

North Killeen Revitalization Program

What is the North Killeen Revitalization Program?

This program serves to promote the development and redevelopment of North Killeen and includes incentives for residential and commercial/ business structures' rehabilitation, expansion and/ or new construction. The structure for which the improvement is proposed must be brought up to current building codes allowing for non-conforming lots as described in section IV (a). By adopting this program, the City intends to provide incentives by waiving certain fees in accordance with Ordinance 23-001 adopted by City Council January 10, 2023.

Eligible Recipients/Properties

In order for a property owner/developer/applicant to be eligible to apply for fee waivers, the property owner/developer/applicant:

- a. Must submit a Program application to the City;
- b. Must not be delinquent in paying property taxes for any property located in the City of Killeen owned by the owner/developer.
- c. Must not have active Code Enforcement cases or be in arrears with any City account.
- d. Must not have any City liens filed against any property owned by the applicant, property owner/developer or must have liens paid in full up front.

Approval of the Program application and waiver of the fees shall not be deemed to be approval of **any aspect of the project**. All projects are subject to and must comply with all applicable local, State, and Federal laws.

Before construction, the applicant must ensure that the project is located in the correct zoning district.

Liens

Liens, to include interest, shall be paid in full prior to any approval of this application.

The City shall not release or satisfy any lien on a property owned by the person whose actions resulted in the lien being placed on the property. The City shall not release or forgive any lien on a property owned by an immediate family member or firm, corporation, partnership, or business entity of a person whose actions resulted in the lien being placed on the property. For purposes of this section, the term "immediate family member" shall mean spouse, child, parent, niece, nephew, aunt, uncle, grandparent, grandchild, or anyone having one of these relationships by law.

Development Fees

Fees for services shall be waived for new construction or rehabilitation projects that expend at least \$2,000:

- Building permit related fees (including plans review and inspections) for ELIGIBLE projects.
- Plat Application Fee
- Zoning Board of Adjustment Application Fee
- Demolition Permit Fee
- Zoning Application Fee for Properties Seeking a Zoning Change to Fit Current Property Use
- Sign Permit Fee
- Traffic Impact Analysis Worksheet Fees
- Parkland Dedication and Development Fees

If a permit or application listed in Subsection (1) in which the City waived the fee, subsequently expires, any fee(s) to reactivate, renew, or reapply shall not be waived. In addition, penalties and extension fees or re-permitting fees will not be waived.

Development Standards

- Minimum lot size for EXISTING non-conforming properties- 3,600 sq. ft. No Zoning Board of Adjustment approval needed
- Building setbacks may be reduced to 5' side lot, 10' rear lot, 20' front lot
- The hearing requirement as described in Section 31-54 (c), for reconstructing non-conforming structures/uses, will be waived and requests to repair or replace properties located within North Killeen Revitalization Area shall be deemed granted.

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Application revised April 18, 2024

APPLICANT ACKNOWLEDGMENT

CERTIFICATION WILL BE DENIED IF ANY PROPERTIES OWNED BY APPLICANT OR OWNER HAVE ANY LIENS OR CODE ENFORCEMENT VIOLATIONS WITH THE CITY OF KILLEEN

Please initial the following:

- _____ The properties listed/ owned by any party on this application are free of liens, code enforcement violations and are current on all property taxes.
- _____ Approval of the North Killeen Revitalization Program shall **NOT** be deemed to be approval of any aspect of the project.
- _____ I understand that approval of this application does not waive every fee.
- _____ I understand that this is not permission to create non-conforming lots.
- _____ No reimbursement will be issued for any permits pulled **prior** to approval of the NKRP application.
- _____ If a permit or application expires, the fee to reactivate, renew or reapply shall not be waived. In addition, penalties and extension fees or re-permitting fees will not be waived.
- _____ I have verified with the Planning & Zoning department that the zoning is correct for my project.

ACKNOWLEDGMENTS

I hereby certify that the information provided is true and accurate to the best of my knowledge. I understand that the approval of fee waivers and other incentives shall not be deemed to be approval of any aspects of the project. I understand that I am responsible in obtaining required permits and inspections from the City and in ensuring the project is in the correct zoning district.

