City of Breckenridge, Texas Demolition Debris Removal Program Application for Assistance

Applicant Information

Name of Applicant Mailing Address Phone Number Email Address	
If Owner of Property is an entity, please select type:	
Check one: Corporation Sole Proprietor	Partnership
Principal Address:	_
If corporation, list officers:	
Property Information	
Address Legal Description	
Length of Ownership	
Regarding the dilapidated structure on the Property, please prov	ride the following information:
Approximate age Type of structure Condition of structure	
Are you behind on payment of ad valorem taxes or utility service Yes No If yes, please explain.	e accounts related to the Property?

Requested Incentives

Please Initial
I would like to demolish the structure(s) on the Property, but do not have the financial resources to do so at this time.
I am requesting that the City provide me with a roll-off dumpster at the Property so I can deposit waste from the demolition of the structure(s).
Is the Applicant requesting incentives or financial assistance from any other source? Yes No
If yes, please list the sources from which applicant has requested financial assistance or incentives, describe the amount and type of assistance or incentive, and provide the status of said request(s).
Has the applicant already obtained a demolition, if required, permit from the City for demolition of the structure(s) on the Property? Yes No
If no, please explain why a permit has not been obtained.
(Blocks 3, 4, 5, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, and the south ½ of 32, north ½ of 29, north ½ of 20, north ½ of 21, and north ½ of 22, original townsite of the City of Breckenridge.)
Redevelopment
Please explain your plans for the use of the Property, including a description of the type of structure(s) that will be placed or built on the Property.

Acceptance and Terms of Agreement

I certify that the information provided in this document is a true representation of facts. I understand that the City of Breckenridge is not obligated to fund any portion of this proposal.

Signature:	
Name (printed):	
Title:	
Company:	
Date:	