

STATE OF ALABAMA
ALABAMA HISTORICAL COMMISSION

**ALABAMA HISTORIC REHABILITATION TAX CREDIT PROGRAM
SUPPLEMENTAL ALLOCATION REQUEST FORM**

AHC Number: _____

According to the Alabama Historical Commission Administrative Code: In the event the amount of qualified rehabilitation expenditures incurred by the Owner exceeds the amount of qualified rehabilitation expenditures estimated on Part B of the Application for the purpose of establishing the Tax Credit Allocation Reservation, the Applicant may, at any time after Part B of the Application has been approved but before the issuance of a Tax Credit Certificate, apply to the Commission for a reservation of a supplemental Tax Credit Application Reservation in an amount equal to the excess. Applications for a supplemental Tax Credit Application Reservation shall be made on a form prescribed by the Commission and shall be issued subject to availability based on the Aggregate Tax Credit Allocation Amount and the placement on the Reservation Priority List. For the purpose of placement on the Reservation Priority List, the request will be considered a new Application and will added to the next available position on the list.

Please describe any change in the scope of work as defined in the Alabama Historic Rehabilitation Program Application Part B–Description of Rehabilitation previously submitted for the project on a Alabama Historic Rehabilitation Program Application Amendment Sheet and submit it with this form.

1. **Date:** _____

2. **Owner name:** _____

Organization: _____

Mailing Address: _____)

City: _____ State: _____ Zip: _____

3. **Property name:** _____

Street Address: _____

City: _____, County: _____, Alabama Zip: _____

Project Number: _____

Allocation Reservation Amount Requested: _____

Allocation Reservation Amount Received: _____

I hereby request Supplemental Tax Credit Allocation in the amount of: \$ _____

My total Qualified Rehabilitation Expenditures are now estimated to be: \$ _____

My total Non-Qualified Rehabilitation Expenditures are now estimated to be at: \$ _____

___ There have been no changes to the scope of work for this project as defined in the Alabama Historic Rehabilitation Tax Credit Program Application–Part B as submitted.

___ There have been changes to the scope of work for this project as defined in the Part B and an Amendment to that application has been submitted to the Alabama Historical Commission.

5. **Owner's Signature:**

I hereby attest that the information I have provided in this application is, to the best of my knowledge, correct and that I own the property described above.

Signature: _____ Date: _____
