



# Broward County Historic Property Tax Exemption Application Form

Authorized Pursuant to Article VI, Chapter 31½ Broward County Code

I. Name of Applicant (Owner or Authorized Agent): \_\_\_\_\_

II. Applicant's Address: \_\_\_\_\_

III. Historic Property Address (if different from II above): \_\_\_\_\_

IV. Historic Property Identification No.: \_\_\_\_\_

V. Is the Historic Property Exemption Being Sought for: (check one below)

- A. \_\_\_\_\_ the entire property      B. \_\_\_\_\_ a portion of the property

If the exemption is not being sought for the entire property, provide a legal description of that portion of the property to which the exemption applies:

VI. Other Historic Property Information:

A. Common name for the historic property: \_\_\_\_\_

B. Is this property recognized primarily as an \_\_\_\_\_ archaeological or \_\_\_\_\_ historical site? If historical, please indicate the known or approximate date of construction of the improvements: \_\_\_\_\_

C. If known, include the Florida Master Site File Number: 8-BD- \_\_\_\_\_

VII. Designation Status of the Historic Property (check each category that may apply):

- A. \_\_\_\_\_ Individual listing in the National Register of Historic Places
- B. \_\_\_\_\_ Contributing property within a National Register of Historic Places listed district
- C. \_\_\_\_\_ Individual listing under the provisions of a local historic preservation ordinance
- D. \_\_\_\_\_ Contributing property within an historic district designated under the provisions of a local historic preservation ordinance.

VIII. Please Check that which Applies (check at least one):

- A.  If listed on the National Register of Historic Places, as either an individual or contributing property, please indicate the date of listing by the Secretary of the Interior: \_\_\_\_\_
- B.  If designated by a local historic preservation ordinance within Broward County, as either an individual or contributing property, please indicate whether it was by:
  - 1. \_\_\_\_\_ Broward County and the date of designation: \_\_\_\_\_ or
  - 2. \_\_\_\_\_ by a municipality. If by a municipality, please indicate:
    - a. The name of the municipality \_\_\_\_\_
    - b. The date of designation: \_\_\_\_\_

IX. Type of historic property exemption sought:

A. \_\_\_\_\_ 100% of the assessed value of improvements from rehabilitation, restoration or renovation (Broward County Code 31 ½-103 and Florida Statute 196.1997)

1. Has a Florida Department of State Part 1 Preconstruction Application been submitted to the Broward County Historical Commission?

\_\_\_\_\_ yes \_\_\_\_\_ no

2. \_\_\_\_\_ If yes, on what date was the completed Part 1 Preconstruction Application granted initial approval by the board of the Broward County Historical Commission? \_\_\_\_\_

a. Assessed value of improvements, excluding land, at the time the Part 1 Preconstruction Application was approved by the board of the Broward County Historical Commission: \_\_\_\_\_

3. If the project is located within a municipality with a historic preservation ordinance, please indicate the date that the rehabilitation work submitted for review in the Part 1 Preconstruction Application was reviewed and approved by that municipality's historic preservation board:

\_\_\_\_\_

(The Broward County Historical Commission reserves the right to review, deny or request additional work for those applications that it believes does not comply with or fully meet the Secretary of the Interior's Standards for Rehabilitation or with local law.)

4. Date that the completed Part 2 Request for Review of Completed Work Application was approved by the board of the Broward County Historical Commission: \_\_\_\_\_

B. \_\_\_\_\_ 100% of the assessed value of a property used for nonprofit or governmental purposes that is regularly open to the public and the improvements are equal to at least 50% of the total assessed value of the property (Broward County Code 31 ½-103(b) and Florida Statute 196.1998).

1. Please describe the nonprofit or governmental use of the property: \_\_\_\_\_

2. Please indicate the assessed value of the improvements: \_\_\_\_\_

3. Please indicate the total assessed value of the property: \_\_\_\_\_

C. \_\_\_\_\_ Assessment for commercial or certain nonprofit uses solely on the basis of character or use (Broward County Code 31 ½-109 and Florida Statute Section 193.503).

D. \_\_\_\_\_ 50% of the assessed value of the property used for commercial or certain nonprofit purposes (Broward County Code 31 ½-110 and Florida Statute Section 196.1961).

**X. For exemption applications for commercial and certain nonprofit properties only (complete those that apply).**

A. \_\_\_\_\_ Commercial

1. Describe the type of commercial activity at the property: \_\_\_\_\_

2. Is this property used as legally permitted and zoned, multi-family apartment building?  
\_\_\_\_\_ yes \_\_\_\_\_ no If yes, please indicate the number of units: \_\_\_\_\_

B. \_\_\_\_\_ Nonprofit

2. Describe the type of taxable nonprofit activity at the property: \_\_\_\_\_

C. For either commercial or taxable nonprofit properties, please indicate whether a city, county or state license is necessary for the activities conducted on the premises: \_\_\_\_\_ yes \_\_\_\_\_ no

1. If yes, please describe the type of license necessary: \_\_\_\_\_

2. If yes, is a copy of the license attached to this application? \_\_\_\_\_ yes \_\_\_\_\_ no

**XI. Broward County Historical Commission Findings and Preservation Exemption Covenant.  
(To be filled out by the Broward County Historical Commission)**

A. The board of the Broward County Historical Commission reviewed this application for compliance with the provisions of the Broward County Code regarding tax exemptions for historic properties. On \_\_\_\_\_ (date) the Historical Commission reviewed and recommended for \_\_\_\_\_ approval or \_\_\_\_\_ denial of this application for historic property tax exemption.

B. The applicant has entered into a covenant for the term for which the exemption is granted.

This covenant was executed by the applicant on: \_\_\_\_\_

**XII. Application Review Revenue Implications for Fiscal Year**

(To Be Filled out by the Property Appraiser's Office)

A. Total taxable value of all property within the county: \_\_\_\_\_

B. Total exempted value of all property in the county, that has been approved to receive historic preservation ad valorem tax exemption for the current fiscal year: \_\_\_\_\_

C. Total exempted value of applicant's historic property as a result of this exemption: \_\_\_\_\_

**Please complete and return to:**

County Historic Preservation Office  
Broward County Historical Commission  
301 S.W. 13th Avenue  
Fort Lauderdale, FL 33312  
Phone: 954-357-5554 • FAX: 954-357-5522