



CITY OF LAREDO  
HISTORIC DISTRICT/LANDMARK BOARD  
APPLICATION



**Ad Valorem Tax Exemptions for Certified Historic Rehabilitation Projects**

**BUILDING NAME AND/OR ADDRESS:** \_\_\_\_\_

**LEGAL DESCRIPTION:**

**Lot #** \_\_\_\_\_ **Block #** \_\_\_\_\_ **Historic District:** \_\_\_\_\_

**NAME OF BUILDING OWNER:** \_\_\_\_\_ **PHONE No.:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**NAME OF PETITIONER:** \_\_\_\_\_ **PHONE No.:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**The Historic District/Landmark Board meets the 3rd Thursday of each month. Complete applications must be submitted 22 days prior to the meeting date by 12 noon. Contact Carlos Ordoñez, Historic Preservation Planner, at (956) 794-1610 for additional information.**

**PETITIONER MUST SUBMIT THE FOLLOWING WITH THE APPLICATION:**

\_\_\_\_\_ **1.** Plans and specifications for the proposed rehabilitation. Plans and exterior elevations shall be drawn to scale and shall include proposed materials, textures, colors, and site layout, including parking lots, fences walls, walks, terraces, planting, accessory buildings, signs, lights and other elements.

\_\_\_\_\_ **2.** Legible, color photographs of all sides of the structure and adjacent properties.

\_\_\_\_\_ **3.** Estimates of expenditures with a statement that the cost of the proposed rehabilitation exceeds the value of existing improvements on the property by 50%.

\_\_\_\_\_ **4.** Tax certificates indicating that all taxes have been paid.

\_\_\_\_\_ **5.** A notarized affidavit indicating the need for tax relief and a statement concerning the proposed use of the structure.

**Signature of the Building Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of the Petitioner:** \_\_\_\_\_ **Date:** \_\_\_\_\_