The Town of North Branford has adopted Connecticut General Statutes §12-65d and §12-65e to promote the highest and best use of real property construction, rehabilitation, and expansion compliance with all building and zoning regulations.

Please review the following description for an overview of the deferral program. Please contact the Office of the Town Planner if your project may be eligible.

Office of the Town Planner
909 Foxon Rd
North Branford, CT 06471
Phone: (203) 484-6010
Email: townplanner@townofnorthbranfordct.com

The packet contains three Sections
   I.  A description and eligibility requirements
   II. An application submission checklist
   III  An application form

**FOR TOWN OF NORTH BRANFORD USE ONLY**
Check and date if application copy is received

Department     Date

☐ Town Planner       __________
☐ Building            __________
☐ Assessor            __________
☐ Tax Collector       __________
☐ Town Manager       __________

Property Address of Application: ____________________________________________
I. PROGRAM DESCRIPTION & ELIGIBILITY REQUIREMENTS

Purpose and Summary

The Assessment Deferral Program was adopted to encourage the fullest development of property and encourage investment in North Branford’s commercial building stock. The Assessment Deferral Program freezes assessments at the pre-construction values for certain eligible properties and then phases-in the assessment increase over a period of five years.

The Process

- The owner of the property SHALL file an application for eligibility PRIOR to the start of construction. Failure to file application prior to construction will result in a DENIAL of assessment deferral.
- Authorization of the Assessment Deferral Program, under Connecticut General Statute §12-65e, is administrated by the North Branford Town Council.
- The current assessment is frozen during the construction period. Construction SHALL be completed by the second anniversary of the effective date of the agreement.
- Upon completion of construction the assessment will remain frozen for the first year. Thereafter the increase in assessment will be phased in 20% per year from year two to year five. The property will reach the 100% assessment level in year-six.
- The construction period ends and the five-year deferral begins on the Grand List (October 1st) subsequent to the issuance of the property’s CERTIFICATE OF OCCUPANCY or if the Assessor determines the property is 100% complete.

Summary of Eligibility Requirements

The program is intended to encourage development of unused or underused property and to encourage new construction or rehabilitation of existing commercial properties throughout the Town.

Prior to the start of construction or rehabilitation the property MUST HAVE:
- Necessary Building Permits
- Zoning and Wetland approval
- Any necessary variances for any or all code violations
- Confirmation of Tax Obligations

The Completed Rehabilitation or Construction Project MUST:
- Be of eligible Commercial Use
- Conform to Zoning Ordinance requirements
- Increase the Value of the property by at least 35%
- Correct all Code violations
- Meet the Secretary of the Interior’s “Standards of Rehabilitation for Historic Structures,” if the building is a “Certified Historic Structure” within the meaning of 36 CFR 67 or if it is designated historically significant by the Historic District Commission.
TOWN OF NORTH BRANFORD
PROPERTY ASSESSMENT DEFERRAL PROGRAM

A property is NOT ELIGIBLE if:

- The subject property is receiving any other property tax abatement, assessment deferral, or any other economic exemptions;
- The Property is receiving tax relief through state subsidies which include payment of local taxes for more than 25% of the dwelling units or payment in lieu of taxes;
- The property owner is delinquent on any Real Property or Personal Property tax in North Branford, unless the delinquency is cleared prior to construction, or a payment of delinquent taxes has been arranged;
- **Rehabilitation or Construction has ALREADY COMMENCED PRIOR TO FILING AN APPLICATION FOR ASSESSMENT DEFERRAL.** (Note: an application packet initialed and dated prior to the start of construction will be deemed timely, if such application is promptly completed and submitted).
- The property is Solely Residential Use, including Condominiums, and Transient Residential Use

How can I get More Information?

The Office of the Town Planner
Carey Duques, Town Planner
(203) 484-6008
Town Hall 909 Foxon Rd

The Department of Assessment
Dave Ambrose, Assessor
(203) 484-6013
Town Hall 909 Foxon Rd

The Town Manager’s Office
Michael Paulhus
(203) 484-6000
Town Hall 909 Foxon Rd

**THIS INFORMATIONAL SHEET DOES NOT CONSTITUTE AN EXHAUSTIVE DESCRIPTION OF THE CITY WIDE ASSESSMENT DEFERRAL PROGRAM. IT IS MERELY DESIGNED TO ALERT PROSPECTIVE APPLICANTS THAT THE PROJECT MAY BE ELIGIBLE AND TO DIRECT SUCH APPLICANTS TO THE APPROPRIATE DEPARTMENTS. ADDITIONAL INFORMATION MAY BE FOUND IN THE TOWN RESOLUTION.**

Approval of Eligibility does not excuse and shall not be considered a substitute for any applicable regulatory approvals. All agreements made under this program are made subject to the express condition subsequent that the actual construction or rehabilitation project meets all applicable inspection and regulatory standards. Any failure to meet regulatory standards required by applicable law shall render an agreement made under this program void.
II. APPLICATION & SUBMISSION CHECKLIST

Required Documents

Please Be Sure Your Submission Includes All of the Following:

- Application form completed, signed, dated, and notarized.
- One set of outline specifications, including as much specificity as practicable and the materials to be used for interior and exterior finishes.
- One copy of an itemized cost estimate for the rehabilitation or new construction. The itemized list must be on contractor letterhead, indicate the property address of the project, and be signed by the contractor.
- One set of preliminary architectural drawings or blueprints
- One copy of any recent appraisals of the property (if available).
- One copy of Building and Zoning permits.
- One copy of an Income and Expense report for the property. The Income and Expense report will be delivered directly to the Assessor to protect the confidentiality of the document.
- One copy of the final decision of the zoning authority or regulatory agency granting relief (if applicable).

