



Economic Tax Incentive Grant Program Application

Property Address: _____ Date: _____

Current Use of Property: _____ Current Assessed Value: _____

Property Owner: _____

Owner Mailing Address: _____

Owner Phone Number: _____

I _____ agree to the terms of the City of Whiteville Economic Tax Incentive Grant Program and understand I must pay annual property taxes in full, with the grant being awarded as a reimbursement. Further, I understand I must request the grant annually from the Whiteville Downtown Development Commission in order to receive reimbursement.

Owner Signature: _____

Date: _____

FOR OFFICE USE ONLY:

City/County taxes paid to date: _____ (Y) _____ (N)

Whiteville City Manager Approval: Date: _____

Whiteville Planning Director Approval: Date: _____

Assessed Value Confirmed: Initial: _____ Value: _____ Date: _____