VINTON COUNTY COMMISSIONERS BUILDING DEMOLITION and SITE REVITALIZATION PROGRAM APPLICATION

"This institution is an equal opportunity provider and employer"



General Information	
APPLICANT NAME:	PHONE:
CO-APPLICANT NAME:	PHONE:
MAILING ADDRESS:	
CITY:	STATE:ZIP CODE:
Do you own the home? Yes No	When did you buy the home?
Is there a mortgage on the home? Yes	_No If Yes, Filing Date
Lien holder	Last time the structure was occupied?
Are your property taxes current? Yes	No Under a current repayment plan
Building Information ADDRESS:	
	STATE: ZIP CODE:
	/Block Trailer/Doublewide Other
Number of stories: Basement: Year house was built? Square feet:	
Debris inside the structure? Nuisance complaints from the Vinton Co. Health Department?	
WATER SOURCE: Well Public Water Water Company:	
WASTE WATER: Private Septic System Public Sewer System	
Gas Company: Electric co	mpany:

PLEASE READ THE FOLLOWING STATEMENTS. IF YOU DO NOT UNDERSTAND ANY PART OF IT OR HAVE ANY QUESTIONS ABOUT WHAT YOU ARE ASKED TO SIGN. PLEASE ASK SOMEONE AT THE AGENCY TO HELP YOU. BOTH APPLICANTS (IF APPLICABLE) MUST SIGN BELOW.

I/We certify that all the information in this application is true and complete to the best on my/our knowledge. I/We understand this information is subject to verification and that it is given for the purpose of obtaining assistance for the demolition and site revitalization of my property. The applicant(s) further certify that they are the owner(s) of the property identified in this application and that they have all rights to request this assistance

I/We authorize this agency or its representatives and designees of the Ohio Department of Development (ODOD), to inspect and evaluate actual services provided to me. I/We understand that any and all information provided in this application may be used for that purpose.

I/We hereby waive any all present and future claims against Vinton County and any individual either in the employ of Vinton County or any of the above-named entities or currently working under a contract with Vinton County, or the above-named entities, for damages in any way connected with the repairs for which I am making application as a condition of receiving demolition and site revitalization assistance.

I/We understand that the contractor will be insured against damage to my home as well as against injuries to me, members of my family or any other individual about the premises of my home; that he/she is insured through the Ohio Bureau of Worker's Compensation for injuries sustained by his/her employees and subcontractors; and that the contractor and all subcontractors release all mechanics liens prior to any and all payments made to them.

I/We understand that all items and fixtures inside and outside of the structure will be removed and will become the property of the demolition contractor.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT: U.S.C. Title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies... or makes any false, fictitious or fraudulent statement or entry shall be fined not more than \$10,000.00 or imprisoned not more than five years, or both".

I understand that Vinton County is not obligated to offer me any assistance whatsoever. By signing below, I attest that the information that I have given is true to the best of my knowledge and that I understand and agree with the terms stated above.

Applicant Signature

Co-applicant Signature

Please complete and return this application with proof of property ownership to

Vinton County Commissioners Development Department Attn.: Kenny Holley 205 S. Market Street McArthur, Ohio 45651

Note: FAILURE TO PROVIDE PROOF OF OWNERSHIP, AND FULLY SIGNED AND COMPLETED APPLICATION WILL RESULT IN YOUR APPLICATION BEING PLACED IN THE INACTIVE APPLICATIONS FILE.

Specific questions regarding the Vinton County Commissioners Building Demolition and Site Revitalization Program can be directed to Kenny Holley at 740-596-3529

Date

Date