

Signature of Applicant/Homeowner

## **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: Terry Ness, Housing Officer, at 5860 Andrews Road, Mentor-on-the-Lake, Oh 44060.

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

	Name, address and phone numbe  Name:		
		<del></del>	
2.	Exemption sought for (select one):	: New Structure	Remodel
3.	Date of Completion:		
4.	Project Description:		
5.	Amount of investment: \$	New Construction \$	Remodel
req of I (we ing	Applicant Name)% for% for quest a tax exemption of% for Mentor-on-the-Lake's Community Reinve e) understand that this property is subject Officer, and that if the property is found I, the Housing Officer may revoke the tax	years in accordance with the terrestment Area (CRA) Program, establiset to inspection annually by the City of to not be properly maintained or res	ms and conditions of the City hed December 28, 2016. I f Mentor-on-the-Lake Hous- ided in by the owner of rec-

Date