

STATE OF DELAWARE
HISTORIC PRESERVATION TAX CREDIT APPLICATION
PART 3 - REQUEST FOR CERTIFICATE OF COMPLETION

OFFICE USE ONLY

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NPS No. (if applicable):

Project No:

Instructions: Upon completion of the rehabilitation, return this form with representative photographs of the completed work (both exterior and interior views). If a Part 2 Application has not been submitted in advance of project completion, it must accompany this Request for Certificate of Completion. The Application must be accompanied by a final accounting of expenditures and other attachments as noted below.

1. NAME OF PROPERTY:
Address:
City: State Zip

2. DATA ON REHABILITATION PROJECT:
Rehabilitation work began on: Rehabilitation work was completed on:
For approved phased projects, indicate: Phase of Projected Project Completion Date:
Part 2 Application approved on: Credit Award Issued to Project: \$ Date of Award:
Expenditures attributed to the rehabilitation of the historic structure, allowable new construction, & allowable site work:

3. CERTIFICATION:
I hereby apply for a Certificate of Completion for the rehabilitation carried out under Delaware's Historic Preservation Tax Credit Program and attest that the information provided is, to the best of my knowledge, correct, and that the rehabilitation work is as described in the Part 2 Certification of Rehabilitation Application, as it may have been amended, and that:
I am the taxpayer, or taxpayers if filing jointly, that will be claiming the tax credits [Attach Revenue Form 1811AC 0905\*]
I am the representative of a condominium association [Attach Revenue Form 1811AC 0905\* to assign all credits to the condominium association & Revenue Form 1811CC 0701\* completed by each condo owner which indicates their share of the total tax credits]
I am the applicant (developer, non-profit organization, etc.) who intends to transfer the tax credits [Attach Revenue Form 1811AC 0905\* to assign tax credits to applicant & Revenue Form 1811CC 0701\* to transfer tax credits to a Delaware taxpayer.]
I represent the taxpayer who will be claiming the tax credits [Attach Revenue Form 1811AC 0905\* completed by taxpayer]
Name: Signature: Date:

Required Attachments: Final accounting of "qualified" expenditures
Photographs
Information relating to any conditions placed on the Certification of Rehabilitation
Fee (if required): If total expenditures is greater than \$100,000, submit a check in the amount of \$250, payable to the State of Delaware (non-profit filers are exempt from this fee)

\* Revenue Forms 1811AC 0905 and 1811CC 0701 can be found online at: http://revenue.delaware.gov/services/Business\_Tax/Forms\_New.shtml#bustxcr

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CERTIFICATE OF COMPLETION

The Delaware State Historic Preservation Officer has determined that the completed rehabilitation, or the completed previously approved phase thereof, is consistent with the Secretary of the Interior's Standards and Guidelines for Rehabilitation, and is compatible with the historic character of the property or the district in which it is located. Effective the date indicated below a Certificate of Completion is awarded: for the completed rehabilitation, or for the completion of the rehabilitation of Phase of.

Date Delaware State Historic Preservation Officer Staff Reviewer/Telephone No.

Section Below Not Applicable:

The Delaware State Historic Preservation Officer has determined that the completed rehabilitation, or phase thereof, is not consistent with the Secretary of the Interior's Standards and Guidelines for Rehabilitation. The Delaware Division of Revenue has been notified of this decision.

Date Delaware State Historic Preservation Officer Staff Reviewer/Telephone No.