

City of Dillon



401 West Main Street PO Drawer 431
Dillon, SC 29536
(843) 774-0040 Fax: (843) 774-0050
www.cityofdillon.sc.gov

CITY OF DILLON
INCENTIVE GRANT PROGRAM
FISCAL YEAR 2023—2024 GUIDELINES
Effective 26 May 2023

DOWNTOWN DEVELOPMENT OFFICE
101 W. Main Street, Dillon, SC 29536 | 843.845.4393

1.

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2.

Introduction:

The City of Dillon desires to expand small businesses and encourage appropriate redevelopment within the Downtown Commercial Historic District. This document is intended to provide an overview and guidance on the incentive programs currently available in the Commercial Historic District located in Dillon, SC. All programs listed in this document are administered by the City of Dillon, and while City staff will assist to the extent possible, it is up to the applicant to ensure all program requirements are met. Properties located within the Historic Commercial District are illustrated on the map included in this packet and represent the only properties eligible for the Incentive Grant Program.

Incentive funding is limited and the incentives shall be suspended when funding has been depleted. Upon availability of additional funding, the incentives shall be restored. The Dillon Historic Preservation Grant is a competitive grant. All other grant programs listed in the Incentive Grant Program Guidelines are on a first-come basis. All redevelopment incentives are reimbursement based. Applicants must spend funds and demonstrate proof of payment as well as fill out the appropriate reimbursement form prior to receiving development incentive funds. Grants are limited to one (1), per tax parcel, per fiscal year.

Recipients of incentives will be required to ensure that all work is properly permitted, and appropriate licenses are obtained prior to commencement of work. Please call the City of Dillon Code Department if you are unsure of licensing status or requirements.

All exterior work in the Commercial Historic District must be approved by the Board of Architectural Review (BAR) prior to commencing. The application and approval process begins with the applicant submitting a Certificate of Appropriateness (COA) Application for approval by the of BAR, signed by the Applicant and the Property Owner, with a photograph of the property and pictures of materials/items to be used, contractor information and contractor's estimate. Upon approval of the COA, before beginning project work, the applicant must submit to the Code Enforcement Office a completed and signed Grant Program Application and Agreement with a copy of the approved COA. Failure to obtain BAR approval prior to work commencing will cause a forfeiture of possible incentives. Any changes to the design after initial approval must be resubmitted to the BAR for approval. Any work completed prior to the date of grant approval in not eligible for funding.

