

CITY OF WAUKON  
URBAN REVITALIZATION PROGRAM  
APPLICATION FOR PROPERTY TAX EXEMPTION

Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

(Check one)

\_\_\_\_\_ Used as primary residence.

\_\_\_\_\_ Used as rental property.

Address of Property: \_\_\_\_\_

Real Estate Legal Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Building Permit was issued: \_\_\_\_\_

Building Permit Number: \_\_\_\_\_

Date Construction was completed: \_\_\_\_\_

Estimated Cost of Project: \_\_\_\_\_

\_\_\_\_\_  
Applicant (Owner) Signature

OFFICIAL USE ONLY

Application (approved) (denied) by Waukon City Council on: \_\_\_\_\_

Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Mayor

Application (approved) (denied) by County Assessor on: \_\_\_\_\_

\_\_\_\_\_  
County Assessor