

## **TIRZ SOUTH INCENTIVES APPLICATION & CHECKLIST**



Fill in all blanks below and check applicable boxes for each item. All fields must be completed; "see attached" is not an appropriate response. Incomplete applications will not be processed

| SECTION 1: PROPERTY INFORMATION |  |   |  |  |  |
|---------------------------------|--|---|--|--|--|
| Bus                             | iness Name:  | Date:   |  |  |  |
|                                 |  |   |  |  |  |
| Bus                             | iness Owner (if different from above):   |   |  |  |  |
|                                 |  |   |  |  |  |
| Bus                             | iness Address:   | Mailing Address:  |  |  |  |
|                                 |  |   |  |  |  |
| Bus                             | iness Phone:   | Secondary Phone:  |  |  |  |
| _                               |  |   |  |  |  |
| Em                              | all:   | _ Fax:  |  |  |  |
| Dro                             | north Olympir  |   |  |  |  |
| PIO                             | perty Owner:   |   |  |  |  |
| _                               |  |   |  |  |  |
|                                 | nit Incentive Payment(s) to:   |   |  |  |  |
| NOTI                            | ≘: A W-9 for the applicable party checked above is a requirement on the                                | is application. Applications will not be accepted without this information                                      |  |  |  |
| SE                              | CTION 2: PROJECT CRITERIA FOR EVAI   | LUATION OF APPLICATION:   |  |  |  |
|                                 |  |   |  |  |  |
|                                 | • •  | South Incentives Policy and are to be utilized in the ction 4 of this application. Applicant is responsible for |  |  |  |
| den                             | nonstrating which criteria are applicable to the pro-  | oposed project and why. Proposed projects submitted   |  |  |  |
|                                 | ing the application window will be ranked and the<br>ikings will be determined as outlined on page 5 o | highest ranked will be considered for funding first.  f the TIRZ South Incentives Policy.                       |  |  |  |
|                                 |  | ·   |  |  |  |
| Doe                             | es the proposed project:   |   |  |  |  |
|                                 | Provide connections between activities?  |   |  |  |  |
|                                 | Improve pedestrian & vehicular infrastructure?   |   |  |  |  |
|                                 | Provide or reinforce usable & defined space?   |   |  |  |  |
|                                 | Strengthen the focus area's identity?  |   |  |  |  |
|                                 | Support the goals of making the area a cultural, leisu   | re, and tourist destination?  |  |  |  |
|                                 | Improve the utilities and/or drainage infrastructure?  |   |  |  |  |
|                                 | Remediate environmental deficiencies or enhance po   | ublic safety?   |  |  |  |
|                                 | Promote mixed-use development?   |   |  |  |  |
|                                 |  |   |  |  |  |

| SECTION 2: PROJECT CRITERIA FOR EVALUATION OF APPLICATION (cont.)  |  |  |       |   |  |  |  |  |  |  |
|--|--|--|-------|---|--|--|--|--|--|--|
|  |  |  |       |   |  |  |  |  |  |  |
| Ш  | Utilize architectural styles that compliment historic areas already in existence?  |  |       |   |  |  |  |  |  |  |
|  | Reduce the visual impact of parking areas?   |  |       |   |  |  |  |  |  |  |
|  |  |  |       |   |  |  |  |  |  |  |
|  |  |  |       |   |  |  |  |  |  |  |
|  | Implement environmentally friendly features such as, green building materials, rainwater harvest, or low-energy heating and cooling?                         |  |       |   |  |  |  |  |  |  |
| ☐ Include an aggressive match by the applicant, in excess of what is minimally required?   |  |  |       |   |  |  |  |  |  |  |
| SECTION 3: INCENTIVE TYPES   |  |  |       |   |  |  |  |  |  |  |
| Below are the various types of incentive to which the requested funding may be applied. Carefully review the TIRZ South Incentives Policy, specifically pages 2 and 3, and familiarize yourself with each type of incentive category. Please indicate below which item(s) you propose for the amount of funding requested in Item 4C (under Award Amounts on pages 4 and 5 and included in more detail in Worksheet A) to be utilized for. |  |  |       |   |  |  |  |  |  |  |
|  | Façade   | e Improvement  |       | Asbestos Abatement                            |  |  |  |  |  |  |
|  | _  | cape Installation  |       | Fire Sprinkler & Monitored Smoke Alarm System |  |  |  |  |  |  |
|  |  |  |       | Sales Tax                                     |  |  |  |  |  |  |
|  |  |  |       | Property Tax                                  |  |  |  |  |  |  |
|  |  |  |       | Job Creation Incentives                       |  |  |  |  |  |  |
|  | _  | dary Egress  |       | Development Fee Reductions                    |  |  |  |  |  |  |
|  | Coolinary Egicss   |  |       | Development of reductions                     |  |  |  |  |  |  |
| SE   | CTION  | I 4: CHECKLIST OF REQUIRED AP  | PLI   | CATION DOCUMENTS                              |  |  |  |  |  |  |
| The following documents—In addition to a completed application—are minimum requirements. Incomplete submittals WILL NOT BE REVIEWED for funding. Work may not begin on incentive items requested until a Letter to Proceed is received. (See pages 4 and 5 of the TIRZ South Incentives Policy).   |  |  |       |   |  |  |  |  |  |  |
|  |  | APPLICATION: Completed & signed applic   | ation | (this document)                               |  |  |  |  |  |  |
|  |  | PROJECT BUDGET: A detailed accounting, using Worksheet A, of how the amount requested in Item 4C           |       |   |  |  |  |  |  |  |
|  | tified in Section 3, and how the match would be utilized.<br>in Item 4B  |  |       |   |  |  |  |  |  |  |
|  | RENDERINGS/ELEVATION DRAWINGS: Sketches, drawings, or pictures of the work to be performed must be provided, (what the project will look like when complete) |  |       |   |  |  |  |  |  |  |
| ☐ CURRENT PHOTOS   |  |  |       |   |  |  |  |  |  |  |
|  |  | W-9: Used for establishing an account for payment by the City of San Angelo.                               |       |   |  |  |  |  |  |  |
|  |  | ☐ NARRATIVE/SUMMARY: Used to demonstrate how the proposed project meets the criteria you selected          |       |   |  |  |  |  |  |  |
|  |  | as applicable in Section 2.  |       |   |  |  |  |  |  |  |
|  | ☐ ZONE/IMPACT STATEMENT: Projects the activity and economic benefit that will be generated as a  |  |       |   |  |  |  |  |  |  |
|  | direct result of the completion of the project.  |  |       |   |  |  |  |  |  |  |
|  |  | <ul> <li>Activities/benefits generated by the F</li> <li>Activities/benefits of adjacent proper</li> </ul> | •     | Ct  |  |  |  |  |  |  |

