

Part 3—Request for Approval of Completed Work

Complete this form when you have finished your rehab project, as described on the pre-approved Part 2 worksheet(s) of your application. **Submit this form with accompanying “after” photos to the SHPO at amberanderson@utah.gov or 3760 S Highland Drive, Millcreek, UT 84106.** Digital submissions are preferred. After reviewing and approving this Part 3 certification, the SHPO will send you a form (TC-40H) that you should keep along with your receipts and a copy of your state income tax return in case you are ever audited.

Project address:

Project starting date:

Project completion date:

Estimated total cost of this rehabilitation project: \$
(Verification of costs not is not required with this application)

Required Attachments

- The attached “after” photographs showing my completed project. Photographs should be taken from same locations as “before” photographs. As long as they are labeled, they may be submitted in any digital or printed format.
- Description of any changes to the approved work plan, attach separate pages as needed

Applicant Verification

I hereby attest that the information I have provided in this application is, to the best of my knowledge, correct, and that in my opinion the completed rehabilitation is consistent with the work described in Part 2 of the application previously submitted and approved by the Utah State Historic Preservation Office. Also, I understand that, according to State Tax Commission rules, any work done on the building over the next three years shall also meet the appropriate rehabilitation standards or the tax credit is subject to revocation.

Signature _____ Date _____

Entering your name above is accepted as a digital signature.

Utah State Historic Preservation Office use only

Date Part 3 received _____ Date additional information requested _____

Date additional information received _____

The Utah State Historic Preservation Office has reviewed Part 3 for the above-named property and hereby determines that::

- ___ the completed work meets the Secretary of the Interior's *Standards for Rehabilitation*.
- ___ the completed work meets the *Standards* with the following conditions:
- ___ the completed work does not meet the Standards for Rehabilitation (see attached explanation).

Date _____ Authorized signature _____

Note: The decision by the Utah State Historic Preservation Office with respect to certification is made on the basis of the descriptions in this application. In the event of discrepancy between the application and supplementary material submitted with it (e.g., architectural drawings and specifications), the application shall take precedence.