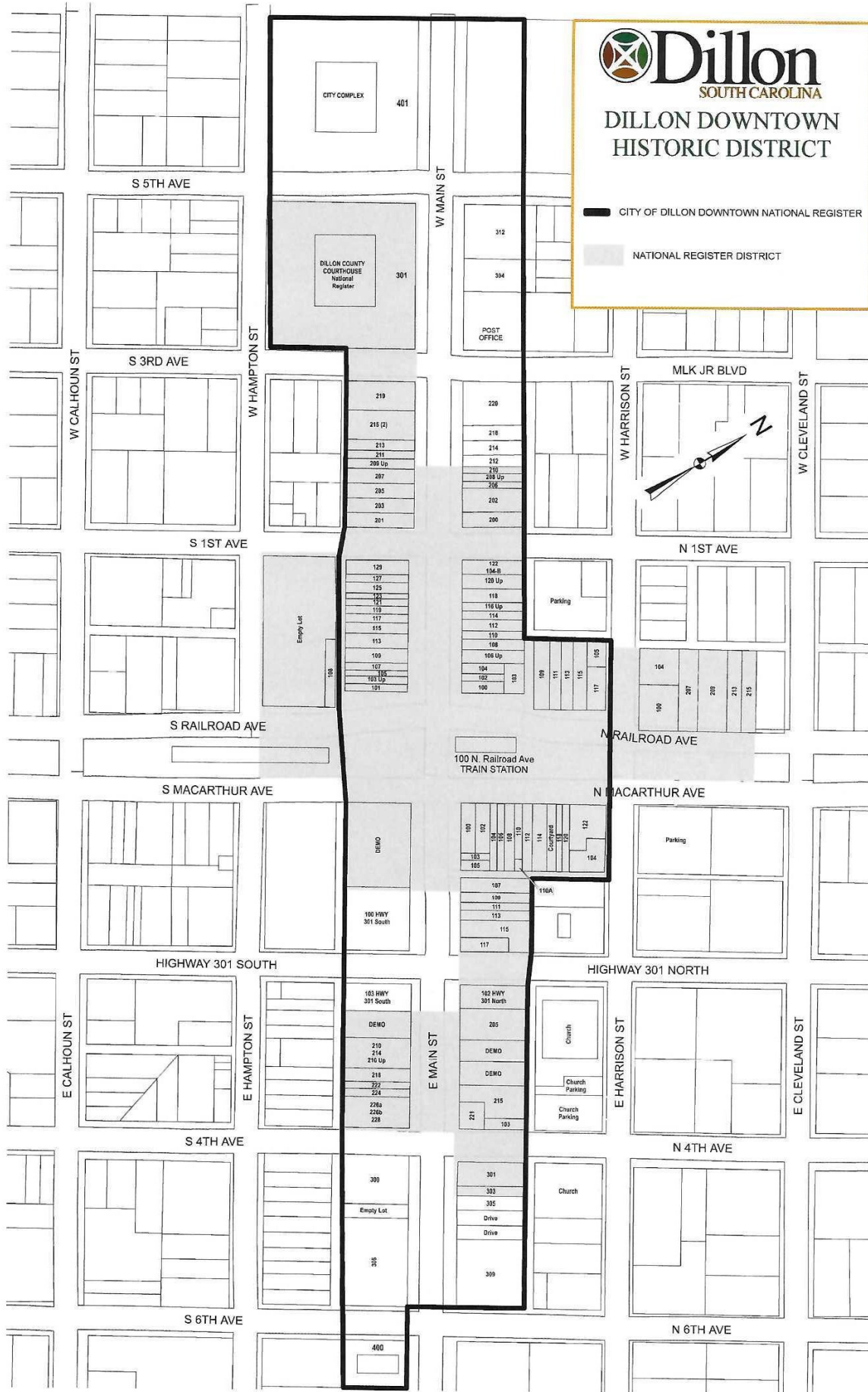
The legal owner of the property as listed in the County Property Records must provide written permission for all work, both interior and exterior, and must agree to the maintenance of the property regarding the grant-assisted work.

With the exception of the Dillon Historic Preservation Grant, all grant projects must be completed within the fiscal year they are started. There is no carry-over of funding or reimbursable projects from one fiscal year to the next (after June 16 of each year) without approval by the City Administrator. The Dillon Historic Preservation Grant must be completed within twenty-four (24) months of final approval. All grant projects must be physically started within ninety (90) days of the start date indicated on the submitted application & agreement.

Reimbursement will only occur after:

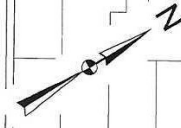
1. Project completion and final inspection with approval by Code Enforcement and BAR Chairman (if applicable).
2. Submission of invoices for work completed and proof of payment in the form of canceled check images (front and back), or itemized credit card receipts.
3. Submission of appropriate reimbursement form.
4. Submission of the approved Certificate of Appropriateness (if applicable).

Consultation with City staff is encouraged at multiple points through the project and BEFORE any work is started. All construction projects require a building permit and all contractors must have a professional trade license and a City of Dillon Business License pursuant to Dillon City Code of Ordinances. Please call the City of Dillon Code Department at 843-774-0040 ext. 1012 with questions.



DILLON DOWNTOWN HISTORIC DISTRICT

- CITY OF DILLON DOWNTOWN NATIONAL REGISTER
- NATIONAL REGISTER DISTRICT



4.

Façade Grant — Requires a 25% match of total project cost with grant maximum of \$5000

The Façade Grant program grants up to \$5000 for property owners or tenants to improve the exterior appearance and functionality of the facades of commercial buildings. Grants require a minimum of a 25% match by the property owner or tenant, and the grant is allocated by tax map ID number.

Funding may only be used on any exterior portion of the building that is visible to the public. For purposes of the grant program, the word “façade” shall mean the front of the structure, side if it is a corner lot and the rear of the building, and the sidewalk to the curbing at the street. Funding must be used for work that is permanently attached to the building or grounds (i.e. display windows, paint, shutters, lighting, awnings, benches, planters). The improvements must be consistent with the Secretary of the Interior's Standard for Rehabilitation of Historic Buildings and the Historic Overlay Ordinance. Awnings and signage must meet the permitting heights and widths based on City ordinances.