NOTE: NO APPLICATION WILL BE CONSIDERED UNLESS IT IS FILLED OUT COMPLETELY AND INCLUDES ALL REQUIRED SIGNATURES AND SUPPORTING DOCUMENTATION INCLUDING APPLICABLE ZONING OR OTHER REGULATORY RELIEF. THE TOWN OF NORTH BRANFORD IS REQUIRED TO MAKE A DETERMINATION OF ELIGIBILITY WITHIN FORTY-FIVE (45) DAYS OF RECEIPT OF A COMPLETED APPLICATION. HOWEVER, AN APPLICATION WILL NOT BE CONSIDERED COMPLETE IF ANY REQUIRED DOCUMENTATION, INCLUDING EVIDENCE OF REGULATORY RELIEF HAS NOT BEEN RECEIVED. IN SUCH CASES THE FORTY-FIVE (45) DAY PERIOD SHALL BE TOLLED UNTIL ALL DOCUMENTATION HAS BEEN RECEIVED, INCLUDING EVIDENCE OF NECESSARY ZONING OR REGULATORY RELIEF. TO ENSURE TIMELY REVIEW OF ELIGIBILITY, AN APPLICANT WHO BELIEVES THAT HE OR SHE HAS BEEN SUBJECTED TO UNDUE DELAY OR INACTION MAY REQUEST IN WRITING A REVIEW OF THE APPLICATION’S STATUS BY THE TOWN MANAGER. SUCH REVIEW WILL BE IN ADDITION TO AND SHALL IN NO WAY BE CONSTRUED AS SUPERSEeding OR LIMITING THE APPLICANT’S RIGHT OF APPEAL UNDER THE PROCEDURES ESTABLISHED IN CONN. GEN. STAT. §12-65f
III ASSESSMENT DEFERRAL APPLICATION

1. Application Information
   All questions refer to the Deferral property

   a. Contact information (owner or authorized agent)
      Name _____________________________________________
      Address ___________________________________________
      Telephone ____________________________________________
      Email ________________________________________________

   b. Property Information
      Location _____________________________________________
      List No. _____________________________________________
      Map/Block/Parcel ____________________________________
      Zone ________________________________________________

   c. Ownership Information
      Property Owner’s Name ________________________________
      Owner’s % Ownership ________________________________

2. Rehabilitation / Construction
   a. Expected date of project commencement? _________________
   b. Expected date of project completion _________________
   c. Please indicate below the property uses(s) for before and after construction.

<table>
<thead>
<tr>
<th>Use</th>
<th>Before Rehab. / Construction</th>
<th>After Rehab. / Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Industrial</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Mixed Use</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

3. OTHER TAX SUBSIDES
   a. Are you receiving abatements or exemptions under any other programs? ☐ Yes ☐ No
      If yes, please describe: _________________________________________________
4. TAX DELINQUENCIES

a. Do you owe back taxes on the subject property or any other North Branford property in which you have a legal or equitable interest?  □ Yes  □ No

b. Do you or your affiliates personally owe any other taxes (real, personal, or motor vehicle) to the Town of North Branford?  □ Yes  □ No

Please list property address(es) or items and amount in arrears for all delinquencies?

<table>
<thead>
<tr>
<th>Address / Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

TAX COLLECTOR’S CERTIFICATION

I ____________________ to the best of my knowledge solemnly swear that the applicant or applicant affiliates do not owe any real, personal, or motor vehicle taxes to the Town of North Branford.

5. REGULATORY RELIEF

a. Is there any pending application for zoning or regulatory relief or will any relief be required prior to the start of this project?  □ Yes  □ No

b. If yes, check all applicable:

□ Zoning  □ Variance  □ Site-Plan  □ Other

□ Special Use  Explain:

*****************************************************************************

□ DEP Permit  □ Wetlands

□ Other:  Explain:

*****************************************************************************

□ Utility  Explain:

*****************************************************************************
6. SWORN STATEMENT

I certify that all information in this application and all information furnished in support of this application is true and complete to the best of my knowledge and belief.

_________________________________________  ______________________
Signature                                      Date

Subscribed and sworn to me this _____ Day of   ________________

_________________________________________
Name and Title:  Clerk or Commissioner of the Superior Court, Notary Public, Justice of the Peace, or Judge

Signature

COMPLETED APPLICATIONS SHOULD BE SUBMITTED TO:

Town Planner’s Office
909 Foxon Rd
North Branford, CT 06471