



# Town of Hopkinton

## Economic Development

330 Main Street, Hopkinton NH 03229-2627 - (603) 746-3170 – [www.hopkinton-nh.gov](http://www.hopkinton-nh.gov)

### NH RSA 79-E Community Revitalization Tax Relief Incentive

#### APPLICATION PACKAGE

This legislation encourages investment in central business districts, neighborhood business districts, downtowns, and village centers. Its goal is to **encourage the rehabilitation and active reuse of under-utilized buildings** and, in so doing, to

- **Promote strong local economies** and,
- **Promote smart, sustainable growth, as an alternative to sprawl, in accordance with the purpose and objectives of RSA Ch. 9-B** (State Economic Growth, Resource Protection, and Planning Policy).

#### **How it works:**

- In a municipality that has adopted this enabling legislation, a property owner who wants to replace or substantially rehabilitate a building located in a designated district may apply to the local governing body for a period of temporary tax relief.
- The temporary tax relief, if granted, would consist of a finite period of time during which the property tax on the structure would not increase as a result of its substantial rehabilitation. In exchange for the relief, the property owner grants a covenant ensuring there is a public benefit to the rehabilitation.
- Following expiration of the finite tax relief period, the structure would be taxed at its full market value taking into account the rehabilitation.

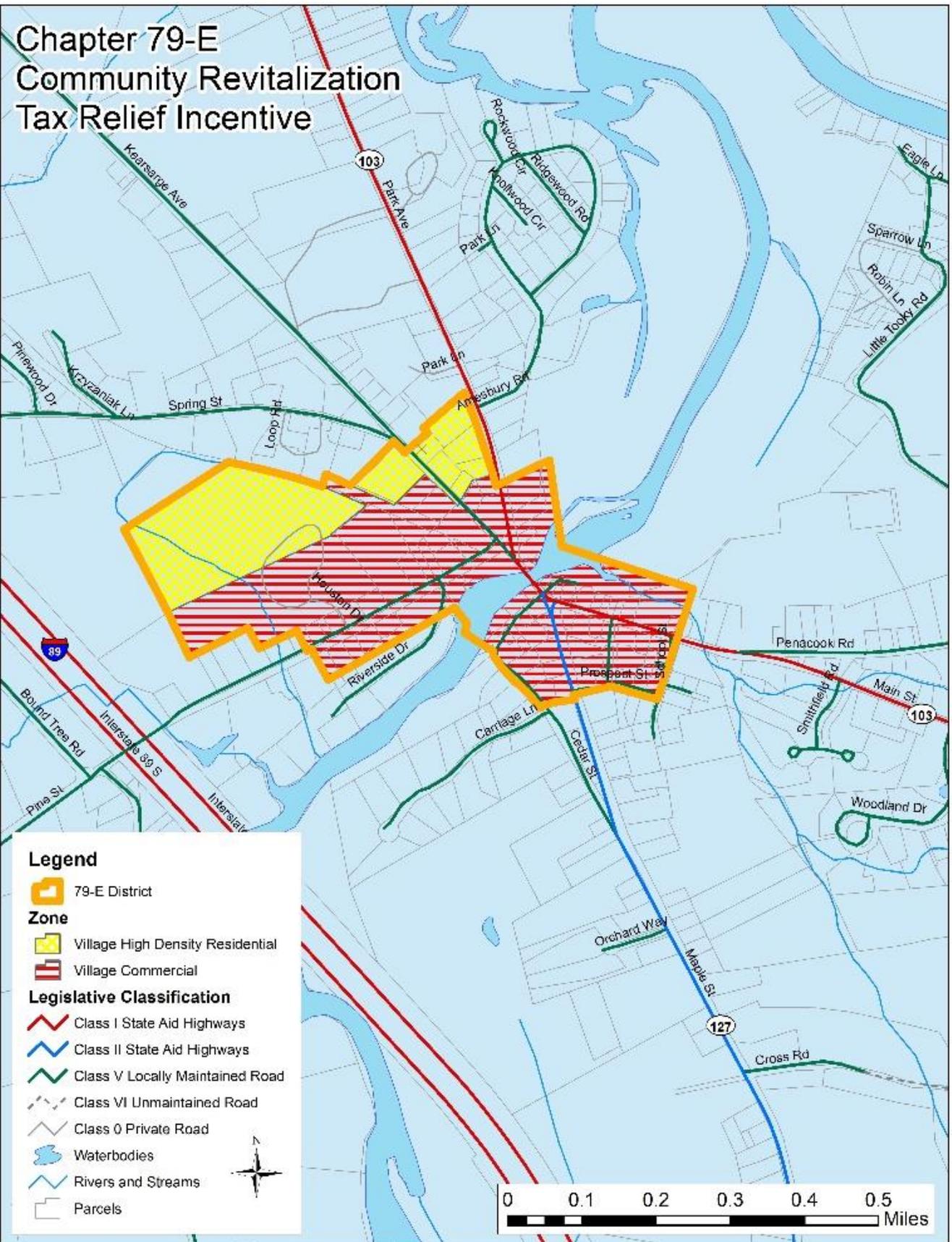
#### **The legislation offers strong community process and discretion:**