Applicants are required to submit proof of payment in the form of canceled check images (front and back), itemized credit card receipts, and paid invoices from a contractor or receipt from a signage company. A reimbursement form and the approved Certificate of Appropriateness (COA) must also be submitted.

Additional Information:

1. Before and after pictures are required to be submitted with a façade grant.
2. Any contractors must have a valid City of Dillon Business License prior to engaging in construction work.
3. Work completed by the property owner is not eligible for reimbursement unless:
 - a. The property owner is a licensed contractor.
5. Any changes to the design after initial approval must be resubmitted to the BAR for approval.
6. Any work completed prior to the date of grant approval is not eligible for funding.
7. Potted plant materials paid for in part by the grant must be maintained. **Artificial plants are not allowed.**

Design Grant — Requires a 50% match of total project cost with grant maximum of \$500

Many new businesses will require a Life-Safety Plan, or a set of plans prepared by a design professional (architect/engineer). The purpose of this grant is to help offset the cost of preparing these plans. Applicants are required to submit proof of payment in the form of canceled check images (front and back), itemized credit card receipts, and paid invoices from a design professional (SC Licensed Architect or Engineer) and a reimbursement form.

Sign Grant — Requires a 50% match of total project cost with grant maximum of \$500

Property owners or tenants within the Commercial Historic District are eligible to apply for grant assistance up to \$500 for new exterior business signage. Applicants are required to submit proof of payment in the form of canceled check images (front and back), itemized credit card receipts, and paid invoices from a contractor or receipt from a signage company. A reimbursement form and the approved Certificate of Appropriateness (COA) must also be submitted.

Additional Information:

1. All signs must have an approved Certificate of Appropriateness (COA) issued by the Board of Architectural Review prior to installation. Failure to obtain a COA BEFORE the signage is installed will cause a forfeiture of the grant.
2. Contractors must have a valid City of Dillon business license.
3. Any work completed prior to the date of grant approval is not eligible for funding.

5.

Building Improvement Grant: Requires a 50% match of total project cost with grant maximum of \$5000—NEW TENANT GRANT

The City of Dillon recognizes that when a new tenant moves into an existing building, the costs associated with getting the property ready can serve as an impediment to small businesses. This grant is designed to help offset some of the costs associated with preparing a building for use. Funds may be used to repair the exterior and/or interior of the building.

Additional Information:

1. Only work completed under a building permit is eligible to be reimbursed.
 - a. Completed work that does not require a building permit (ex. Painting or flooring cover) is only eligible to be reimbursed for material costs. Receipts must be provided and be from a licensed business.
 - i. Applicant must also be able to demonstrate where the purchased material has been used (ex. with before and after pictures).
2. Contractors must have a valid City of Dillon business license AND be appropriately licensed by the State of South Carolina.
3. All work must be permanently attached to the building. Items that may be easily removed from the building are not eligible.
4. Before and after pictures are required for any reimbursement.
5. Reimbursements will take place only after the occupant of the business has received a valid City of Dillon business license, passed all required inspections and has been issued a Certificate of Completion and Certificate of Occupancy by the City.
6. It is the responsibility of the business to apply for reimbursement. Failure to apply when eligible will cause forfeiture of incentives due.
7. Any work completed prior to the date of grant approval is not eligible for funding.

Dillon Historic Preservation Grant— Requires a 50% match of total project cost with grant maximum of \$50,000 (Pre-Approval Required)

The City of Dillon puts a strong emphasis on the preservation of its historic resources. This grant aims to help encourage the rehabilitation of historic commercial buildings within the Downtown Dillon Historic District and are available to tenant or property owners who make a substantial investment into a historic commercial building. Historic commercial properties are defined as any that contribute or may contribute to the Downtown Dillon Historic District. Properties used as single family or duplex residential are ineligible.

