



## COMMUNITY REINVESTMENT AREA APPLICATION

### Commercial Property Improvement Projects

PROPOSED AGREEMENT for Community Reinvestment Area Tax Incentives between the CITY OF SIDNEY,  
SHELBY COUNTY, OHIO, AND \_\_\_\_\_

(Property Owner)

#### 1. Property/Business Owner

a) Identity of Property/Business Owner:  
(Attach additional pages if multiple enterprise participants.)

\_\_\_\_\_  
(Property Owner Name)

(\_\_\_\_\_  
(Telephone Number))

\_\_\_\_\_  
(Business Owner Name)

\_\_\_\_\_  
(Owner Contact Person)

(\_\_\_\_\_  
(Telephone Number))

\_\_\_\_\_  
(Street Address – Main Office)

(\_\_\_\_\_  
(Fax Number))

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Email Address)

b) Project Site:

\_\_\_\_\_  
(Site Contact Person)

(\_\_\_\_\_  
(Telephone Number))

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Tax Parcel Number(s) from tax bill)

#### 2. Business Details

a) Nature of commercial activity to be conducted at the site.

\_\_\_\_\_  
b) List primary North American Industry Classification System (NAICS) Code: \_\_\_\_\_

c) If a consolidation, what are the components of the consolidation?  
(Must itemize the location, assets, and employment positions to be transferred.)

\_\_\_\_\_  
d) Form of business organization (corporation, partnership, proprietorship).

**3. Name of principal owner(s) or officers of the business.**

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**4. Employment**

a) Will project involve the relocation of employment positions or assets from one Ohio location to another?

Yes       No

b) If yes, identify the location from which employment positions or assets will be relocated and the new location of the employment positions or assets:

c) State the enterprise's current employment level in Ohio (itemized by location for full and part-time and permanent and temporary employees):

d) State the enterprise's current employment level for each facility to be affected by the relocation of employment positions or assets:

e) What is the projected impact of the relocation, detailing the number and type of employees and/or assets to be relocated?

**5. Does the Property Owner and/or Business Owner owe:**

a) Any delinquent taxes to the State of Ohio or an Ohio political subdivision?       Yes       No

b) Any moneys to the State or a state agency for the administration or enforcement for any Ohio environmental laws?       Yes       No

c) Any other moneys to the State, a state agency or an Ohio political subdivision that are past due, whether the amounts owed are being contested in court of law or not?       Yes       No

d) If yes to any of the above, detail each instance including, but not limited to, the location, amounts and/or case identification numbers.  
(Attach additional pages if necessary.)

**6. Project description**

(attach additional pages if necessary):

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**7. Project Timeline**

The project is expected to begin in \_\_\_\_\_, 20\_\_\_\_, and is expected to be completed by \_\_\_\_\_, 20\_\_\_\_ provided a tax exemption is granted.

**8. New Employees**

a) Estimate the number of new employees the property owner will cause to be created at the facility that is the project site. The projected job creation must be itemized by the name of the employer full and part-time and permanent and temporary jobs:

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b) State the time frame for the projected hiring: \_\_\_\_\_ years.

c) State proposed schedule for hiring (itemize by full and part-time employees):

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**9. Payroll**

a) Estimate the amount of annual payroll the additional employees will add: \$ \_\_\_\_\_  
(New annual payroll must be itemized by full and part-time employees):

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b) Indicate separately the amount of existing annual payroll relating to any job retention claim resulting from the project: \$ \_\_\_\_\_

**10. Facility Investment**

Estimate of the amount to be invested to establish, expand, renovate or occupy the facility:

a) Acquisition of buildings	\$ _____
b) Additions/New construction	\$ _____
c) Improvements to existing buildings	\$ _____
d) Machinery and equipment	\$ _____
e) Furniture and fixtures	\$ _____
f) Inventory	\$ _____
<b>Total New Project Investment</b>	\$ _____

**11. Business' reasons for requesting tax incentives.**

**12. Historic District**

a) Is the project located in the Court Square Historic District?  Yes  No

b) If yes, has the project been reviewed and certified by the Downtown Design Review Board?  Yes  No

If not, when will do you anticipate this occurring? \_\_\_\_\_

(Attach a written certificate of approval of the designated Historic District Commission.)

By submission of this application, the Applicant expressly authorizes the City of Sidney to contact the Ohio EPA and other agencies to confirm the accuracy of statements contained within this application, including item #5, and to review applicable confidential records. As part of this application, the Property Owner may also be required to directly request from the Ohio Department of Taxation, or complete a waiver form allowing the Department of Taxation to release specific tax records to the local jurisdiction considering the request. The Applicant further agrees to supply additional information upon request.

**The Applicant affirmatively covenants that the information contained in and submitted with this application is complete and correct and is aware of the ORC Sections 9.66(C)(1) and 2921.13(D)(1) penalties for falsification which could result in the forfeiture of all current and future economic development assistance benefits as well as a fine of not more than \$1,000 and/or a term of imprisonment of not more than six months.**

Name of Property Owner: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_\_\_\_  
(Type name and title)

\_\_\_\_\_  
(Signature of Property Owner)

\* The City of Sidney may require a school donation agreement between the entity receiving the property abatement and Sidney City School District for the duration of the incentive period.

Send Application to:

Barbara Dulworth, AICP  
Community Development Director  
201 W. Poplar Street  
Sidney, Ohio 45365  
Phone: (937) 498-8131  
Fax: (937) 498-8119  
Email: bdulworth@sidneyoh.com