



COMMUNITY IMPROVEMENT DISTRICT (CID) APPLICATION

Complete all information and if necessary, please attach additional sheets to fully answer each question and include attachments described in Appendix 1

1. Applicant Information

a. Company Name: _____ Phone No. _____

Address: _____

Contact Person (if an entity): _____

Email: _____ Fax No. _____

b. Applicant's
Legal Counsel: _____ Phone: _____

Address: _____

Email: _____ Fax: _____

c. Applicant's Engineer: _____ Phone No. _____

Address: _____

Email: _____ Fax: _____

2. Applicant's Business Information:

a. Corporation Partnership Sole Proprietorship Other

b. State of incorporation/organization and year: _____

c. If the Applicant is a corporation, list the officers, directors and stockholders holding more than 5% of the corporation's stock. (State the name, address, telephone and relationship to Applicant. If a company is not yet formed, include as much data as possible concerning potential officers, directors and stockholders):

d. If the Applicant is a general partnership, list the general partners; and if a limited partnership, list the general partners and limited partners; with more than 5% of the partnership. (State the name, address, telephone and relationship to Applicant. If a partnership is not yet formed, include as much data as possible concerning potential partners):

- e. Has the Applicant, or any partner, officer, member or director of the Applicant; or any entity in which any partner, officer, member or director of the Applicant is or was a partner, officer, member or director, ever been charged with and/or convicted of a criminal offense (other than traffic violations) or charged by any regulatory agency with violations of financial or professional regulations?

Yes

No

If yes, state the name of the business or individual, the caption of the proceeding, court and year in which it was filed, and its disposition and/or status:

- f. Within the last ten (10) years, has the Applicant or any partner, officer, member or director of the Applicant; or any entity in which any partner, officer or director of the Applicant is or was a partner, officer, member or director, been a debtor in bankruptcy?

Yes

No

If yes, state the name of the business or individual, the caption of the proceeding, the court and year in which it was filed, and its disposition and/or status:

- g. Has the Applicant, or any officer, member, director, or partner of the Applicant; or any entity in which any partner, officer or director of the Applicant is or was a partner, officer, member or director, ever defaulted on any bond or mortgage commitment?

Yes

No

If yes, state the name of business or individual, year and any relevant circumstances:

3. General CID Project Information

- a. Description of the underlying Economic Development Project ("ED Project") for which financing is requested for a CID Project:

- b. General Location of ED Project:

c. Total sq. feet in proposed District, excluding right of way and other common area:

d. Legal description of the proposed District:

e. Number of Tracts, Parcels or Lots in proposed District: _____

f. Does Applicant own all the Property in the District? Yes No

If not, provide the name, address and phone number of the Owner(s) in the District and evidence of their willingness to participate in the Petition. Or if Applicant intends to own 100% of the property, provide evidence of site control (i.e. deed, option to purchase or purchase contract).

g. Are all areas within the proposed District platted? Yes No

If yes, provide the County parcel ID numbers:

If no, identify the number without County parcel ID numbers and the status of any pending plats:

h. Will the proposed District have 100% participation? Yes No

If no, please indicate the percentage of land area within the proposed District for which the owners are participating _____%; and indicate the percentage of owners participating based upon assessed valuation of land within the proposed District _____%.

i. If the project has current tenants or leases, please provide the contact information (business name; contact person; address, and phone number) for each:

(Notification of owners, tenants and lessees of any request for a CID sales tax is required prior to the public hearing)

4. Financing:

a. Description of CID Project and costs to be financed and estimated cost for each component:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Estimated Cost of CID Improvements	\$ _____

b. Estimated cost of total project in which CID is proposed: \$ _____

c. Proposed methods of financing. If more than one, please indicate:

- (1) Special Assessments: Yes No
(i) Paid in full or part by sales tax or only by assessments? _____
(ii) Assessment and Amount:
Front Footage _____ Estimated Cost per F.F. \$ _____
Square Footage _____ Estimated Cost per S.F. \$ _____
(Note: there cannot be any assessment against the City at large.)

- (2) CID Sales Tax: Yes No
(i) Amount of increment (increments of .10 or .25, not to exceed 2%): _____
(Note: Dept of Revenue shall keep 2% of amount collected up to \$60,000/year for administration.)

5. Financing:

a. Do you request the City issue special obligation bonds?
 Yes No

If yes, what is the requested term of the bonds? (maximum is 22 years):

b. Do you plan to use pay-as-you-go (maximum is 22 years for sales tax)?
 Yes No

c. Estimated dates to commence and complete construction:

- d. Will there be a phasing plan? If so, describe the phasing plan including the proposed improvements, their estimated cost, and date construction of each will be commenced and complete:

6. Additional Information:

Any additional information you believe is relevant or helpful to the consideration of this application:

Please check the box if the petition includes the following requirements:

- | | | |
|----|--|-------|
| 1. | General description of the proposed project | _____ |
| 2. | Estimated cost of the project | _____ |
| 3. | proposed method of financing the project | _____ |
| 4. | Proposed amount and method of assessment | _____ |
| 5. | Map of the proposed district | _____ |
| 6. | Legal description of the boundaries of the proposed district | _____ |

APPENDIX I to CID APPLICATION

Documentation of the following must be provided:

- Evidence of site control.
- Current financial statements of the applicant and owning and/or operating entity if different from the Applicant (2 years); P&L (2 years); and Balance Sheet (2 years)
- Current banking relationships
- Market studies which identify target markets, analysis of competition, demographics, market rents and sales prices, letters of intent/interest from prospective tenants.
- Approved site plans or plan submissions for the Project Plan area.
- Renderings of the project, if available.
- Any other data or information the Applicant deems pertinent to the City's consideration of the application.

*Note: if any of the documents in Appendix 1 are confidential, they may be submitted directly to the City's Financial Advisors (FA) for review and reporting to the City. The application should state which documents will be sent to the FA..

APPLICANT CERTIFICATION & AGREEMENT

The Applicant certifies that the undersigned is authorized to execute and this Application on behalf of the Applicant. The Applicant further certifies that all information contained above and submitted with this application is true to his/her knowledge and belief and submitted for the purpose of obtaining CID financial assistance from the City. Applicant certifies that it has or alternatively, that it will notify all owners and tenants in the proposed CID District of this application and proposed CID. If the application proposes a CID sales tax, the notification shall include the requested amount of CID sales tax to be levied. Such notification will occur at least twenty (20) days prior to the scheduled public hearing on any CID petition.

Applicant has included its application fee and retainer with this submission and agrees to be responsible for all additional cost, above the amount of the retainer, incurred by the City for outside legal and fiscal review, for the issuance of bonds, if applicable. Applicant has read the City CID Policy and will abide by all City requirements for CID financing.

The Applicant understands and agrees that the City reserves the right to deny approval of the requested CID regardless of preliminary approval or the degree of construction completed before final approval would be given. Applicant further understands that final approval rests with the Governing Body in accordance with State law and City policy. Applicant shall indemnify and hold harmless the City, its employees, officers and consultants against all losses, costs, damages, expenses and liabilities of any nature directly or indirectly resulting from, arising out of or relating to the acceptance, consideration, approval, or disapproval of this application for CID financing assistance.

APPLICANT

By: _____
 Authorized Representative Date

Submit the \$2,500 application fee, \$10,000 retainer and three originals of the Application with attachments to:

Kyle Glaser, Economic Development Analyst
17101 W. 87th Street Parkway
Lenexa, KS 66219
Phone: (913) 477-7688
Fax: (913) 477-7586
kglaser@lenexa.com