PROPERTY IMPROVEMENT LOAN

Date of Application:

Applicant Name:

Mailing Address:

Phone Number:

Signature:

Subject Property

Address:

Assessor's Map & Tax Lot:

Property Owner (If different from Applicant):

Mailing Address:

Phone Number:

☐ Please complete the *Property Owner Consent Form* attached to the application.

I have reviewed the following document(s), as it pertains to my application:

☐ Sign Code - Chapter 18.70 of Harrisburg Municipal Code

☐ Historic Design Guidelines in the Harrisburg Community Action Plan

☐ Harrisburg Redevelopment Agency Plan

☐ C-1 Zoning Ordinance - Chapter 18.30 of Harrisburg Municipal Code

Please submit the following information with your application:

☐ Photographs clearly showing existing conditions of the building / land to be improved.

☐ A written description of the proposed work.

☐ A cost estimate from a contractor (if used), including contact information for the contractor.

☐ Drawings or sketches showing the proposed improvements. If applicable, exact products and materials, paint color, etc.

Project Start Date:

Expected Completion Date:

Total Estimated Cost of Project:

Loan Amount Requested:

Disclaimer: By signing above, I agree that the information provided above and within is accurate and correct to the best of my knowledge. I also assure that my person and business are in compliance with all laws, ordinances, rules and regulations of the State of Oregon, Linn County, and the City of Harrisburg.

Property Owner Consent Form

I, _____ ("Property Owner"), certify that I own the property located at _____ ("Adddress") in Harrisburg, Oregon and that I have reviewed the application by _____ ("Applicant") for participation in the Harrisburg Redevelopment Agency's Property Improvement Loan Program. I understand that the proposal includes the following changes and/or enhancements to my property:

I fully support this application and further certify that the Applicant holds a valid lease for _____ months, expiring on _____.

Property Owner

Signature: _____

Printed Name: _____

Mailing Address: _____

Phone: _____