- Any city or town may adopt this program with the majority vote of its legislative body.
- Applications by property owners are made to the governing body and are accompanied by a public notice and public hearing.
- The governing body (Select Board) may grant tax relief if the application meets the guidelines and public benefit test.
- The governing body may deny the application in its discretion: “such denial shall be deemed discretionary and shall not be set aside by the board or tax and land appeals or the superior court except for bad faith or discrimination.” (79-E:4 V)
- RSA can be found here: <http://www.gencourt.state.nh.us/rsa/html/V/79-E/79-E-mrg.htm>

#### **Qualifying properties:**

A property owner can apply for the tax relief only if:

- The building is located in the community’s downtown district (or equivalent neighborhood business district) – for Hopkinton, this is in the 79-E District on the next page.
- The rehabilitation costs at least 15% of the building’s pre-rehab assessed value, or \$75,000, whichever is less, and
- The rehabilitation is consistent with the municipality’s master plan or development regulations.



## APPLICATION INSTRUCTIONS

The following documents contain everything you need to complete your application for tax relief to revitalize your building. PLEASE read everything carefully. The application materials are based upon the requirements set forth by NH RSA 79-E. You will need to fill out the application, take part in a public hearing with the Select Board, and execute a covenant with the Town. If you have any questions with the application, the process, or what to expect, please call the Hopkinton Town Administrator at (603) 746-8242.

### Hopkinton RSA 79E Application Process Overview:

1. **79-E Application Form** is submitted to the Town Administrator
2. Staff reviews application to confirm completeness & substantial rehabilitation. Staff provides documentation on **79-E Town Office – Application Review** sheet.
  - a. Town Administrator confirms submission of required documentation.
  - b. Building Inspector confirms validity of construction costs.
  - c. Assessor confirms construction costs meet substantial rehabilitation threshold (construction costs > 15% building assessed valuation or \$75,000)
  - d. Planning Director confirms appropriate Planning Board and/or ZBA approvals have been granted.
3. Properly noticed public hearing is scheduled, within 60 days of application submission.
4. Staff discusses comments documented on **79-E Town Office – Application Review** sheet and project specifics (e.g. public benefit, covenants, and tax relief period).
5. Town Office prepares draft covenants and recommendation for length of tax relief period.
6. Select Board holds a public hearing within 60 days of application submission. Select Board receives testimony from applicant, public, and staff recommendations.
7. Within 45 days of public hearing the Select Board votes on application and use **79-E Select Board Review/Decision** sheet to document decision.

### Included in this application packet:

1. Application Form
2. Select Board Review and Decision Form
3. Department Head Review Form
4. Map of the RSA 79E Zone
5. Covenant to Protect the Public Benefit – TEMPLATE ONLY
6. Text of RSA 79E (to be read and understood by the applicant at the time of application)



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### COMMUNITY REVITALIZATION TAX RELIEF INCENTIVE (RSA 79-E) APPLICATION FORM

#### OFFICE USE ONLY

(do not write in shaded area)

Date Application Submitted: \_\_\_\_\_ Application & Fee (\$50) Received by: \_\_\_\_\_

#### Building Information

Building Name (if any): \_\_\_\_\_

Building Address: \_\_\_\_\_

Hopkinton Tax Map: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning District: \_\_\_\_\_ HCRD Book: \_\_\_\_\_ Page: \_\_\_\_\_

#### Contact throughout this application process will be made through the applicant listed below.

The property owner may designate an agent as the coordinator for the project. This person (the applicant) shall attend public hearings, will receive comments, recommendations, staff reports, and will communicate all case information to other parties as required.

