



City of Clermont - CRA
BUILDING PERMIT REFUND PROGRAM
Application

This application, along with all required information should be submitted to:

James Hitt, Economic Development Director
Clermont Economic Development Department
685 W. Montrose Street
Clermont, Florida 34711

Office Use
Application No. _____

The Clermont CRA review and approval will be conducted at the next available meeting. This application and all attachments to it constitute public records. Call (352) 241-7305 if you have any questions about the Building Permit Refund Program (BPRP).

I. APPLICANT

Name: _____

Address: _____

Telephone: _____ Fax: _____

E-Mail: _____

II. PROPERTY OWNER (If same as applicant, go to Section III)

Name: _____

Address: _____

Telephone: _____ Fax: _____

E-Mail: _____

III. PROPOSED PROJECT

Project/Business Name: _____

Address: _____

A. Is the project within the CRA project area of the City of Clermont? Yes ___ No ___

B. Project General Description – Please provide the following:

1. Exact description of the work required for building permit refund. Specify Interior or exterior. _____

2. Refund in conjunction with another CRA grant or Assistance Program?
Yes ___ No ___ Which one? _____

3. CBD Targeted Business(s): _____

4. Attach site plan and/or sketch plans and specifications detailing the scope of work.

C. Permit cost \$ _____

D. Dollar amount requested (50% of permit): \$ _____

IV. SATISFACTION OF CRITERIA

By filing this application, the Applicant agrees and understands that this Building Permit Refund is given at the sole discretion of the Clermont CRA and these criteria are used solely to evaluate Applicant's project and does not create an entitlement to funding.

ANY COST OR PERMIT FOR WORK PREVIOUSLY COMPLETED PRIOR TO AN APPROVED APPLICATION CANNOT BE REIMBURSED UNDER ANY CIRCUMSTANCE. DO NOT START ANY PHYSICAL RENOVATIONS UNTIL AFTER FINAL APPROVAL BY THE CITY/CRA, COMPLETION OF THE CONTRACT WITH THE CITY & NOTICE TO PROCEED HAS BEEN ISSUED.

In addition, any building permit refund award is on a first come, first served basis. Application funding shall be in accordance with the established BPRP Criteria, City Land Development Codes and the approved Architectural Standards for the City.

V. CERTIFICATION

Applicant hereby certifies under penalty of perjury, that all information provided is complete, current, accurate and truthful.

Signature

Date

Print

**STATE OF FLORIDA
COUNTY OF LAKE**

The foregoing instrument was acknowledged before me on this _____ day of _____, 20____
by _____ who is personally known to me or has produced
_____ as identification and who did (did not) take an oath.

Notary Signature

Notary Public
My Commission expires:

Print