

DEMOLITION ASSISTANCE PROGRAM

(DAP) provides financial assistance to property owners in Phillips County for the demolition of dilapidated residential structures.



HOW DOES IT WORK?

The DAP program is part of the Phillips County improvement plan; an initiative designed to spur redevelopment and investment within the local community. The removal of dangerous and dilapidated structures is essential to our future community development and enhancement.

Approved DAP projects receive an award up to \$2,500 upon completion. These funds act as reimbursement to offset any accrued project expenses such as contractor fees, material removal and landfill costs.

WHAT ARE THE PROJECT REQUIREMENTS?

Demolition projects must conform to all municipal and county regulations and standards. Where applicable, permits must be obtained before commencing demolition.

The property owner will be responsible for:

- Disconnection of utilities
- The entire removal and proper disposal of above and below grade structures and of any hazardous waste located on the property.
- Filling any voids created through the demolition process (such as basement or storm cellar) in an appropriate manner to create a safe, walkable and debris-free ground surface.

PROJECT ELIGIBILITY

The DAP program is for the removal of residential structures only. All applications will be evaluated by the committee for participation in the program. The property owner must be current on all property tax payments. Applications for DAP funding will only be considered when submitted by the property owner on record with the Phillips County Courthouse.

CAN I DO THE WORK MYSELF OR DO I NEED TO HIRE A CONTRACTOR?

We recommend using a professional contractor to carry out your demolition project. However, should you choose to do the project yourself, you **must** contact your local city office to ensure that you are complying with all rules, regulations and requirements before starting your demolition.

CAN I RECEIVE MY AWARDED FUNDS AHEAD OF COMPLETION?

No. DAP funds will only be awarded to an approved applicant upon total project clearing and completion. Applicants must submit "after" pictures that demonstrate project completion along with evidence of reimbursable costs (invoices and receipts) within 30 days of project completion.

Please Note: Incomplete applications will be rejected from the approval process. In this instance, the applicant would still be eligible to reapply for participation. All **completed** applications will be evaluated in the order by which they were received.

DEMOLITION ASSISTANCE PROGRAM APPLICATION FORM

Please complete ALL fields. Incomplete applications will be rejected.

Applicant's Name: _____
Applicant's Address: _____
City: _____ State: _____ Zip Code: _____

Applicant's Phone: _____
Applicant's Email: _____

Demolition Address: _____
City: _____ State: _____ Zip Code: _____

Project Description:

Applicant is the property owner of the DAP project address? Yes No

DECLARATION

I will be demolishing the described property and removing all associated material from the plot. Yes No

I have contacted my local city office and I am aware of all applicable regulations pertaining to completion of this project. Yes No

I have been approved for all necessary permits and licenses required to complete this project. Yes No

I understand that it is my responsibility to dispose of all waste, hazardous or otherwise, in a safe, legal and compliant manner. Yes No

I have previously applied for DAP funds for another property. Yes No

I am paid up-to-date with all property taxes. Yes No

I hereby apply for reimbursement through the DAP program and declare that the information provided on this application is true and correct to the best of my knowledge.

Property Owners Signature Date

ATTACHMENTS *(Please enclose the following with your application)*

"Before" picture of the property for which DAP assistance is requested.

Proof of property ownership (Copy of mortgage statement etc., or letter of consent from landlord).

Return your completed application to: PCED, PO Box 604, Phillipsburg, KS 67661

Office Use Only Appr Rej Init _____ Date _____ RMB Date _____