**The Property Owner may act as the Applicant. If so, list under Applicant's Name, "Owner", and complete owner's information as requested.**

**Applicant's Name:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### Existing Building Information

Existing Uses (describe current use, size, and number of employees): \_\_\_\_\_

Gross Square Footage of Building: \_\_\_\_\_ Year Building was Built: \_\_\_\_\_

Is the building listed on or eligible for listing on the National Register of Historic Places?  Yes  No

Is the building listed on or eligible for listing on the state register of historic places?  Yes  No

Is the building located within and important to a locally designated historic district?  Yes  No

**Project Description**

Proposed Uses (describe use, size, and number of employees): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this a change of use associated with this project?       Yes     No

Will the project include new residential units?       Yes     No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the project include affordable residential units?       Yes     No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has an abatement application been filed or has an abatement been awarded on this property within the past year?       Yes     No

Will any state or federal grants be used with this project?       Yes     No

If yes, describe and detail any terms of repayment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Replacement of Qualifying Structure**

Does the project involve the replacement of a qualifying structure?       Yes     No

If yes, the owner shall submit with this application the following:

- 1. A New Hampshire Division of Historical Resources individual resource inventory form, prepared by a qualified architectural historian.

Note: The application for tax relief shall not be deemed to be complete and the governing body shall not schedule the public hearing on the application for replacement of a qualifying structure as required under RSA 79-E:4, II until the inventory form and the letter, as well as all other required information, have been submitted, if required.

**Public Benefit (RSA 79:E-7)**

In order to qualify for tax relief under this program, the proposed substantial rehabilitation must provide at least one of the public benefits listed below. Any proposed replacement must provide one or more of the public benefits listed below to a greater degree than would a substantial rehabilitation of the same qualifying structure.

Does the project provide the following public benefits?  
(Check all that apply)

- Enhances the economic vitality of the designated area.  Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Enhances and improves a culturally or historically important structure.  Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Promotes development of the designated area, providing for efficiency, safety, and a greater sense of community, consistent with RSA 9-B.  Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- It increases residential housing in urban or town centers.  Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other issues and matters applicant deems relevant to this request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Substantial Rehabilitation**

Describe the work to be done and estimated costs.

1. Attach additional sheets if necessary and any written construction estimates.
2. Attach any project narratives, plot plans, building plans, sketches, renderings, or photographs that will help explain this application.

Structural: _____ _____ _____ _____ _____	\$
Electrical: _____ _____ _____ _____ _____	\$
Plumbing/Heating: _____ _____ _____ _____ _____	
Mechanical: _____ _____ _____ _____ _____	\$
Other: _____ _____ _____ _____ _____	\$
<b>Total Estimated Project Cost:</b>	<b>\$</b>

Expected project start date: \_\_\_\_\_ Expected project completion date: \_\_\_\_\_

**Applicant/Owner Signature**

To qualify for this tax relief incentive, the costs of the project must be at least 15% of the pre-rehabilitation assessed value or \$75,000, whichever is less.

I/we certify the estimated costs are reasonable and the costs of the project meet the above requirement.

Initial here: \_\_\_\_\_

I/We understand that failure to meet this threshold or the listing unreasonable construction costs will result in the denial of the application and forfeiture of the application fee.

Initial here: \_\_\_\_\_

I/we have read and understand the Community Revitalization Tax Relief Incentive, RSA 79-E, and am/are aware that this will be a public process including public hearing to be held to discuss the merits of this application and the subsequent need to enter into a covenant with the Town and pay all reasonable expenses associated with the drafting/recording of the covenant.

Initial here: \_\_\_\_\_

The undersigned hereby certifies the foregoing information is true and correct:

\_\_\_\_\_  
Signature (printed name) Date



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### COMMUNITY REVITALIZATION TAX RELIEF INCENTIVE (RSA 79-E) Board of Selectmen Review/Decision Form

Does the project provide at least one of the following public benefits?  
(Check all that apply)

- Enhances the economic vitality of the designated area.  Yes  No
- Enhances and improves a culturally or historically important structure.  Yes  No
- Promotes development of the designated area, providing for efficiency, safety, and a greater sense of community, consistent with RSA 9-B.  Yes  No
- It increases residential housing in urban or town centers.  Yes  No