Additional Information:

1. Substantial investment is defined as a minimum of \$50,000 spent on the rehabilitation of a historic building.
2. Only work completed under a building permit is eligible for reimbursement.
3. Application requires two quotes from general contractors licensed in the State of South Carolina and are to be submitted with initial application.
4. Applicant must demonstrate ability to pay for proposed investment.
5. All work must comply with the standards of the Board of Architectural Review.
6. Any work completed prior to the date of grant approval is not eligible for funding.
7. Pre-approval will be given by the Chairman of the Board of Architectural Review, the Chairman of the Planning and Zoning Commission, Downtown Development Coordinator and the Director of Codes and Planning. Final approval will be granted by City Council.
8. Applicant has twenty four (24) months from the date of pre-approval to complete the work. The City Administrator may grant a 6-month extension if the property owner can demonstrate extenuating circumstances that would prevent the completion of the project within a 2-year time frame.
4. Reimbursements will take place only after a business has received a valid City of Dillon business license, passed all required inspections and has been issued a Certificate of Completion and Certificate of Occupancy by the City.

New Business Fees and Tax Reduction Incentives

The following incentives for new businesses only apply when a new business license is being issued to a physical location. Businesses that are moving locations are not eligible for new business incentives. Contractors and home occupation businesses are not eligible for new business incentives. If a business closes prior to the issuance of new business incentives then it forfeits all incentives due. The business must be a new construction or 66% or above on renovations of an existing building to be eligible for the New Business Fees and Tax Reduction Incentives. The City of Dillon Code Enforcement Department will make the determination if the renovation of existing building meets the 66% threshold. The 66% threshold is defined by determining the square footage of an existing building and that 66% of the building is renovated.

1. Business License

New businesses located in the City of Dillon will receive a 50% reduction in their first year business license, a 25% reduction in their second year business license and a 0% reduction in the third year and thereafter.

2. Hospitality Fee

New businesses located in the City of Dillon will receive a 50% reduction in hospitality fee their first year, a 25% reduction in their hospitality fee their second year, and a 0% reduction in the third year and thereafter.

3. Local Accommodations Tax

New businesses located in the City of Dillon will receive a 50% reduction in local accommodations tax their first year, a 25% reduction in their local accommodations tax their second year and a 0% reduction in the third year and thereafter.

4. Building/Plumbing/Mechanical/Electrical Permit Fee Reimbursement

New businesses located in the City of Dillon will be reimbursed 50% of Building Permit Fees directly associated with starting that new business. It is the responsibility of the business to apply for reimbursement. Failure to apply when eligible will cause the forfeiture of incentives due. The reimbursement schedule is as follows:

- a. For businesses licensed in January through June, your reimbursement application is due by July 1, 2023.
- b. For businesses licensed in July through December, your reimbursement request is due by January 2, 2024.

5. Water/Sewer Tap Reimbursement

If water/sewer connections are required for a new business in the City of Dillon, the City will reimburse the full amount after the Certificate of Occupancy has been issued for the building. Reimbursement must be requested no later than 30 days after the Certificate of Occupancy is issued. If the 30th day falls on a holiday or weekend, requests will be accepted on the following business day.

Tax Credit Programs

For property owners, there are tax credit programs available from federal and state agencies. A tax advisor and/or lawyer can assist property owners in assessing whether their properties or projects would qualify for these programs.

Federal Historic Tax Credit—20% Tax Credit

A federal income tax credit equal to 20% of rehabilitation costs available for work on qualifying historic buildings. In general, each dollar of tax credit earned reduces the amount of federal income taxes owed by the investor by one dollar.

Eligible Properties: Buildings listed individually or buildings that are listed as “contributing” to a historic district on the National Register of Historic Places are eligible for Federal Historic Tax Credits.

Eligible Use: Income producing use such as offices, stores/shops, or rental housing

Expenditure Requirements: Costs must exceed the adjusted basis of the building (the purchase price—the cost of the land + the value if improvements were made—depreciation already taken), or \$5,000, whichever is greater.

Review of Work: The National Parks Service must certify that the rehabilitation meets the Secretary of the Interior’s Standards for Historic Preservation. Review begins with the State Historic Preservation Office (SHPO).

Authorizing Legislation: Tax Reform Act of 1986 (PL99-514; Internal Revenue Code Section 47)

State Historic Rehabilitation Tax Credit—25% Tax Credit

Owners of historic buildings in South Carolina who meet the requirements of the 20% Federal Historic Building Tax Credit may also qualify for a state income tax credit of 25%. Taxpayers do not have to go through a separate State Historic Preservation Office (SHPO) application process. Successfully completing the federal application process qualifies the owner of the property for the state credit. The incentive is a state income or license tax credit equal to 25% of the property rehabilitation costs. In general, each dollar of tax credit earned reduces the amount of state income or license taxes owed by one dollar.

