



**CITY OF CONCORD**  
 NEW HAMPSHIRE  
**Community Development Department**

City Hall • 41 Green Street • Concord, NH 03301 • tel. 603/225-8595 • fax 603/228-2701

**Community Revitalization Tax Relief Program (RSA 79-E)**  
**(To be completed by the Applicant)**

Building Name (if any)  Building Address <u>4-6 Dixon Avenue</u>	Owner Name(s) <u>14 Dixon Avenue Development Company, LLC</u> Applicant Name(s) (if different from owner) <u>Granite Center, LLC</u>
Owner Address(es) <u>14 Dixon Ave., Ste 102</u> <u>Concord, NH 03301-4957</u> Phone # <u>603-226-2170</u> Email address <u>k.easterly@nhcdfa.org.</u>	Applicant Address (if different from owner) <u>c/o Fox Fire Property Management</u> <u>P.O. Box 1438 / Concord, NH 03302-1438</u> Phone # <u>603-491-6080</u> Email address <u>s.laprey@foxfirenh.com</u>
City Tax Map Map # <u>45/</u> Block # <u>6/</u> + <u>45/6/</u> (To be merged) Lot # <u>15</u> + <u>16</u>	Merrimack County Registry of Deeds Book# <u>2411/</u> Page # <u>1699</u> + <u>1707</u>
Year Built <u>~1850</u>  Square Footage of Building <u>~13,000</u>	Is the building eligible or listed individually on the State or National Register of Historic Places or located within a locally designated, State, or National Register Historic district? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, provide a copy of the approved designation by the State or National Register of the building(s) or the district.
Existing Uses (describe number of units by type and size) <u>Office (see proforma for detail).</u>  Proposed Uses (describe number of units by type and size) <u>Office (Floors 1+2);</u> <u>Residential (apartments)</u> <u>(Floor 3+4). see proforma for detail.</u>	Is there a change of use associated with this project? ___ Yes ___ No ___ If yes, please describe: <u>Added residential use to vacant 3rd + 4th floors.</u>
Will the project include new residential units? <input checked="" type="checkbox"/> Yes ___ No If yes, please describe: <u>Seven (7) one-bedroom apartments.</u>	Will the project include new subsidized residential units? ___ Yes <input checked="" type="checkbox"/> No If yes, please describe:

**Note:** Application must be accompanied by a \$100 Application Fee made payable to "City of Concord"

Is the project in an existing Tax Increment Finance District? \_\_\_\_\_ YES  NO

(Maps are on file in the Community Development Department 225-8595)

Will any state or federal grants or funds, or low income subsidies or tax credits be used in this project?  YES  NO

If so, what is the amount of the aid? Describe and detail any terms of repayment (if applicable)  
NATCS - see email to Matt Walsh dated 6/28/18 with detail

**Describe the work to be done and estimated cost:** please attach additional sheets if necessary and any written construction estimates

Structural:	\$
Exterior Alterations (Storefront, walls, windows, doors, etc.)	\$
Interior Alterations (Walls, ceilings, moldings, doors, etc.)	\$
Electrical:	\$
Plumbing/Heating:	\$
Mechanical:	\$
Fire Protection:	\$
Other:	\$
Total:	\$
Note: To be considered for this tax relief incentive, the costs of the project must be at least 15% of the pre-rehabilitation assessed value or \$75,000, whichever is less.	

*SEE ATTACHED CONSTRUCTION SCOPE/PRICING DETAIL*

Please attach any contracts with construction Contractors and plot plans, building plans, sketches, renderings or photographs that would help explain this application.

For the additional 4 year tax relief for historic buildings, the work described must include how it meets the Secretary of Interior's Standards

**Historical Requirement for Replacement of Qualifying Structures**

In the case of replacement of a qualifying structure, the applicant shall submit a New Hampshire Division of Historical Resources Individual Inventory Form prepared by a qualified architectural historian and a letter issued by the Concord Heritage Commission that identifies any and all historical, cultural, and architectural value of the structure or structures that are proposed to be replaced and the property on which those structures are located. This application shall not be considered complete until such time as the Individual Inventory Form and letter are submitted.

**Affidavit**

I have read and understand the Community Revitalization Tax Relief Incentive RSA Ordinance (see attached) and am aware that this will be a public process including a public hearing to be held to discuss the merits of this application and the subsequent need to grant a covenant in the deed to the property to the City and pay any reasonable expenses associated with the drafting of the covenant. I understand the application will not be determined as complete and recommended to the City Council until all of the necessary information is provided.

**IMPORTANT:**

PER RSA 79-E:13(II), THE BASE OR "ORIGINAL" ASSESSED VALUE FOR ANY TAX RELIEF PERIOD IS ONLY SET AFTER THE FOLLOWING TWO CONDITIONS ARE MET:

1. APPROVAL BY THE CITY COUNCIL AND;
2. THE APPLICANT'S ENTERING INTO A COVENANT WITH THE CITY OF CONCORD TO PROTECT THE PUBLIC BENEFIT.

THEREFORE, THE APPLICANT AND/OR PROPERTY OWNER SHALL NOT COMMENCE ANY OF THE IMPROVEMENTS INCLUDED IN THIS APPLICATION UNTIL SUCH TIME AS HE/SHE HAS SECURED THE ABOVE. THIS PROHIBITION SHALL INCLUDE ANY DEMOLITION TO THE EXISTING STRUCTURE.

GRANITE CENTER, LLC

  
Applicant: (signed) \_\_\_\_\_ Stephen M. Duprey \_\_\_\_\_ 6/28/18 \_\_\_\_\_  
(name printed) (Date)

Expected project start: 8/1/2018 Expected project completion: 2/1/2018