

## **Application**

## Community Reinvestment Area Tax Exemption Program

-Completed application with required documentation of expenses (invoices, receipts, etc.) must be submitted to: City of Mentor-on-the-Lake, Attn: Hollie Bartone, Housing Officer, at 5860 Andrews Road, Mentor-on-the-Lake, Oh 44060.

-Or scan and email to admindir@citymol.org.

1.	Name, address and phone number of property owner:		
	Name:	Phone:	
	Email:		
	Property Address:		
	Parcel Numbers:		
2.	Exemption sought for (select one):	New Structure	Remodel
3.	Date of Completion:		
4.	Project Description:		
5.	Amount of investment: \$	New Construction \$	Remodel
۱, (	Applicant Name)	, p	roperty owner(s), hereby
request a tax exemption of% for years in accordance with the terms and conditions of the			
of	Mentor-on-the-Lake's Community Reinve	stment Area (CRA) Program, establish	ned December 28, 2016. I
•	e) understand that this property is subjec	, , , ,	
	Officer, and that if the property is found		•
or	d, the Housing Officer may revoke the tax	exemption at any time after the first	year of exemption.
	nature of Applicant/Homeowner		Date