Housing & Neighborhood Development Housing Development Section P.O. Box 9005, Drawer HS04 Bartow, FL 33831-9005

State Housing Initiatives Partnership (Ship) Rehabilitation/Replacement Grant Agreement

This Agreement entered into this day of,	20 between Bettie J. Burgess,
herein after referred to as "Owner(s)" and Polk County,	a political subdivision of the
State of Florida, hereinafter referred to as "County".	

Witnesseth

Whereas, the County has funds available for certain qualified real property owners for the purposes of providing grants for the assistance of said owners in the repair and rehabilitation of certain improvements (existing housing) found upon such owned real property; said real property being located within Polk County, Florida 700 Baker Avenue, Bartow, FL 33830

Legal Description: Begin 352.5 feet South of the NW corner of SE ¼ of SE ¼ of NW ¼ of Section 6, Township 30 South, Range 25 East, Polk County, Florida, thence run East 198 feet; thence South 120 feet thence West 198 feet; thence North 120 feet to Point of Beginning.

Whereas the County has determined that the Owner(s) meets all the eligibility criteria established for the aforementioned grants and is therefore eligible for a grant pursuant to the terms and provisions of said program.

Now, Therefore, in consideration of the covenants contained herein, the parties mutually agree as follows:

- 1. The Owner(s) agrees to accept <u>Ten Thousand Five Hundred Sixty-Eight and</u> <u>50/100 Dollars (\$10,568.50)</u> as a grant to be used for construction soft costs and temporary location benefits.
- 2. The Owner(s) will indemnify and hold the County harmless together with all the County's employees and designated representatives, from any and all liability, claims, action suits or demands for injuries, death or property damage arising out or in connection with the repair and rehabilitation of the Owner(s) property due to the Owner(s) negligence.

- 3. The Owner(s) filed application with the County dated <u>11/5/2024</u> for Replacement/New Construction Assistance, and it is incorporated as part of this Agreement, by this reference.
- 4. This Agreement shall be binding upon the Owner(s), and the estate, personal representatives, heirs and devises of a deceased (Owner(s).
- 5. The use in this Agreement of the word Owner shall apply to the plural as well as the singular.

(Signatures on following page)

Witness Bettie J. Burgess Printed Name of Witness Address of Witness Housing & Neighborhood Development-1290 Golfview Avenue, Suite 167 P. O. Box 9005 Drawer HS04 Bartow, FL 33831-9005 Attest: Polk County, Florida, a political Stacy M. Butterfield, Clerk subdivision of the State of Florida BY: **Deputy Clerk** T. R. Wilson, Chair Date **Board of County Commissioners** STATE OF FLORIDA COUNTY OF POLK The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____day of ______, 20__, by Bettie J. Burgess, who ___ is personally known to me or has produced as identification. (AFFIX NOTARY SEAL) **Notary Public** Print Name _____ My Commission Expires

In Witness Whereof, the Owner(s) and County have executed this Agreement as of the

day and year first above written.