SHPO STATE TAX CREDIT APPLICATION – Part 2

Application questions for Part 2 of the State Historic Tax Credit are listed below. Upon submittal, applicants will receive a subsequent email requesting the following information:

- Description of work to be completed
- Description of previous work completed for which tax credits are being requested
- Photos of all areas where work will take place, both current and historic (where available), exterior and interior (before photos)
- Photos of Previous Work completed for which tax credits are being requested, including before (required), after (required) and historic (where available)
- Map key for photos
- Plans, Specifications and Drawings
- Product information for all special products to be used in project
- Any other pertinent information that should be considered in determining project's ability to meet the Secretary of the Interior's Standards for Rehabilitation
- Application fees

An application is not considered complete until all information, documents and payments are submitted.

Application Questions:

PART 2 - REHABILITATION PLAN RESOURCE INFORMATION

- Project Number
- Historic Name if Known (as applicable) Street Address
- City, Village or Township (address of where property is located, NOT mailing address)
- County
- Zip Code

DATA ON REHABILITATION PROJECT

- Proposed Use After Rehabilitation
- Estimated Project Start Date
- Estimated Project Completion Date
- Estimated Qualified Expenses \$

Which credits is this project seeking? (Select only 1)

- Owner Occupied Residential Credit
- Small Commercial Credit (< \$2,000,000)
- Large Commercial Credit (>= \$2,000,000)

VERIFICATION OF STATE EQUALIZED VALUE (SEV)

If you selected "Small Commercial Credit" or "Large Commercial Credit" above, the SEV form is required and must be completed and uploaded to this application. You can download the SEV form here. If you selected "Owner Occupied Residential Credit," the SEV form is NOT required. If an SEV does not exist, select that option below.

File upload: SEV Form (commercial properties only)

Select the button below if an SEV does not exist for this property. You will be required to submit a property appraisal by a Michigan Certified General Appraiser completed less than two years prior to this application and with the building in generally same condition as it currently exists. (Instructions on uploading an appraisal will be emailed upon receipt of your application.)

• An SEV does not exist for this property

Does this project have an approved Part 1 State application? Please note Part 2 will not be reviewed until a Part 1 application is approved

- Yes
- No
- Submitted with this application
- If yes, please provide date of approval

WORK COMPLETED OVER PAST YEAR FOR WHICH CREDITS ARE REQUESTED

- Prior Work Completed: Start Date
- Prior Work Completed: End Date

I /we certify that all previous work claimed in this application was completed no more than one year prior to this submission date

• Yes

Please note: A description of work completed, before and after photos, plans and specs of this work are required for review. More information on this will be provided via email after you submit your application.

APPLICANT INFORMATION

- First Name
- Last Name
- For co-owner or for married owners: First Name (as applicable)
- For co-owners or married owners: Last Name (as applicable)
- Organization Name
- Street Address
- City
- State
- Zip Code

- Phone number
- Email Address
- Social Security Number(s) or Tax Payer ID number(s)
- For additional Owner: Social Security Number(s) or Tax Payer ID number(s) as applicable

PROJECT CONTACT (IF DIFFERENT THAN APPLICANT)

- First Name
- Last Name
- Street Address
- City
- State
- Zip Code
- Organization Name
- Phone number
- Email Address

APPLICATION CERTIFICATION

You must be able to answer "yes" to the question below to submit your application.

I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that I am a Qualified taxpayer as set forth in subsection 266(a)(16)(j) or subsection 676(16)(j) of PA 343 of 2020

• Yes

As your signature, please type your full name.

For additional owner: As your signature, please type your full name. (As applicable)