New Market Tax Credit—Requires Specialized Consultant

Unlike the Historic Preservation Tax Credit programs, this federal tax credit program is a competitive program with more credits each year than the amount allocated to the participating entities. It is an extremely complex program and requires the assistance of a consultant experienced in that field.

The new NMTC program provides tax credit incentives to investors for equity investments in qualified census tracts. Your NMTC advisor can determine whether your project in Downtown Dillon is eligible to apply for NMTCs. Parts of the Dillon area do qualify, however many areas do not.

Opportunity Zone Tax Benefits

Opportunity zones are a tax benefit created by the Tax Cuts and Jobs Act of 2017 to spur investment in economically distressed communities. In exchange for qualified investments in specific places, a taxpayer may defer and reduce taxes owed on capital gains and earn tax-free capital gains for opportunity zone investments held at least 10 years.

8.

South Carolina Abandoned Building Tax Credit—25% Tax Credit

The amount of this tax credit is equal to 25% of the actual rehabilitation expenses incurred at a qualifying building site. The General Assembly passed legislation in 2013 that gives cities a new economic development tool to incentivize private development in downtowns for the “rehabilitation, renovation, and redevelopment” of empty storefronts. Abandoned buildings are routinely safety hazards that cost cities and towns precious resources by using additional fire and police services, while decreasing property values.

Eligible Properties: To be eligible, a building must be at least 66% vacant for the past five years; must be non-operational for income-producing purposes; may not be a single family residence; a building listed on the National Register of Historic Places when used solely for storage or warehousing; investor using the tax credit may not be the owner at the time of the abandonment.

Eligible Use: Income producing use such as offices, stores/shops, or rental housing

Expenditure Requirements: The entire credit is earned in the taxable year in which the applicable phase or portion of the building site is placed in service, but must be taken in equal installments over a three-year period beginning with the tax year in which the applicable phase or portion of the building site is placed into service. Unused credit may be carried forward for the succeeding five years.

Limitations: The entire credit earned may not exceed \$500,000 for any taxpayer in a tax year for each abandoned building site. The limitation applies to each unit or parcel deemed to be an abandoned building site.

Authorizing Legislation: SC Code SECTION 12-67-100

Bailey Bill

The Bailey Bill is a tax incentive program to encourage the rehabilitation of historic buildings by freezing the assessed value of the property for ten years. The tax incentive is obtained by investing a minimum amount into the rehabilitation of a historic building. The process for obtaining the tax incentive is involved but not difficult. The governing body of a county or municipality may grant by ordinance certain special tax assessments to real property qualifying as “rehabilitated historic property” or as “low and moderate income rental property”.

USDA Rural Development Loan Programs

USDA Rural Development has several different low interest loan programs available. The Downtown Development Office provides information on the program (s) available to potential property owners and/or developers. For complete details about this and other programs, visit www.rd.usda.gov/programs-services. Interested borrowers should inquire about the program with their lender.



Façade Grant Application & Agreement

Name of Applicant: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Time Line: Start Date: _____ Completion Date: _____

Description of Work: _____

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Detailed Itemized Budget: _____

Total Cost of Improvements: \$ _____

Amount Requested (based on grant program): \$ _____

I, the undersigned, understand that in order for my request for funds to be approved and reimbursed, I must agree to follow the approved Certificate of Appropriateness (COA) plans submitted as part of this agreement. I also understand that monies are granted on a reimbursement basis, following completion of the work. Design changes not approved by the Board of Architectural Review (BAR) will not be funded and could result in forfeiture of the grant. I am aware that in order to be reimbursed I must submit invoices for work completed and proof of payment in the form of canceled check images (front and back), itemized credit card receipts and properly completed forms. I am also aware that:

1. The project must be physically started within 90 days of the start date above. If the project has not be started by that time, this agreement is void. Applicant may reapply if funds are available.
2. The project must be completed in the fiscal year it is started.
3. All receipts and required documentation must be turned in within one week of completion and no later than June 16, 2023.
4. Any work completed prior to the date of grant approval in not eligible for funding.

