



CODE **CORRECTION**
– APPLICATION FORM –

**DOWNTOWN REVITALIZATION CODE CORRECTION ASSISTANCE PROGRAM
FOR CHELSEA CENTRAL ZONING DISTRICT AND HOLLYHOCK ISLAND**

APPLICATION

INSTRUCTIONS: Complete this form and return with attachments to:

**NCDC - Code Correction Assistance Program
77 Main Street
Norwich, Connecticut 06360**

Please type or print; must be completed in full

1. The Applicant

Property owner name _____
Property owner mailing address _____
Property owner phone #s _____
Property owner e-mail _____

2. The Property

Municipal Address for property _____
Current use of property _____
Number/type of commercial use _____
Number of residential units _____
Number of floors _____

3. The Project (Attach full project plan)

Description of code work being done (summary) _____

4. Funding

Amount of funds requested \$ _____
Owner Investment \$ _____
Other Investment \$ _____
Source of other _____
Total estimated project cost \$ _____

5. The Lease

Is there a lease in place for this space? ___ Yes ___ No
Is this space residential, commercial, or mixed. Explain _____

6. The Business (if commercial)

Days and hours of operation
Days open _____
Hours open _____

Employment Data
Number of full time employees _____
Number of part time employees _____
Number of casual employees _____

7. The residence (if residential go to certifications)

Number of residential units _____
Average size of each unit _____
Number of bedrooms _____
Number of bathrooms (full/half) _____

8. The Project Fit

How will your project enhance the area in which it is located and how will your project complement other properties/uses within the area? _____

Certifications:

Are all real estate and personal property taxes due to the City of Norwich paid in full?

Yes No (please explain on supplemental sheet)

Are all Norwich utility bills paid in full?

Yes No (please explain on supplemental sheet)

Are all City Loan Program payments paid up to date?

Yes No (please explain on supplemental sheet)

Have you been cited for any zoning, building or property maintenance code violations that remain uncorrected and are not addressed by this project?

Yes No (please explain on supplemental sheet)

Are you involved in any litigation with the City of Norwich?

Yes (please explain on supplemental sheet) No

**CODE CORRECTION ASSISTANCE PROGRAM
CERTIFICATIONS**

Applicant/Project Name _____

Project Address _____

Date	City Agency	City Representative Signature	Verification
	Tax Collector		The named property owner is current with all Norwich taxes
Comments			
	City Planning		This project demonstrates consistency with the City's Plan of Conservation and Development, and local zoning
	City Planning		This project complies with local zoning regulations.
Comments			
	City Building Inspection		This building has no building or property maintenance code violations that remain uncorrected.
Comments			
	Norwich Public Utilities		The named property owner is current with Norwich utilities
	Norwich Public Utilities		There is adequate utility capacity available or planned for this location
Comments			

If the property owner is approved for this program, payments will be made directly to the property owner. Request for reimbursement must be accompanied by a fully executed certification of contractor payment.

I certify by my signature that the information provided in this application is true and accurate.

Printed name of property owner

Signature

Date