

CITY OF KIRKSVILLE

DEMOLITION PROGRAM GUIDELINES

I. PROGRAM OBJECTIVE

The City Kirksville Demolition program is designed to eliminate residential or commercial structures which are in such a state of disrepair that it constitutes a safety concern, and rehabilitation is not a viable option. This program offers most property owners who cannot afford to demolish the structure the funds to eliminate that portion, or all of the structure, which is in violation.

II. ELIGIBILITY CRITERIA

- a. The applicant must own the property or have a written agreement to purchase the property.
- b. The property may be a commercial or residential property.
- c. Applicants must provide a tax statement and have a title that is free of liens and legal questions as to ownership of the property.
- d. Applicants cannot owe back taxes on the property or have outstanding adverse judgments, encumbrances or liens with the City of Kirksville.
- e. All City obligations in applicant's name should be current - including, but not limited to, tax liens from code violations, utility bills.
- f. Applicants should have adjusted gross income at or below 80% of the area median income (see Income Guidelines on Application).
- g. The City will consider assisting those who do not meet the above requirements who are working to eliminate slum/blight.

Applicants must have adjusted gross income at or below 80% of the area median income (see chart below).

III. LOAN CATEGORIES AND TERMS

- a. The maximum loan amount is \$5,000.
- b. Repayment term is based on the amount of the loan.
- c. Interest rate is 1/3 of prime.
- d. If the structure proposed for demolition is not condemned, the applicant will pay 20% and the City will loan 80% of demolition costs.
- e. If the structure proposed for demolition is condemned, the applicant will pay 50% and the City will loan 50% of demolition costs.

Office Use Only: Application Number: _____ Application Date: _____
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CITY OF KIRKSVILLE  
DEMOLITION PROGRAM  
**APPLICATION FORM**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS OF APPLICANT: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

ADDRESS OF PROPERTY TO BE DEMOLISHED:  
\_\_\_\_\_

TOTAL PROJECT COST: \_\_\_\_\_ AMOUNT REQUESTING: \_\_\_\_\_

TYPE OF PROPERTY:

COMMERCIAL \_\_\_\_\_ RESIDENTIAL \_\_\_\_\_

IS THE PROPERTY CONDEMNED?

YES \_\_\_\_\_ NO \_\_\_\_\_

DO YOU OWN THIS PROPERTY OR HAVE A WRITTEN AGREEMENT TO PURCHASE?

YES \_\_\_\_\_ NO \_\_\_\_\_

BASED ON THE INCOME GUIDELINES BELOW, DO YOU QUALIFY AS HAVING ADJUSTED GROSS INCOME AT OR BELOW 80% OF THE AREA MEDIAN INCOME? YES \_\_\_\_\_ NO \_\_\_\_\_

**2016 INCOME GUIDELINES (adjusted gross income)**

# PERSONS IN HOUSEHOLD	ONE	TWO	THREE	FOUR	FIVE	SIX	SEVEN	EIGHT OR MORE
30 %	11,880	16,020	20,160	24,300	28,440	32,500	34,750	37,000
50%	19,600	22,400	25,200	28,000	30,250	32,500	34,750	37,000
80%	31,400	35,850	40,350	44,800	48,400	52,000	55,600	59,150

**NOTE:** Acceptance of this application is contingent upon provision of all required information and applicant's agreement to abide by all applicable procedures and policies of the Kirksville Demolition

Program. Upon acceptance in the program, the applicant must submit a copy of the most recent Federal Income Tax Return and/or other documents that might be required to support the applicant's income.

The Applicant(s) agrees that the City of Kirksville neither assumes nor acknowledges any liability of any kind, directly or indirectly, as might be incurred from this program. Authorization is hereby granted to support and/or verify statements contained in this Application. It is agreed that this application will remain property of the City of Kirksville, once submitted.

Agreement: The undersigned applies from the loan indicated in the application to be secured by a mortgage or deed of trust on the property described herein, and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and correct to the best knowledge of the applicant. Verification may be obtained by any source named in this application.

I/We fully understand that it is a federal crime punishable by fine and/or imprisonment, to knowingly make any false statements concerning any of the above facts as applicable under provisions of Title 18, United States code, Section 1014. Also the applicant(s) have read and understood the application and the narrative explaining the program.

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

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**CITY USE ONLY**

Application Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Verification date: \_\_\_\_\_

Eligible \_\_\_\_\_

Ineligible \_\_\_\_\_

Reason for Ineligibility: \_\_\_\_\_