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____



Façade Grant Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work:

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Total Cost of Improvements: \$ _____

Amount Requested (based on grant program): \$ _____

Required Documentation:

_____ Contractor's Invoice or Appropriate Documentation of Cost

_____ Copies of Building Permits issued by the City of Dillon Code Enforcement Department

_____ Receipts as Appropriate (Refer to Incentive Grant Program Guidelines)

_____ Before and After Photographs

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____



Design Grant Application & Agreement

Name of Applicant: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work: _____

Name of SC Licensed Architect or Engineer: _____

Phone Number: _____ Email Address: _____

Total Cost of Plans: \$ _____

Amount Requested (based on grant program): \$ _____

I, the undersigned, understand that in order for my request for funds to be approved and reimbursed, I must agree to follow the approved Certificate of Appropriateness (COA) plans submitted as part of this agreement. I also understand that monies are granted on a reimbursement basis, following completion of the work. Design changes not approved by the Board of Architectural Review (BAR) will not be funded and could result in forfeiture of the grant. I am aware that in order to be reimbursed I must submit invoices for work completed and proof of payment in the form of canceled check images (front and back), itemized credit card receipts and properly completed forms. I am also aware that:

1. The project must be complete within 90 days of approval. If the project has not been completed within that time, this agreement is void. Applicant may reapply if funds are available.
2. The project must be completed in the fiscal year it is started.
3. All receipts and required documentation must be turned in within one week of completion and no later than June 16, 2023.
4. Any work completed prior to the date of grant approval is not eligible for funding.

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

City of Dillon



401 West Main Street PO Drawer 431
Dillon, SC 29536
(843) 774-0040 Fax: (843) 774-0050
www.cityofdillon.sc.gov

Design Grant Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work: _____

Name of SC Licensed Architect or Engineer: _____

SC Licensed Architect or Engineer Phone Number: _____

Email Address: _____

Total Cost of Plans: \$ _____

Amount Requested (based on grant program): \$ _____

Required Documentation:

_____ Copy of Plans

_____ Receipts as Appropriate (Refer to Incentive Grant Program Guidelines)

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____



Sign Grant Application & Agreement

Name of Applicant: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work:

Name of Signage Company: _____

Phone Number: _____ Email Address: _____

Detailed Itemized Budget: _____

Total Cost of Sign : \$ _____

Amount Requested (based on grant program): \$ _____

I (we) understand that in order for my request for funds to be approved and reimbursed, I must agree to follow the approved Certificate of Appropriateness (COA) plans submitted as part of this agreement. I also understand that monies are granted on a reimbursement basis, following completion of the work. Design changes not approved by the Board of Architectural Review (BAR) will not be funded and could result in forfeiture of the grant. I am aware that in order to be reimbursed I must submit invoices for work completed and proof of payment in the form of canceled check images (front and back), itemized credit card receipts and properly completed forms. I am also aware that:

1. The project must be physically started within 90 days of the start date above. If the project has not be started by that time, this agreement is void. Applicant may reapply if funds are available.
2. The project must be completed in the fiscal year it is started.
3. All receipts and required documentation must be turned in within one week of completion and no later than June 16, 2023.
4. Any work completed prior to the date of grant approval in not eligible for funding.

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Applicant (s) Signature: _____ Date: _____



Sign Grant Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work: _____

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Total Cost of Sign: \$ _____

Amount Requested (based on grant program): \$ _____

Required Documentation:

_____ Copy of Sign Permit

_____ Copies of Building Permits issued by the City of Dillon Code Enforcement Department

_____ Receipts as Appropriate (Refer to Incentive Grant Program Guidelines)

_____ Photograph of Installed Sign

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Applicant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____



Building Improvement Grant Application & Agreement (NEW TENANT GRANT)

Name of Applicant: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Time Line: Start Date: _____ Completion Date: _____

Description of Work:

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Detailed Itemized Budget: _____

Total Cost of Improvements: \$ _____

Amount Requested (based on grant program): \$ _____

I (we) understand that in order for my request for funds to be approved and reimbursed, I must agree to follow the approved Certificate of Appropriateness (COA) plans submitted as part of this agreement. I also understand that monies are granted on a reimbursement basis, following completion of the work. Design changes not approved by the Board of Architectural Review (BAR) will not be funded and could result in forfeiture of the grant. I am aware that in order to be reimbursed I must submit invoices for work completed and proof of payment in the form of canceled check images (front and back), itemized credit card receipts and properly completed forms. I am also aware that:

1. The project must be physically started within 90 days of the start date above. If the project has not be started by that time, this agreement is void. Applicant may reapply if funds are available.
2. The project must be completed in the fiscal year it is started.
3. All receipts and required documentation must be turned in within one week of completion and no later than June 16, 2023
4. Any work completed prior to the date of grant approval in not eligible for funding.

