

TIF NEIGHBORHOOD IMPROVEMENT GRANT PROGRAM APPLICATION-BUSINESS

CITY OF SPRINGFIELD - OFFICE OF PLANNING AND ECONOMIC DEVELOPMENT

Section 1: Applicant Information

- *Attach Certification of Good Standing issued in the last six (6) months
- *Attach a copy of a valid, government-issued photo ID (e.g., driver's license) for identity verification purposes.

Is the applicant the property owner or a developer? (check one)

☐ Property Owner	☐ Developer
Applicant Name:	
Co-Applicant Name:	
Mailing Address:	
Business Name:	
Business Address:	
State of Organization:	
Phone Number:	
Email:	
FEIN:	·
<u>Type of Business:</u>	
☐ Sole Proprietorship	
☐ Partnership	
☐ For-Profit Corporation	
☐ Nonprofit Corporation	
☐ Limited Liability	
☐ Other:	

Section 2: Property Information

*Attach current interior and exterior photos Is this property within the Far East TIF District or the SHA (Madison Park) TIF District? ☐ Yes □ No PIN(s): **Project Address: Current Parcel Use:** At project completion, who will occupy the site: <u>Section 3: Evidence of Site Control</u> A. If the applicant owns the project site, attach a copy of the deed. Also include: Mortgage Holder(s): Annual Mortgage Payment (P&I): Outstanding Balance of Mortgage: Name, address, and phone numbers of other persons or entities having an ownership interest in the property to be redeveloped: B. If the applicant has a contract or option to purchase the project site, attach a copy of the purchase/option contract Also include: Date contract was signed: Closing / Expiration date:

*Attach project description that includes detailed scope of work and architectural renderings

Section 4: Project Information

*Attach detailed construction budget, as applicable Current Fair Market Value: _____ Current Property Tax: Current EAV: Anticipated Future Tax:_____ General Contractor: Address & phone number: Architect: Projected start and end dates: ___ Brief Project Description (Describe what improvements you plan to make): **Section 5: Financing** *Attach letter of support or other documentation demonstrating Financial Capacity Total Project Cost: Financing: □ Bank □ Private □ Other (1) Bank Contact: Address and Phone: (2) Bank Contact: Address and Phone:

Upon request, the applicant shall provide any market and financial feasibility studies, appraisals, environmental reports, or other information provided to private lender for the project.

Neighborhood Improvement Grant Application

Identify the total TIF assistance requested. (Note: The maximum grant award under this program is \$75,000. Requests exceeding this amount will not be considered.)			
Has any other governm economic benefit?	ent assistance been provided to the applicant or property (grants, tax incentives, or	r other	
□ Yes □ No			
If yes, describe the type ar	nd amount of assistance provided:		
Section 6: Housing	(<u>If Applicable)</u>		
*Attach business plan, incl	luding expertise of key management personnel		
Number of units:			
Total square footage:			
Anticipated Rents:			
Tayont Maylests			
Target Market:			
Section 7: New Busi	iness (IF Applicable)		
*Attach business plan, incl	luding expertise of key management personnel		
Business Name:			
Jobs Created:	Full Time: Part Time:		
Description:			

Section 8: Conflict of Interest Discloser

Is any owner of the business, land or building, or any tenant, or any of the project developers:

- an elected or appointed official of the City of Springfield;
- related to an elected official or appointed official of the City of Springfield; or
- routinely contracts with the City of Springfield to provide good or services?

☐ No ☐ Yes (Explain):	
Section 9: Certification	<u>on</u>
	(print name), certify that the information provided in this application and all on is true and complete to the best of my knowledge. I understand and agree to the
Any work initiateAll improvement	nis application does not guarantee approval or funding. Ed prior to written grant approval is not eligible for reimbursement. Es must comply with local codes, zoning, and permit requirements. In responsible for completing the project as described and for covering any costs cant award.
I agree to allow represen related to this grant.	tatives of the City of Springfield access to the property for inspection of improvements
Signature of Applicant:	
Date:	

□ Pre-application meeting with OPED staff □ Complete application form □ Certificate of Good Standing □ Interior and exterior photos □ Proof of site control (deed or contract) □ Project Description □ Architectural Renderings □ Detailed Project Budget

☐ Financial Capacity Demonstration ☐ Business Plan

Application Checklist

☐ Valid, government-issued photo ID

SUBMIT COMPLETED APPLICATION TO:
Office of Planning & Economic Development
City of Springfield
800 E Monroe Street, Room 107
Springfield, IL 62701

or

Email: Julia.Griffin@springfield.il.us