I understand that my application will not be processed if it is incomplete. I agree to provide any additional information for determining eligibility as requested by the City.

**SIGNATURE MUST BE OWNER OR MANAGING PARTNER/PRESIDENT/CEO
IF PROPERTY IS OWNED BY A CORPORATION OR PARTNERSHIP**

APPLICANT (PROPERTY OWNER)
(PRINTED OR TYPED NAME)

(AUTHORIZED SIGNATURE)

(DATE)



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APPLICATION CHECK LIST

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Please submit the following documentation:

- A completed application form
- A list of **ALL** properties owned by the applicant, property owner/developer in the City of Killeen
- Proof of ownership, such as a warranty deed, affidavit of heirship, or a probated will.
- If requesting a permit:**
A floor plan, site plan, and site elevation with a written detailed project description that includes a construction time line.
- If requesting a permit:**
A detailed line item budget showing the cost breakdown for the project.
- A copy of Incorporation documents or partnership agreement noting all principals, partners, and agents as applicable.

For Office Use Only					
Address: _____		Property Owner: _____			
Application Received Date: _____		Application Completed Date: _____			
Project Type? <input type="checkbox"/> Single family <input type="checkbox"/> Two-Family <input type="checkbox"/> Multifamily <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Community facilities					
Ownership/Site Control?		<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Conform to City of Killeen Zoning?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Legal Non-Conforming?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tax current on this property?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Tax current on other properties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
City liens on this property?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	City liens on other properties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Certified?		<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Reason for certification denial? _____					
				Certified by: _____ Date _____	



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APPLICATION INFORMATION:

Name(s) of Property Owner: _____

Current Address: _____

City: _____ State: _____ Zip: _____ - _____

Primary Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email: _____

Name of Contractor/Developer/Applicant: _____
(If different than Property Owner)

Address: _____

City: _____ State: _____ Zip: _____ - _____

Primary Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email: _____

PROJECT INFORMATION

Project Address: _____ Zip: _____

Legal Description: _____

Project Description: _____

Total cost of project: \$ _____

PROPERTY OWNERSHIP

List **all** other properties the applicant/owner/developer owns in the City of Killeen.
(Continue on a separate sheet and attach if necessary)

ADDRESS	ZIP CODE	LEGAL DESCRIPTION	LOT NO.	BLOCK NO.



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APPOINTMENT OF AGENT

As owner of the subject property, I hereby appoint the person designated below to act for me, as my agent in this request.

Name of Agent: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ - _____

Home Phone: (____) _____ - _____ Business Phone: (____) _____ - _____

I acknowledge and affirm that I will be legally bound by the words and acts of my agent, and by my signature below, I fully authorize my agent to:

be the point of contact between myself and the City; make legally binding representations of fact and commitments of every kind on my behalf; grant legally binding waivers of rights and releases of liabilities of every kind on my behalf; to consent to legally binding modifications, conditions, and exceptions on my behalf; and, to execute documents on my behalf which are legally binding on me. This authorization only applies to this specific zoning change request.

I understand that the City will deal only with a fully authorized agent. At any time, it should appear that my agent has less than full authority to act, then the application may be suspended and I will have to personally participate in the disposition of the application. I understand that all communications related to this application are part of an official proceeding of City government and, that the City will rely upon statements made by my agent. Therefore, **I agree to hold harmless and indemnify the City of Killeen, its officers, agents, employees, and third parties who act in reliance upon my agent's words and actions from all damages, attorney fees, interest and costs arising from this matter.** If my property is owned by a corporation, partnership, venture, or other legal entity, then I certify that I have legal authority to make this binding appointment on behalf of the entity, and every reference herein to 'I', 'my', or 'me' is a reference to the entity.

Signature of Agent: _____ Title: _____

Printed/Typed Name of Agent: _____ Date: _____

Signature of Property Owner: _____ Title: _____

Printed/Typed Name of Property Owner: _____ Date: _____

Signature of Property Owner: _____ Title: _____

Printed/Typed Name of Property Owner: _____ Date: _____

Signature of Property Owner: _____ Title: _____

Printed/Typed Name of Property Owner: _____ Date: _____

Signature of Property Owner: _____ Title: _____

*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.