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____



Building Improvement Grant and Permit Reimbursement Request (NEW TENANT GRANT)

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work: _____

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Total Cost of Improvements: \$ _____

Amount Requested (based on grant program): \$ _____

Required Documentation:

_____ Copies of Building Permits (Available from the City of Dillon Code Enforcement Department)

_____ Receipts as Appropriate (Refer to Incentive Grant Program Guidelines)

_____ Paid Invoice from Contractor

_____ Before and After Photographs

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____



Dillon Historic Preservation Grant Pre-Approval Application

Please refer to the Incentive Grant Program Guidelines prior to any work taking place.

Name: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Time Line—Start Date _____ Completion Date: _____

Contractor Phone Number: _____ Email Address: _____

Anticipated Total Cost of Project: \$ _____

Required Documentation:

_____ Two (2) Quotes from Licensed General Contractors

_____ Documents Demonstrating Ability to Finance Project

_____ Description of Project (Must be Typed)

I (we) understand that in order for my request for funds to be approved and reimbursed, I must agree to follow the approved Certificate of Appropriateness (COA) plans submitted as part of this agreement. I also understand that monies are granted on a reimbursement basis, following completion of the work. Design changes not approved by the Board of Architectural Review (BAR) will not be funded and could result in forfeiture of the grant. I am aware that in order to be reimbursed I must submit invoices for work completed and proof of payment in the form of canceled check images (front and back), itemized credit card receipts and properly completed forms. I am also aware that:

1. The project must be physically started within 90 days of the start date above. If the project has not be started by that time, this agreement is void. Applicant may reapply if funds are available.
2. The project must be completed within twenty-four (24) months of final approval date.
3. All receipts and required documentation must be turned in within one week of completion and no later than June 16, 2025.
4. Any work completed prior to the date of grant approval in not eligible for funding.

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

Pre-Approval

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Final Approval by Council

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Approval Signature: _____ **Date:** _____

Extension Grant by City Administrator (Up to 6 Months): _____

Project Completed Date: _____



Dillon Historic Preservation Grant Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Work Completed (Must be Typed)

Name of Contractor: _____

Contractor Phone Number: _____ Email Address: _____

Total Cost of Improvements: \$ _____

Amount Requested (based on grant program): \$ _____

Required Documentation:

_____ Copies of Building Permits (Available from the City of Dillon Code Enforcement Department)

_____ Receipts as Appropriate (Refer to Incentive Grant Program Guidelines)

_____ Paid Invoice from Contractor

_____ Before and After Photographs

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ **Date:** _____



New Business Fees and Tax Reduction Application & Agreement

Name of Applicant: _____

Business Name: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Description of Property (be as specific as possible and attach additional pages as needed):

Tax Identification Number (s): _____

Current or expected acquisition costs: _____

Estimated start date for development: _____

Description of development (include a good faith estimate if expected costs, being as specific as possible; attach additional pages if needed):

Job creation (include good faith estimate of jobs created and expected dates of implementation):

Estimates as to benefits to the City of Dillon from the development (may include, but not limited to, business license fees, property taxes, improvements to City-owned infrastructure or utilities—be as specific as possible and attached additional pages if needed):

Other Pertinent information (attach additional pages if needed):

I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations. Additionally, I affirm and certify that, based on the acquisition costs of the property described above, the costs of the proposed improvements and the expected jobs to be created or retained, the development shall meet or exceed the Minimum Investment requirements of the City of Dillon Incentive Grant Program.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____



Business License Tax Reduction Request

Please refer to the Incentive Grant Program Guidelines prior to applying for reduction.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Total Cost of Business License for Year: \$ _____

Required Documentation:

_____ Valid Documentation from City of Dillon

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ All Materials Included

_____ Approved

_____ Denied

Reason for Denial: _____

Approval Signature: _____ Date: _____



Hospitality Tax Reduction Request

Please refer to the Incentive Grant Program Guidelines prior to applying for reduction.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Hospitality Tax Remitted During Year: \$ _____

