

WEST REGIONAL ENTERPRISE ZONE APPLICATION

DATE _____

PART I – PROJECT INFORMATION

To be completed by Project Representative (Property owner OR business owner)

1. NAME OF OWNER _____ PERSONAL PHONE # _____

2. NAME OF BUSINESS _____ BUSINESS PHONE # _____

3. STREET ADDRESS _____

4. CITY _____ STATE _____ ZIP _____ E MAIL _____

5. NAME OF PROPOSED BUSINESS/COMPANY (If different from applicant)

6. STREET ADDRESS OF PROPOSED PROJECT _____

6a. FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN) _____

6b. UNEMPLOYMENT INSURANCE NUMBER (UIN) _____

6c. STANDARD INDUSTRY CODE (SIC CODE) _____

CONTRACTOR/S: List general contractor and all subs. Each must have their own BMEC (Building Materials Exemption Certificate). (Use a separate sheet to list, if necessary).

7. CONTRACTOR/SUB CONTRACTOR NAME _____ FEIN# _____

7a. Estimated # of construction jobs this project will create _____

8. PHONE _____ ADDRESS _____

EMAIL _____ COST OF CONTRACT _____

COST OF BUILDING MATERIALS _____ *do not purchase materials prior to application submission

9. General description of proposed project, including any rehabilitation/remodeling of existing structures, new construction, major paving or new equipment. (Use additional sheet if necessary).

TYPE AND STYLE OF CONSTRUCTION _____

BUILDING SIZE _____ LOT SIZE _____

TYPE OF BUSINESS _____

IS THIS A MINORITY OWNED BUSINESS? YES__ NO __

IS THIS A WOMAN OWNED BUSINESS? YES__ NO __

DESCRIBE OTHER FEATURES _____

10. PROJECT CLASSIFICATION

COMMERCIAL _____ INDUSTRIAL _____ RETAIL _____

12. EXPECTED START DATE OF PROJECT _____ EXPECTED COMPLETION _____

13. ESTIMATED COST (LABOR AND MATERIALS) FOR*do not purchase materials prior to application submission

A. REMODELING/REHABILITATION: Labor _____ Materials _____

B. NEW CONSTRUCTION: Labor _____ Materials _____

C. CAPITAL EQUIPMENT: _____ D. SITE COST OR VALUE (IF PRE-OWNED) _____

(continues)

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14. NUMBER OF FULL-TIME EQUIVALENT JOBS

A. PRESENTLY AT PROJECT LOCATION _____ B. *RETAINED _____

C. **CREATED WITHIN TWO YEARS OF PROJECT COMPLETION _____

*Retained = number of jobs that will remain in the zone because of the new investment being made, that otherwise would be lost.

**Created = number of jobs for which persons are newly hired (not transferred in-State) or are expected to be hired within 2 years because of the new investment, not including construction jobs or spin-offs that may be created.

15. DOES THIS PROJECT INVOLVE A MOVE FROM ANOTHER LOCATION?

YES _____ NO _____ If yes, indicate city and state. _____

16. IS THIS PROJECT LOCATED IN A TIF _____? HAVE YOU RECEIVED, OR WILL YOU APPLY FOR ANY OTHER REAL ESTATE TAX INCENTIVE _____? If yes, please explain. _____

FROM YOUR MOST CURRENT TAX BILL

17. PROPERTY TAX IDENTIFICATION NUMBER _____

18. _____

Print Name of Project Representative Title

Signature of Project Representative Date

19. ZONE ADMINISTRATION FEE: MAKE CHECK PAYABLE TO WEST REGIONAL ENTERPRISE ZONE

Please enclose your check for .5% of Estimated Building Material Cost (Line 13A and/or Line 13B).

\$ _____ (\$200.00 Minimum)

Projects whose materials estimate significantly exceed amount on application, may be liable for addition administration fee. West Regional Enterprise Zone

c/o Angela Smith, Enterprise Zone Administrator

40 W. Madison Street

Maywood, Illinois 60153

angela@westregionalez.com

708 940 6500

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WEST REGIONAL ENTERPRISE ZONE APPLICATION (PAGE THREE)

PART II MUST BE COMPLETED & RETURNED TO ZONE OFFICE WHEN PROJECT IS FINISHED

WEST REGIONAL ENTERPRISE ZONE PROJECT REPORT

PROJECT NAME _____

PROJECT ADDRESS _____

PHONE _____ EMAIL _____

PART II – PROJECT COMPETITION INFORMATION

TO BE COMPLETED BY APPLICANT WHEN PROJECT IS FINISHED

A. DATE OF PROJECT COMPLETION _____

B. TOTAL BUILDING MATERIAL COSTS _____

TOTAL LABOR COSTS _____

OF EMPLOYEES PRIOR TO CONSTRUCTION _____

OF EMPLOYEES AT PROJECT COMPLETION _____

Yes, I would like to learn more about advertising business with the WREZ. YES ____

Return to

WEST REGIONAL ENTERPRISE ZONE

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Angela Smith, Zone Administrator

Questions 708 940 6500