

# Landmark Preservation Documentation

## Colorado Historic Preservation Income Tax Credit

### Part 2 – Final Approval Application and Instructions

Part 2 should be completed after the completion of a restoration, preservation, or rehabilitation project for which a Colorado taxpayer requests a state income tax credit. A Part 1, Preliminary Application, must have been approved by the Landmark Preservation Commission prior to the start of the project.

Part 2 must be submitted within 60 days of the completion of the project. No tax credit can be approved if this deadline is not met.

1. **PROPERTY INFORMATION:** Provide the name and address (include street, city, county and zip code) as well as the legal description of the property. Provide the name of the historic district if the structure is located within a designated local or state historic district. Be sure to specify both the general type of property (personal, business, or investment (rental), as well as the specific use (residential, retail, wholesale/manufacturing, office, etc.)
2. **APPLICANT INFORMATION:** Provide the name of the taxpayer filing the application. Include the required information for both business and residence. If more than one taxpayer intends to claim the credit, include on a separate sheet the name and address for all taxpayers intending to claim the credit.
3. **OWNER INFORMATION:** If the owner is someone other than the applicant, include this information. If it is the same, write "same".
4. **PROJECT CONTACT:** Specify the contact person for the project (may be applicant, owner, or a third party).
5. **PROJECT STARTING DATE AND PROJECT COMPLETION DATE:** Provide accurate starting and completion dates of projects under consideration. The Part 2 application must be submitted within 60 days of the project's completion date.
6. **PHOTOGRAPHS OF THE BUILDING:** Provide numbered and labeled photographs documenting all completed work. The photographs should as clearly as possible, show all features described in instruction number 7 from the Preliminary Application. Photographs of the completed features should be taken in the same location and show the same general area as the "before" photographs provided in the Preliminary Application.
7. **DESCRIPTION OF COMPLETED REHABILITATION/ PRESERVATION WORK:** In the numerical blocks, provide a description of the project. A separate block should be used to describe work on a specific feature (use as many additional sheets as necessary). Describe each feature, the completed work and the impact to the feature. Include labeled and numbered photographs of each feature. Use as many blocks as needed to completely describe the entire project.
8. **COST OF PROPOSED WORK:** List separate costs as closely as possible to the features described in No. 6 of this application; however, only qualified costs on qualified rehabilitation work need to be itemized. Provide the total of all qualified costs on qualified rehabilitation. Also provide the total cost of the project including non-qualified costs. Also provide the total cost of the project including non-qualified costs.
9. **APPLICANT'S SIGNATURE:** Provide signature of all taxpayers claiming the credit (use additional sheets if necessary).

Landmark Advisory No. 482 - Colorado Historic Preservation Income Tax Credit

**1. PROPERTY INFORMATION**

Name of Property \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Name of Registered Historic District (if applicable) \_\_\_\_\_

Name of Individual Landmark (if applicable) \_\_\_\_\_

Property Type: personal \_\_\_ Business \_\_\_ investment (rental) \_\_\_

Current use of property: \_\_\_\_\_

After Rehabilitation \_\_\_\_\_

Legal Description:

**2. APPLICANT INFORMATION (taxpayer claiming the credit)**

Name \_\_\_\_\_

Type of Entity: Individual \_\_\_

Partnership: General \_\_\_ Limited \_\_\_

Corporation: Regular \_\_\_ Subchapter S \_\_\_

Limited Liability Company \_\_\_

Name of authorized company official  
(if applicant is not an individual): \_\_\_\_\_

Business address: \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Applicant is (check one): owner \_\_\_ tenant \_\_\_

If more than one taxpayer intends to claim the credit, include on a separate sheet the name and address for all taxpayers intending to claim the credit.

**3. OWNER INFORMATION (if applicant is other than owner)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

**LEGAL DISCLAIMER: This Advisory should not be used as a substitute for Colorado Statute CRS 39-22-514 and regulations. The applicant is responsible for compliance with all statutory and regulatory requirements.**

**4. PROJECT CONTACT**

\_\_\_Applicant \_\_\_Owner \_\_\_Other (specify below)

Name\_\_\_\_\_

Address\_\_\_\_\_

City/Town\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Telephone ( )\_\_\_\_\_ E-mail\_\_\_\_\_

**5. PROJECT STARTING DATE (dd/mm/yy)**\_\_\_\_\_

**PROJECT COMPLETION DATE (dd/mm/yy)**\_\_\_\_\_

**6. PHOTOGRAPHS OF THE PROPERTY MUST BE INCLUDED (see instructions)**

Describe feature and its condition:

| Architectural<br>Feature: | Photo #<br>Drawing # | Describe work/ impact<br>on feature: |
|---------------------------|----------------------|--------------------------------------|
|                           |                      |                                      |

|                           |                      |
|---------------------------|----------------------|
| Architectural<br>Feature: | Photo #<br>Drawing # |
|---------------------------|----------------------|

|                                      |
|--------------------------------------|
| Describe work/ impact<br>on feature: |
|--------------------------------------|

|                           |                      |
|---------------------------|----------------------|
| Architectural<br>Feature: | Photo #<br>Drawing # |
|---------------------------|----------------------|

|                                      |
|--------------------------------------|
| Describe work/ impact<br>on feature: |
|--------------------------------------|

|  |  |
|--|--|
| <p>Architectural<br/>Feature:</p> <p>Photo #<br/>Drawing #</p> | <p>Describe work/ impact<br/>on feature:</p> |
|--|--|

**7. PROJECT COSTS**

(costs greater than \$2,000 should be broken down into unit costs)

Please include itemized costs on a separate sheet of paper  
Please include any cost documentation from contractors

Total Qualified Costs \_\_\_\_\_  
Total Project Cost \_\_\_\_\_

**8. APPLICANT'S SIGNATURE**

I hereby attest that I am the property's owner or a qualified tenant with a lease of five or more years, that all work on this project has been completed and executed according to the project description as stated in Part 1 and approved by the Reviewing Entity, and that all itemized costs are allowable to claim for tax credits under CRS 39-22-514 (12)(e) and (g). I hereby agree to allow representatives of the Reviewing Entity access to the property as may be necessary and reasonable for the final approval of the completed work.

Name \_\_\_\_\_  
Date \_\_\_\_\_