| SECTION                | 4: CHECKLIST OF REQUIRED APPLICATION D  | OCUMENTS (cont.)                                     |
|------------------------|---|--|
|                        | How the project will enhance the District   |  |
| ☐ CURREI               | ENT APPRAISED VALUE OF THE SUBJECT PROPERTY :   |  |
| ☐ DHRC A               | APPROVAL: (if applicable)   |  |
| □ PRIOR                | R TIRZ FUNDING: (if applicable) that has been previously awa  | rded to the property applying                        |
| SECTION                | 5: AWARD AMOUNTS  |  |
|                        | ng level, as described on page 3 of the TIRZ South Incentive roposal and determines the procedure for consideration a   |  |
| 4A. This pro           | roposed project is submitted, with a request for funding:   |  |
|                        | Which is less than or equal to \$10,000   |  |
|                        | Which is greater than \$10,000  |  |
| 4B. The tota<br>any ma | tal estimated project cost is, atch required as outlined on page 3 of the TIRZ South Incentiv   | as detailed in Worksheet A. This includes res Policy |
| 4C. The am             | mount of funding requested is   | _, as detailed in Worksheet A, attached.             |
|                        | N 6: STATEMENT OF UNDERSTANDING   |  |
|                        | I agree to comply with the guidelines and procedures of the TI that I have reviewed and understand the current TIRZ North Ir  | · · · · · · · · · · · · · · · · · · ·                |
| F<br>tl                | I understand that no work on the approved incentive items car<br>Proceed is provided to me. Any other work done on approved<br>ther understand that no such document will be issued until an<br>policy is executed by all parties.      | incentive items is ineligible for funding. I fur-    |
|                        | I understand that neglecting to provide all information required application.   | in and by this application will invalidate my        |
| b<br>c                 | I understand that I must submit cost documentation—including budget, and including paid invoices and/or receipts from contractors with the requirements of this program. I further unders subcontractors to ensure they have been paid. | actors after the work is complete—in order to        |
|                        | I acknowledge the deadlines outlined on pages 3 and 4 of the my funding proposal may be denied, partially approved, and is  | •  |
|                        | I acknowledge that all documents as outlined in this application incomplete applications will be rejected and returned immediate  | ·  |
| Signature of           | of Property Owner   | Date:  |
|                        |   |  |

| SECTION 7: REPI   | RESEN  | NTATIVE  |      |  |
|---|--------|--|------|--|
| I hereby designate on this project and rectly. They may b | prefer | as my representative that any communication regarding this project be addressed to them diched at                          |      |  |
|   |        | f the items outlined in Section 4 of this application, please<br>ont at 325-653-7197 ex. 4 to schedule a meeting to review |      |  |
| FOR OFFICE USE ONLY: COMPLETE? Y                          | N      |  |      |  |
|   | -      | SIGNATURE OF ECONOMIC DEVELOPMENT SPECIALIST   | DATE |  |
|   |        |  |      |  |