



Richland County Land Bank

Court House, Lower Level One
50 Park Avenue East
Mansfield, Ohio 44902
419-774-5623

www.richlandcountylandbank.org

REHAB APPLICATION

Application will NOT be processed if not completed in its entirety and it does not include required documents.

Applicant(s) Information

Name of Applicant(s): _____

Address: _____

Phone: _____ Alternate Phone: _____

Email: _____

I own/manage properties in under the following names (i.e. Corporate/LLC, Business, Maiden, etc.):

I own/manage properties in State/County: _____

Address of property requested: _____

Parcel No(s): _____

Check all that apply regarding your intended use for the property you are applying for:

- | | |
|--|---|
| <input type="checkbox"/> Residential – Single Family | <input type="checkbox"/> Owner Occupied |
| <input type="checkbox"/> Residential – Multi Family # of units _____ | <input type="checkbox"/> Investment Property (income producing) |
| <input type="checkbox"/> Mixed Use – explain below | <input type="checkbox"/> Non-Profit uses– explain below |
| <input type="checkbox"/> Commercial– explain below | <input type="checkbox"/> Applicant(s)'s Business– explain below |
| | <input type="checkbox"/> Resale |

Required Written Plan of Use

Required Estimated Start Date _____ Estimated End Date _____

Applicant(s) must submit the following required documents along with this Application:

- Rehab Plans** **Estimated Cost** **Proof of Funding Source**

Qualification of Applicant(s). Richland County Land Bank Board of Directors considers the following:

- Applicant(s)'s financial position, including property, city, state and/or federal tax status
- Ability to execute work in accordance with all applicable specifications including compliance with EPA, local, state, and federal laws
- Satisfactorily completing prior projects with City of Mansfield, Richland County, other municipalities and/or Land Bank including but not limited to quality of work, timeliness, past inter actions with Code enforcement
- Condition of properties owned by applicant(s)
- Current and/or past tax foreclosures, judgement liens, law suits

Known experience - list other similar rehab projects below;

Address	City	State	County	Project Status

List contractor(s) you plan to use for this project;

Contractor	Address	State	County	Phone #

Richland County Land Reutilization Board of Directors considers all applications recognizing, but not excluding any application based upon, the importance of the significant economic presence in (1) Richland County, (2) surrounding counties and (3) State of Ohio.

FILL OUT REHAB WORKSHEET OR PROVIDE AN ITEMIZED ESTIMATE PROVIDED BY CONTRACTOR

Exterior					
	Number	Materials	Repair	Replace	Estimated Cost
Roofing					
Siding					
Paint					
Trim					
Gutters/Downspouts					
Garage Doors					
Entry Doors/Hardware					
Patio Doors/hardware					
Windows					
Shutters					
Decks					
Fencing					
Driveway					
Sidewalks					
Accessory Buildings					
Landscaping					
Tree Removal					
Other					

Kitchen					
	Number	Materials	Repair	Replace	Estimated Cost
Sub Flooring					
Base Cabinets					
Upper Cabinets					
Countertop					
Backsplash					
Flooring					
Doors/Hardware					
Paint					
Trim					
Sink					
Faucet Fixture					
Lighting					
GFI Plugs/Outlets					
Duct Vent					
Appliances					
Other					
Bathroom(s)					
	Number	Materials	Repair	Replace	Estimated Cost
Sub Flooring					
Bathtub w/ Surround					
Shower w/ Surround					
Flooring					
Paint					
Exhaust Fan					
Lighting					
GFI Plugs/Outlets					
Duct Vent					
Trim					
Doors/Hardware					
Faucet Fixture					
Vanity/Sink/Countertop					
Mirror					
Living Room					
	Number	Materials	Repair	Replace	Estimated Cost
Flooring					
Paint					
Trim					
Doors/Hardware					
Lighting					
Dining Room					
	Number	Materials	Repair	Replace	Estimated Cost
Flooring					
Paint					
Trim					

Doors/Hardware					
Lighting					
Bedrooms					
	Number	Materials	Repair	Replace	Estimated Cost
Flooring					
Paint					
Trim					
Doors/Hardware					
Lighting					
Bedrooms					
	Repair	Replace	Estimated Cost		
Air Conditioner					
Furnace					
Duck Work					
Water Heater					
Plumbing					
Water Supply Line					
Sanitary Line Work					
Electric Service					
Electric Panel					
Wiring					
Other					

Additional Rehab Information

Total Estimated Cost of Rehab \$ _____

Check all that apply – Answers include all properties owned/managed by applicant(s) by name listed on application or any other Corporate Names, Business Names, Maiden Names, etc.

- I have had codes or ordinance violations on properties I own and or manage.
- I have no delinquent property taxes on any properties I own.
- I had tax foreclosure filed against me. If yes where and when: _____
- I agree to pay future property taxes on this property if I am given ownership.

SIGNATURE(S)

I/we understand that by filing this application, I/we am authorizing Land Bank to evaluate my actual ability to afford, to construct, maintain, pay property taxes and other expenses. I/we understand that the evaluation will include personal information. I/we have answered all questions on this application truthfully. I/we understand that if I/we have not answered the questions truthfully, my application may be denied and be disqualified from the Land Bank programs.

Submitting an application does NOT commit Land Bank to transfer property.

Properties are offered at **current** fair market value plus County’s recording fees. **DO NOT SEND MONEY WITH THE APPLICATION. FIFTY PERCENT (50%) OF PURCHASE PRICE (DEPOSIT) IS DUE WHEN PURCHASE AGREEMENT IS SIGNED AND BALANCE DUE AT CLOSING. Buyer will forfeit deposit if Buyer does not close within 60 days from date Land Bank notifies Buyer that closing documents are ready for Buyer’s signature.**

BY SIGNING THIS APPLICATION, APPLICANT(S) ACKNOWLEDGES THAT, UPON BOARD APPROVAL OF APPLICATION, APPLICANT(S) WILL BE PURCHASING THE ABOVE MENTIONED PROPERTY SOLELY IN RELIANCE ON APPLICANT(S)'S OWN INVESTIGATION, PREVIOUS USAGE OF SITE IS UNKNOWN, AND THE PROPERTY WILL BE TRANSFERRED "AS IS, WHERE IS" CONDITION WITH ALL FAULTS AND DEFECTS, LATENT OR OTHERWISE. *I/we also acknowledge that most properties do not have any available Phase I, Phase II, geotechnical, structural, or other such reports. If one is offered to applicant(s), it is for reference only, and Richland County Land Reutilization Corporation, Inc., an Ohio non-profit corporation; the Board of County Commissioners of Richland County, Ohio; the Trustees of Richland County, Ohio; the City of Mansfield, Ohio, and all their respective members, directors, officers, employees and agents are not responsible for any omissions or errors.*

I/we also understand property will be transferred subject to a development mortgage and note.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Mail completed application to: Richland County Land Bank 50 Park Avenue East, Mansfield, Ohio 44902

Email completed application to: ahamrick@richlandcountyoh.gov

Application can also be found and submitted online at: www.richlandcountylandbank.org