<b>THE APPLICATION IS:</b>	<input type="checkbox"/> Granted	<input type="checkbox"/> Denied
Substantial Rehabilitation Tax Relief Incentive granted for: (up to 5 years beginning with completion of rehabilitation)		years
Tax Relief Incentive for New Residential Units granted for: (up to an additional 2 years, 4 years if affordable housing)		years
Tax Relief Incentive for Rehabilitation of Historic Places in accordance with the U.S. Secretary of Interior's Standards for Rehabilitation granted for: (up to an addition 4 years)		years
<b>Total Relief Period</b>		<b>0 years</b>

The above decision was made by majority vote of the Hopkinton Board of Selectmen on \_\_\_\_\_ after a public hearing held on \_\_\_\_\_.

\_\_\_\_\_  
Chair, Hopkinton Board of Selectmen

\_\_\_\_\_  
Date

Copies to:      Applicant/Owner  
                         Assessing Department  
                         Tax Collector  
                         Administration



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### COMMUNITY REVITALIZATION TAX RELIEF INCENTIVE (RSA 79-E) Town Departments – Application Review

Applicant: _____		Address: _____		Tax Map: _____		Lot: _____	
_____ Date application filed		_____ Date fee (\$50) received					
_____ Date of public hearing (within 60 days of application receipt)		_____ Notice for public hearing (at least seven days before hearing)					
_____ Date Board of Selectmen to issue decision (within 45 days of hearing)							

<b>DEPARTMENT REVIEW</b> (Initial & Date)	
Code Enforcement/ Building Department: (review of total estimated project cost & comments)  _____ Initial          Date	Comment(s):
Planning/Zoning: (ZBA & PB approvals, site plan conditions, & comments)  _____ Initial          Date	Comment(s):

<b>DEPARTMENT REVIEW</b> (Initial & Date)	
Office Manager: <hr style="width: 100%;"/> Initial                      Date	Comment(s):

<b>ASSESSING</b>	
Pre-Rehabilitation Assesses Valuation of Building	\$
Estimated Cost of Rehabilitation (application page 2)	\$
Percentage – Cost of project to valuation	
Is the structure located in one of the designated areas? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the cost of rehabilitation exceed 15% of the pre-rehabilitation assessed value of the structure or \$75,000, whichever is less? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Assessor:          <hr style="width: 100%;"/> Initial                      Date	Comment(s):

**TOWN OF HOPKINTON, NH**  
**COVENANT TO PROTECT PUBLIC BENEFIT**  
**FILED WITH DEED Per RSA 79-E:8 (Community Revitalization Tax Relief Incentive)**

I (We) \_\_\_\_\_ (owner) of \_\_\_\_\_ located in the Town of Hopkinton, County of Merrimack \_\_\_\_\_ and the State of New Hampshire, for [myself/ourselves] successors and assigns, for consideration of tax relief granted, agree to the following Covenants imposed by The Town of Hopkinton, County of Merrimack, State of New Hampshire, in exchange for property tax relief due to the substantial rehabilitation of said property this Covenant to Protect Public Benefit in accordance with the provisions of RSA 79-E for a term of \_\_\_\_ years or other agreed time up to twice the period of tax relief on the following historic or other structure located within the Hopkinton TIF Districts, including the land necessary for the function of the building (the PROPERTY), described as follows.

The Property is described as a portion of Tax Map \_\_\_\_\_ Lot \_\_\_\_\_ in the Town of Hopkinton. Also reference Grantor's title by [Warranty] deed recorded at Book \_\_\_\_\_ Page \_\_\_\_\_, Merrimack County Registry of Deeds.

The GRANTEE agrees that the PROPERTY provides a demonstrated public benefit in accordance with the provisions of RSA 79-E:7 insomuch as the substantial rehabilitation of said property:

- I. Enhances the economic vitality of downtown
- II. Enhances or improves a structure that is culturally or historically important on a local, regional, state, or national level, either independently or within the context of an historic district, town center, or village center in which the building is located
- III. Promotes development of municipal centers, providing for efficiency, safety and a greater sense of community consistent with RSA 9-B or
- IV. It increases residential housing in urban or town centers

[insert particular findings if desired].

