

City of Ironton, Crow Wing County

Commercial Rehabilitation  
Loan Application

**Applicant Information**

Name of Applicant: \_\_\_\_\_

Federal ID Number or  
Social Security Number: \_\_\_\_\_  Owner or  Tenant

StreetAddress  
of Applicant: \_\_\_\_\_ Office Phone: \_\_\_\_\_

City, State,  
Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

**Property Information**

Address of Building  
to be Rehabilitated: \_\_\_\_\_

Estimated Age of Building: \_\_\_\_\_

Number of Stories: \_\_\_\_\_

Estimated Market Value: \$ \_\_\_\_\_

Current Property Taxes: \$ \_\_\_\_\_

General Description of Building: \_\_\_\_\_

Existing Building Use: \_\_\_\_\_

Proposed Use of Building: \_\_\_\_\_

Is this building within a correct zoning classification?  
Current zoning?  Yes  No  
Variances/special  
use permits? \_\_\_\_\_

Is the building in a Historic District?  Yes  No

Is it on the National Historic Register?  Yes  No

Is it in a Floodplain?  Yes  No

Legal Description: \_\_\_\_\_

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Ownership Information

Ownership interest in property to be improved:

- Contract for Deed
- Free and Clear
- Mortgage
- Lessee: Specify terms of Lease: \_\_\_\_\_
- Other: Specify: \_\_\_\_\_

Name(s) on Title: Specify ownership interest of each name on the title:

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

Amount of Outstanding Principal owed on Building: \$ \_\_\_\_\_

**Note: Attach a Copy of the Most Recent Property Tax Statement from County Assessor's Office and Proof of Insurance on Building**

Estimated Rehabilitation Costs and Requested Loan Information (Estimate only)

Describe Proposed Improvements:

Exterior: \_\_\_\_\_  
Signs: \_\_\_\_\_  
Awnings: \_\_\_\_\_  
Mechanical Systems: \_\_\_\_\_  
Architectural Services: \_\_\_\_\_  
Interior: \_\_\_\_\_

Estimated Total Cost of Proposed Rehabilitation Work: \$ \_\_\_\_\_

Requested Loan Amount from Program: \$ \_\_\_\_\_

Matching Amount: \$ \_\_\_\_\_

Sources of Match:  Personal Savings  Mortgage  Private Loan  Other \_\_\_\_\_

I/we certify that all statements on this application are true and correct to the best of my/our knowledge. I/we understand that any intentional misstatements will be grounds for disqualification. I authorize program representatives the right to access the property to be improved for the purpose of inspecting or obtaining information for the rehabilitation loan program.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Once completed please return the application along with the following documentation in an envelope to:  
Ironton City Hall, Attention Nancy Grabko

- Proof of ownership: Copy of your Deed or Certificate of Title
- Proof that your property taxes are paid current (current property tax statement)
- Proof of identification and residency (anything showing your name and address)
- Proof of Insurance (Copy of your policy)