

TOWN OF AVON, INDIANA

(Date)

(Name)

(Address)

Project:

Code:

Parcel:

Road:

RE: Protective Rent Agreement
(Subject Address)
(Daily rate amount)

Pursuant to CFR 24.2(a)(6)(vii)(c), Protective Rent is utilized to limit and manage financial liability when the Town of Avon, Indiana believes there is substantial risk that a subsequent occupant situation may occur.

In consideration, I/We, (Name) agree to the above Protective Rent in the aforementioned amount(s) listed above per daily rate minus utilities with regards to the subject property located at (Subject Address) . I/We, (Name) further agree that said property/apartment will remain **vacant** while Protective Rent is being paid. Protective Rent amounts will be calculated from the date the rental property has been verified of said vacancy until the acquisition payment has been made or in condemnation cases money has been posted in court, at which time Protective Rent will end.

The Protective Rent will begin on (Date)

Protective rent is reported as taxable income.



_____ Owner/Manager

_____ Date

_____ Owner/Manager

_____ Date