

EXHIBIT C

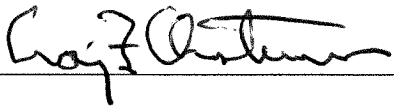


Residential Tax Exemption Application

Name of Applicant: Craig Christensen
Applicant Address: 819 Eastwood Street
City, State, Zip Code: Pascagoula, Ms 39567
Phone: 228/217-7475 or 228/313-1626 Fax: _____
Email: fchr60@gmail.com Is this an existing residence? YES NO
Project Address: 1802 Washington Ave Pascagoula, Ms 39567
Value of Renovation/Construction Costs: \$ NA
Projected value of finished product: \$ 625,000
How long has the building/site been vacant? 14 years Is the development in the CBD? YES NO
Is the project within the Residential Renewal District? YES NO
Is the project within the Residential Renovation District? YES NO
Is the project within the Urban Renewal District? YES NO
Will the project be Owner Occupied or Rental? OWNER RENTAL

Building plans are required to evaluate a residential tax exemption application. Please submit these to the Director of Planning and Building once developed.

By signing below, I hereby confirm that I am an authorized representative of the applicant and that the information provided is truthful to the best of my knowledge. Furthermore, I understand that this tax exemption will be approved or denied, or the exemption term or amounts reduced at the sole discretion of the City Council of the City of Pascagoula as per the Order by which the tax exemption policy was established.

Signature of Applicant:  Date: 5/17/19