



Village of Newburgh Heights Housing and Building Department

3801 Harvard Ave., Newburgh Heights OH 44105 Phone: 216-641-4654

Contact Information

Name _____

Name of company (if applicable) _____

Address _____
Street City State Zip

Phone _____ E-mail address _____

Directions

Please type or print clearly. Incomplete applications will not be accepted.

Agreement

1.

I agree that I will occupy the property or sell the property under a deed restriction that the property must be owner occupied as specified under the terms of a purchase agreement.

Yes No signature _____

2.

I agree that I will deposit no less than \$20,000 into an escrow account before the start of rehabilitation as per the terms of a purchase agreement, and agree to ensure registration of all contractors, to obtain permits and submit plans for review at my own cost.

Yes No signature _____

Professional Questions

Please attach to application or submit binder/folder.

1. Provide details of previous remodeling/rehabilitation projects or submit professional portfolio. Attach photographs of before and after work was completed. Include at least three (3) references for the work that was completed (supply name, address, phone number and email).
2. Provide a detailed description of all work to be completed to rehabilitate the property. Official plans are not required; however, a list of projects with specs should be submitted.
3. Will you be hiring architects, contract managers/general manager or will you be managing the project on your own?
4. Provide a list of potential contractors that will be working at the property.
5. What is the total estimated amount of investment to rehabilitate the property?
6. How will you be financing the rehabilitation of the property? Please be specific.
7. What is your estimated timeline and when do expect the property to be ready for move-in or sale?

Signature

Print name

Date