APPLICATION FOR TAX ABATEMENT

Appanoose county

(Please type or print)

APPLICANT INFORMATION

Applicant (Owner of Record): Jim Lindsey

ADDRESS 28065 Highland Dr. CITY Moravia STATE IA.

PHONE 641-895-9979 NAME OF OWNERS OF RECORD (IF ANY) _____

ADDRESS OF PROPERTY REQUESTED FOR ABATEMENT 0401420015920001

LEGAL DESCRIPTION Lot 1 Bucktail

EXISTING PROPERTY USE (CIRCLE) RESIDENTIAL AGRICULTURAL VACANT COMMERCIAL/INDUSTRIAL

TYPE OF IMPROVEMENTS

AGRICULTURAL

CONSTRUCTION OF A NEW STRUCTURE

REHABILITATION OF AN EXISTING STRUCTURE

RESIDENTIAL

NEW CONSTRUCTION

NEW MODULAR OR NEW MANUFACTURED HOME PLACED ON PERMANENT FOUNDATION

IMPROVEMENT TO EXISTING RESIDENTIAL STRUCTURE

COMMERCIAL/INDUSTRIAL

NEW CONSTRUCTION

IMPROVEMENT ON EXISTING STRUCTURE

BRIEF DESCRIPTION OF PROJECT: Storage.

CURRENT PROPERTY VALUE (FROM ASSESSOR'S RECORDS): LAND: $_____ BUILDINGS $_____

ESTIMATED OR ACTUAL COST OF IMPROVEMENTS $ 250,000

PROJECT START DATE: 9/15/26 ESTIMATED OR ACTUAL COMPLETION DATE: 10/15/26

IF RESIDENTIAL RENTAL PROPERTY, COMPLETE THE FOLLOWING:

NUMBER OF UNITS:_____ DATE OF OCCUPANCY:_____

TENANTS (OCCUPYING THE BUILDING WHEN PURCHASED, OR PRESENT TENENTS IF UNKNOWN):_____

RELOCATION BENFITS RECEIVED BY ELIGIBLE TENANTS:_____

LIST OF BUILDINGS DEMOLISHED:_____

APPLICANT ACKNOWLEDGEMENTS:

TAX ABATEMENT SCHEDULE: 3 YEAR 100%

A COPY OF THE REQUIRED SEWER PERMIT OR WAIVER IS ATTACHED (REQUIRED): YES NO

A COPY OF THE BUILDING PERMIT IS ATTACHED IF REQUIRED: YES NO

The property to which improvements are made conform to the Appanoose County Revitalization Plan as adopted. YES NO

This abatement shall not appl to property tax levies imposed by school districts on residential property after July 1, 2024, as stated in Iowa Code Section (404.3D)

The applicant certifies that all information provided in the support of this application is given for the purpose of obtaining an exemption from taxes on New Construction and is true and complete to the best of the applicant's knowledge.

Applicant's signature:_____ date signed: 9-16-26

COUNTY SUPERVISORS ACTION:

APPROVED RESOLUTION NO 2026-31 DATE 9/21/26

DISAPPROVED REASON FOR DISAPPROVAL_____

COUNTY ASSESSOR ACTION:

DATE OF REVIEW:_____ APPROVED DISAPPROVED (CIRCLE ONE)

REASON FOR DISAPPROVAL:_____

_____

ASSESSED VALUATION OF IMPROVEMENTS: $_____

A NOTICE OF TERMINATION WAS SENT TO THE APPLICANT ON (DATE):_____

NOTE: No change may be made once an application is approved and an exemption is granted.

APPLICATION FOR ZONING CERTIFICATE

OFFICE HOURS
MONDAY-FRIDAY
8 AM - 4 PM

APPANOOSE COUNTY ZONING DEPT
201 N. 12TH ST.
CENTERVILLE, IOWA 52544

TEL: 641-437-4529
FAX: 641-856-3062
bburgin@appanoosecounty.net

APPLICANT INFORMATION:

(PLEASE PRINT OR TYPE)

NAME: Jim Lindsey — HOME PHONE #: 641.895.9979 — WORK PHONE #:

OWNER ADDRESS: 28965 Highland Drive — Moravia IA

NAME & ADDRESS OF BUILDER — HOME PHONE # — WORK PHONE #

PROPERTY / SITE LOCATION INFORMATION:

E911 LOCATION ADDRESS OF PROPERTY:

PARCEL/LOT#: 040142001591200 1 — ~~BLOCK~~ # Lot 1 — ACRES/AREA:

LEGAL DESCRIPTION: SECTION: 5 — TWP: 70 — RANGE: 18 — SUBDIVISION: Bucktail

LEGAL DESCRIPTION OF PROPERTY (Attach Legal Description)

CURRENT USE OF EXISTING STRUCTURE(S): Empty Lot

PROPOSED CHANGE IN USE OF EXISTING STRUCTURE(S): Storag Unit

PROPOSED PROJECT INFORMATION

TYPE OF STRUCTURE(S) / USE OF STRUCTURE(S): Storage Units

DIMENSIONS OF PROPOSED STRUCTURE(S): 50 x 165

FOUNDATION TYPE: X PERMANENT ____ PIERS

75 FT. FRONT YARD DEPTH — 35 FT. REAR YARD DEPTH

10 FT. SIDE YARD WIDTH — ____ FT. SIDE YARD WIDTH

NEW ☒ ALTERATION ☐ ADDITION ☐ REPAIR ☐

IMPROVEMENT VALUE 250,000

NUMBER OF ROOMS ____ NUMBER OF FAMILIES ____

REQUIRED ATTACHMENTS & DOCUMENTS:

X **APPLICATION FEE:** $ 220 — (See attached sheet for current zoning fees.)

____ **1 COPY SEPTIC PERMIT #** ____ (ADLM, Hwy 5, Moravia IA 52571)

X **1 COPY PLOT PLAN** (per attachment)

I certify that the above information is true and correct to the best of my knowledge and that all work will be completed in accordance with the Appanoose County, Iowa Code. I hereby consent to allowing a site inspection of the location specified above to verify land and compliance with the regulations of the Appanoose County Zoning Ordinance.

Signature of Applicant — Date: 9-15-26 — OWNER/BUILDER/AGENT (Relationship to landowner – CIRCLE ONE)

**********OFFICE USE ONLY**********

ZONING DISTRICT: C A R I

APPLICATION FEE RCVD: $ 220 — CK#: 3073 — CASH

APPLICATION APPROVED: **YES:** PERMIT#: Approved — **NO:** ____

Beth Burgin — AUTHORIZATION OF ZONING ADMINISTRATOR — DATE: 9/15/26