

City of Iowa Falls

APPLICATION – Property Rehabilitation



Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____

Phone: _____ Email: _____

Address of property to rehabilitate: _____

Offer Price: _____

What experience do you have in rehabbing blighted properties or properties nearing public nuisance?

Provide a description of the primary development team and any personnel, including individual expertise:

Provide a list of your company, property or joint holdings in all LLC's or business ventures in the City of Iowa Falls or elsewhere in a similar market:

*For nonprofit organizations and registered businesses, please provide documentation of your incorporation.

Are you delinquent on your property taxes on any of the properties you currently own? YES NO

Do you currently own any properties that have been declared a public nuisance for which you do not have a renovation agreement on file with the City of Iowa Falls? YES NO

What is your intended end use of the property? (check one)

- Rehab & Rent
- Rehab & Sell
- Rehab & Reside

Please submit completed application along with a site plan sketch and timeline for rehabilitation project, to City Manager, Kaci Elkin at kelkin@cityofiowafalls.com or at City Hall – 901 Washington, Iowa Falls.