

Kingsport Housing & Redevelopment Authority

906 E Sevier Ave
Kingsport, TN 37662-0044
423-245-0135 - Fax: 423-392-2530

Application for Approval of Redevelopment Plan Proposal*

1. Name of Redevelopment District: _____
2. Date & Time of Application Submission: _____
3. Legal Name of Applicant: _____
4. Address: _____

5. Telephone Number: _____
6. Fax Number: _____
7. Email Address: _____
8. Contact Person: _____
9. Title: _____
10. Experience of applicant and its principals in developing similar projects:

11. Financial ability of applicant to carry out the development project:

12. Type and amount of governmental assistance requested to carry out the development proposal: _____

13. Plan Objectives: _____

14. Timeline of activities from inception to completion of proposed development:

*This application is only required in circumstances where a developer is requesting the services of Kingsport Housing & Redevelopment Authority in its capacity as the Redevelopment Authority as enumerated in Title 13 Chapter 20, T.C.A. as supplemented and amended. Please attach additional sheets as needed.

15. Members of development team (architect, contractor, etc.)

Applicant Certification and Acknowledgment

I acknowledge being informed that KHRA will, upon request by a member of the public or in the course of reporting its activities to the public, disclose the names of applicants requesting Tax Increment Financing (TIF), the amount of TIF requested, federal programs used, if any, and the development impact of the TIF requested (jobs created, tax base impact and total project investment).

I certify that the information contained in this application is, to the best of my knowledge, true and correct. I authorize KHRA or its agents to verify the information obtained in this application and to obtain additional information concerning the applicant(s) financial condition although the KHRA may rely on this information without any further verification. I authorize the KHRA to furnish such information and any other credit experience with the applicant(s) to others and to answer any questions about the applicant(s) credit experience and other financial relationship with the KHRA. I agree to notify the KHRA, in writing, of any changes that materially affect the accuracy of this application.

By submitting this application, applicant agrees to reimburse KHRA for all out-of-pocket expenses incurred by KHRA relating to this proposed project, including, but not limited to, attorney fees, consultant fees, and the like, whether incurred before or after the submission of this application and whether the application is ultimately approved or denied.

Applicant Name: _____
By (print name): _____
By (signature): _____
Title: _____
Date: _____