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APPLICATION FOR TAX INCREMENT FINANCING

This application must be completed electronically prior to submission to the City Administrator. The applicant(s) or a designated representative must be present at the Planning Commission and City Council/Community Development Authority meetings to answer any questions related to the project. Proper notice of all meetings will be given to the applicant listed below by City Staff. Failure to complete either of these application requirements may result in ineligibility for Tax Increment Financing.

Project:

1)

Business Name _____
Street Address _____
Mailing Address _____
Telephone _____
Email _____
Business Structure _____
Owners _____

2) Brief description of the business and number of employees:

3) Present ownership of the site and legal description:

4) Please describe what the plan is to acquire the site: (Option, Contract, Seller, Price, Basic Terms, source of funds to acquire, etc.)

5) Parcel Number(s):

6) Physical project description: (Building square footage, size of property, description of building materials, etc. Please attach a site plan.)

7) If the property will be subdivided, show plan for division:

8) Estimated Project Costs: (Please attach copies of bids or estimates to support estimated project costs.)

- a) Land Acquisition (if applicable)

- b) Site Development (itemize in attachment)

- c) Building Cost

- d) Architectural and Engineering Fees

- e) Legal Fees

- f) Financing Costs

- g) Contingencies

TOTAL

9) Total estimated assessed valuation of Real Property at completion:

10) Last two years property valuation (from Real Estate Tax Statement):

11) Estimated increase in Real Estate assessed property valuation (by year for 15 years):

12) Estimated new (increase) in Real Estate Taxes after project completion (by year for 15 years):

13) Source of financing:

a) Equity	\$ _____	_____ %
b) Bank Loan	\$ _____	_____ %
c) Tax Increment Financing	\$ _____	_____ %
d) Other: _____	\$ _____	_____ %
		_____ 100 %

14) Name and Address of architect, engineer and general contractor:

15) Name and Firm of attorney assisting the applicant with the Tax Increment Financing process (if applicable).

16) Project construction schedule:

a) Construction start date	_____
b) Construction completion date	_____
c) If project is phased:	_____
Year _____	_____ % Complete
Year _____	_____ % Complete

17) Have you done any work on the project site to date? If so, describe.

18) Municipal Reference (if applicable). Please name any other municipality wherein the applicants, or other corporations the applicant has been involved with, has completed developments within the last five years:

Tax Increment Financing Request:

1) Estimated eligible costs (pursuant to Nebraska State Statute 18-2103(12b): (Please attach copies of bids or estimates to support estimated eligible project costs.)

a) Demolition or removal of existing:

Buildings	_____
Structures	_____
Streets	_____
Utilities	_____
Other improvements	_____

b) Installation, construction or reconstruction of:

General site preparation	_____
Streets	_____
Utilities – water	_____
Utilities – sanitary sewer	_____
Utilities – electrical	_____
Utilities – other	_____
Parks	_____
Playgrounds	_____
Public spaces	_____
Public parking facilities	_____
Sidewalks	_____
Convention and civic centers	_____
Bus stop shelters	_____
Lighting	_____

Benches or other similar furniture	_____
Trash receptacles	_____
Shelters	_____
Skywalks	_____
Pedestrian overpasses	_____
Pedestrian underpasses	_____
Vehicular overpasses	_____
Vehicular underpasses	_____
Other necessary public improvements essential to the preparation of sites for uses in accordance with a redevelopment plan (attach itemized list)	_____
Total estimated eligible project costs	_____

The City of Columbus Community Development Authority and City of Columbus representatives will evaluate the estimated eligible project costs listed above and determine the eligibility of the estimated project costs based on the project objectives.

2) Statement of necessity for use of tax increment financing (include attachment if necessary):

3) How do you plan for the TIF proceeds to be monetized?

4) Provide the following information to assist the Authority in conducting a cost-benefit analysis on the project pursuant to Nebraska State Statute 18-2113(2):

a) What will the impacts be on employers and employees of any firms locating or expanding within the proposed boundaries of the redevelopment project area?

b) What will the impacts be on other employers and employees within the city and the immediate area that are located outside of the boundaries of the redevelopment project area?

5) The Redeveloper hereby certifies the following to the Authority pursuant to Nebraska State Statute 18-2119((3)a):

a) Have you filed or intend to file an application with the Department of Revenue to receive tax incentives under the Nebraska Advantage Act for this project?

b) If so, does the application include (or will include) as one of the tax incentives, a refund of the city's local option sales tax revenue?

c) Has such application, if any, been approved under the Nebraska Advantage Act?

I certify that the facts and estimates set forth in this application for Tax Increment Financing (TIF) are true and complete to the best of my knowledge. I understand that false statements on this application shall be considered sufficient cause for ineligibility.

I agree to maintain all project related receipts for a period of twenty (20) years beginning at final payment of Tax Increment Financing for audit purposes.

Applicant Name (printed)

Signature

Date

Applicant Name (printed)

Signature

Date