Required Documentation:

_____ Valid Documentation from City of Dillon

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ Date: _____



Accommodations Tax Reduction Request

Please refer to the Incentive Grant Program Guidelines prior to applying for reduction.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Accommodations Tax Remitted During Year: \$ _____

Required Documentation:

_____ Valid Documentation from City of Dillon

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ All Materials Included

_____ Approved

_____ Denied

Reason for Denial: _____

Approval Signature: _____ Date: _____



Building (Plumbing/Mechanical/Electrical) Permit Fee Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Plumbing Permit Fee: \$ _____

Mechanical Permit Fee: \$ _____

Electrical Permit Fee: \$ _____

Required Documentation:

_____ Valid Receipt (s) from City of Dillon

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ All Materials Included

_____ Approved

_____ Denied

Reason for Denial: _____

Approval Signature: _____ Date: _____



Water and Sewer Tap Reimbursement Request

Please refer to the Incentive Grant Program Guidelines prior to any work taking place or applying for reimbursement.

Name: _____

Business Name: _____ Date of Business Opening: _____

Business Address: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Water Tap Fee: \$ _____

Sewer Tap Fee: \$ _____

Required Documentation:

_____ Valid Receipt (s) from City of Dillon

I certify that the above is true and accurate. I understand that this is an application for reimbursement and the City of Dillon may reimburse me for all, some, or none of the work completed. I understand that incomplete applications will not be reimbursed. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

REMINDER

It is your responsibility to ensure that all licensing and permitting requirements have been met. If you are unsure of licensing or permitting status, please contact the City of Dillon Code Enforcement Department at 843-774-0040 ext. 1012.

For Office Use Only

_____ **All Materials Included**

_____ **Approved**

_____ **Denied**

Reason for Denial: _____

Approval Signature: _____ Date: _____



Application for Special Tax Assessment—Bailey Bill

Property Information

Street Address: _____

Parcel #: _____

Fair Market Value of Building: _____

How did you determine the Fair Market Value (Include Documentation)

_____ Property appraisal completed by a real estate appraiser licensed by the State of South Carolina

_____ Sale price as delineated in a bona fide contract of sale within twelve months of the time of application submittal

_____ Most recent value published by the Dillon County Tax Assessor

Applicant Information

Name of Property Owner: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Project Information

Project Start Date (month/year): _____ Estimated Completion Date (month/year): _____

Total Estimated Project Cost: _____

What types of improvements will be undertaken as part of this project? (select all that apply)

_____ Repairs to the exterior of the building

_____ Alterations to the exterior

_____ New construction on the property

_____ Alterations to the primary interior space

_____ Other work where the expenditures for such work are being used to satisfy the minimum expenditures for rehabilitation, including but not limited to; mechanical, electrical, and plumbing systems

Required Documents:

_____ A map showing the location of the property (aerial maps are acceptable)

_____ Documentation of Fair Market Value

_____ A complete and detailed scope of work

_____ Additional plans as required by the Code Enforcement Department

_____ Complete Board of Architectural Review Application

I certify that all information included on the application is true and correct. I understand this property shall not be eligible for the Special Tax Assessment for Rehabilitated Historic Properties until final certification has been granted by the City of Dillon and the Dillon County Assessor pursuant to Ordinance 2019-24 and Section 4-9-195 of the State of South Carolina Code of Laws, 1976 as amended. I, the undersigned, submit the above information to the City and certify that, to the best of my knowledge, the information supplied hereinabove is factually correct and contains no material misstatements or other misrepresentations.

Property Owner (s) Signature: _____ Date: _____

Tenant (s) Signature: _____ Date: _____

For Office Use Only

Preliminary Certification

The Board of Architectural Review, meeting on _____ certifies that the proposed rehabilitation of the above mentioned structure is consistent with the Secretary of the Interior’s Standards for Rehabilitation and the Dillon South Carolina Code of Ordinances and hereby provides initial certification for this project.

Signature—Chair of the BAR

Final Certification

I, _____, Zoning Administrator or designee, certifies that the work has been completed to the standards made in the initial application on _____, and hereby requests the property receive a Special Tax Assessment—Bailey Bill that expires 10 years from the date of initial certification.