, 20__,

the above signed _____, known to me or satisfactorily proven to be the same, and acknowledged that he [they] executed the same for the purposes contained therein.

Notary Public/Justice of the Peace

My commission expires:

ACCEPTED this _____ day of _____, 20__.

Town of Pittsfield NH - By its Board of Selectmen:

name

name

name

name

name

Tax Incentive Zones

Town of Pittsfield

Legend

-  Route 107 Corridor and Downtown Pittsfield Economic Revitalization Zones*
-  Revitalization Tax Relief Zone**
-  2014 Expansion of Revitalization Tax Relief Zone

Explanation of Incentives:

* RSA 112-N: Up to \$40,000 in state business tax credits for moving or expanding a business in this area.

** RSA 79-E: Selection may delay the increase in taxes for up to 5 years for replacement or

Zoning

-  Commercial
-  Light Industrial/Commercial
-  Urban
-  Suburban
-  Parcel Boundaries

