

**County of Henry  
Enterprise Zone Program  
Real Property Investment Plan/IDA Grant Form**

**Business Information**

*(Please Type or Print)*

Name of Business:

Phone:

Fax:

Address:

City/State/Zip:

Project Location: *(Tax Map Designation and Road or Street Name, or E-911 Structure Address if Known)*

NAICS Code(s):

Zoning Code(s):

Contact Person:

Phone:

Fax:

**Real Property Tax Information**

Existing Real Property:

Tax Map #: \_\_\_\_\_

Tax Parcel Code #: \_\_\_\_\_

\_\_\_\_\_ Year Assessment: \_\_\_\_\_ and  
Tax: \_\_\_\_\_

*Attach copy of CURRENT tax bill*

**For Office Use Only:**

Real Property With Improvements:

Tax Map #: \_\_\_\_\_

Tax Parcel Code #: \_\_\_\_\_

\_\_\_\_\_ Year Assessment: \_\_\_\_\_ and  
Tax: \_\_\_\_\_

**Filer's Statement** - I hereby declare that, to the best of my knowledge and belief, the information contained in this form is true and accurate and that I am authorized to act on behalf of the business.

Please print name: \_\_\_\_\_

*Date Submitted:* \_\_\_\_\_ *Authorized Signature:* \_\_\_\_\_

**Commissioner of the Revenue** – *Verification of Real Property Assessment and Tax*

Real Property information, assessment, tax are correct:       Yes       No

Comments:

*Date:* \_\_\_\_\_ *Commissioner of the Revenue:* \_\_\_\_\_

**Treasurer/Central Accounting** - *Verification of Real Property IDA Tax Grant*

Refund from this filing:    Year 1 \_\_\_\_\_    Years 2-5 \_\_\_\_\_ per year

Comments:

*Date:* \_\_\_\_\_ *Treasurer:* \_\_\_\_\_