The terms of the Covenant hereby granted with respect to the above-described PROPERTY are to be coextensive with the tax relief period and are as follows:

MAINTENANCE OF THE PROPERTY. The GRANTOR agrees to maintain the PROPERTY in a use and condition that furthers the public benefits for which the tax relief was granted and accepted during the term of the tax

relief under RSA 79-E.

[Here insert any particular restrictions such as signage, maintenance of building and its surroundings, other structure and so forth, as may be agreed upon between the Grantor and Grantee.]

REQUIRED INSURANCE, USE OF INSURANCE PROCEEDS, AND TIMEFRAME TO REPLACE OR REMOVE DAMAGED PROPERTY. The Property Owner is required to obtain and maintain casualty insurance, as well as flood insurance if appropriate. The TOWN requires a lien against proceeds for any insurance claims to ensure proper restoration or demolition of any damaged structures and property. The TOWN further requires that the restoration or demolition commence within one year following any insurance claim incident otherwise the Property Owner shall be subject to the provisions set forth in RSA 79-E:9, I.

RECORDING. The Town shall provide for the recording of this covenant to protect public benefit with the Merrimack County Registry of Deeds. It shall be a burden upon the property and bind all transferees and assignees of such property. Applicant will be solely responsible for the recording fees.

ASSESSMENT OF THE PROPERTY. The Grantee agrees that the PROPERTY shall be assessed, during the term of the Tax Relief Granted based on the pre-rehabilitation value or another value agreed upon by both parties to address improvements not covered by RSA 79-E. If the terms of these covenants are not met, the Property Tax Relief will be discontinued. Furthermore, the TOWN will assess all taxes to the owner as though no tax relief was granted, with interest in accordance with RSA 79-E:9, II.

RELEASE, EXPIRATION, CONSIDERATION.

I. RELEASE. The GRANTOR may apply to the local governing body of the Town of Hopkinton for a release from the foregoing discretionary tax relief and associated covenant upon a demonstration of extreme personal hardship.

Upon release from such covenants, the GRANTOR shall pay the following consideration to the Tax Collector of the Town of Hopkinton

(a) For a release within the duration of the tax relief period of the RSA 79 E, full value assessment of such structure(s) and land.

II. EXPIRATION. Upon final expiration of the terms of the tax relief and associated covenants tax assessment will convert to present valuation and these covenants will be concluded

III. The Tax Collector shall issue a summary receipt to the owner of such property and a copy to the governing body of the Town of Hopkinton for the sums of tax relief deferred. The local governing body shall, upon receiving a copy of the above-mentioned consideration, execute a release of the Covenant to the GRANTOR who shall record such a release with the Merrimack County Registry of Deeds. A copy of such release or renewal shall also be sent to the local assessing officials if they are not the same parties executing the release or renewal.

IV. If, during the term of the tax relief, the GRANTOR shall fail to maintain the structure in conformity with the foregoing agreement, or shall cause the structure(s) to significantly deteriorate or be demolished or removed, the covenants shall be terminated and a penalty assessed in accordance with Paragraph I(a) above.

ENFORCEMENT.

When a breach of this Covenant to the attention of the GRANTEE, it, shall notify the owner of the property subject to the covenant, in writing of such breach, delivered in hand or by certified mail, return receipt requested.

The Owner shall have 30 days after receipt of such notice to undertake those actions, including restoration, which are reasonably calculated to cure the conditions constituting said breach and to notify the Grantee thereof.

If the owner fails to take such curative action, the Grantee may undertake any actions that are reasonably necessary to cure such breach, and the cost thereof, including Grantee's expenses, court costs and legal fees, shall

be paid by the owner, provided the said Owner is determined to be directly or indirectly responsible for the breach.

The Grantee, by accepting and recording this Covenant to the deed agrees to be bound by and to observe and enforce the provisions hereof and assumes the rights and responsibilities herein provided for and incumbent upon the Grantee, all in furtherance of the economic development purposes for which this Tax Relief and associated Deed Covenant is delivered.

WITNESS MY HAND this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Grantor

STATE OF NEW HAMPSHIRE  
COUNTY OF MERRIMACK

Appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_,

the above signed \_\_\_\_\_, known to me or satisfactorily proven to be the same, and acknowledged that he [they] executed the same for the purposes contained therein.

\_\_\_\_\_  
Notary Public/Justice of the Peace  
My commission expires:

ACCEPTED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Town of Hopkinton NH

By its Select Board [or authorized officer]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_