



# CITY OF ELMHURST

209 NORTH YORK STREET  
ELMHURST, ILLINOIS 60126-2759  
(630) 530-3000  
www.elmhurst.org

## Sales Tax Incentive Application

Project Name: \_\_\_\_\_

### **Applicant Information**

Company Name: \_\_\_\_\_ Years in Business: \_\_\_\_\_  
Business Form: \_\_\_\_\_ Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Sole Partnership: \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

### **Project Information**

Address of Proposed Project: \_\_\_\_\_  
Sales Tax Incentive Request: \$ \_\_\_\_\_ Term: \_\_\_\_\_ years  
City/Applicant Sales Tax Split (i.e. 50% / 50%): \_\_\_\_\_ % / \_\_\_\_\_ %

<i>Project Costs</i>	<i>Amount (\$)</i>	<i>Source of Funds</i>
Purchase of Land		
Demolition Cost		
Site Improvements		
Purchase of Existing Facilities		
Construction of New Building(s)		
Renovation of Existing Structure		
Cost of Installation of Machinery & Equipment		
Architectural & Engineering Fees		
Legal & Other Professional Fees		
Contingency		
Working Capital		
Other (please specify):		
<b>Total Project Costs</b>		

**Financing**

<i>Source</i>	<i>Amount</i>	<i>Terms Year/Int.</i>	<i>Contact Information</i>
Sales Tax Incentive			
Equity			
Loans from other source (i.e. lending institutions)			
1.			
2.			
3.			
4.			
<b>Total Project Cost</b>			

**Economic Development Information** (if applicable)

- Estimated number of new jobs that will be created after the completion of the project:  
 Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_  
 Estimated number of jobs retained after completion of the project:  
 Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_
- Current annual gross sales: \$ \_\_\_\_\_ Estimated annual gross sales: \$ \_\_\_\_\_  
 Current annual taxable sales: \$ \_\_\_\_\_ Estimated annual taxable sales: \$ \_\_\_\_\_
- Most recent equalized assessed valuation (EAV): \$ \_\_\_\_\_  
 Estimated EAV after redevelopment: \$ \_\_\_\_\_

**Other Required Information**

- A narrative that includes a description of the applicant's business, a description of the proposed project, the incentive request and why it is needed.
- Information requested in the Sales Tax Incentive Policy Section III.4.
- Information requested in the Sales Tax Incentive Policy Section IV.2 and IV.3.
- List (name and address) of all investors in the project with 5% or greater ownership interest, including each investor's ownership interest as requested in the Sales Tax Incentive Policy Section IV.4.

**Certification by Applicant**

The applicant certifies that it will comply with all of the rules, regulations and ordinances of the City of Elmhurst. Applicant hereby certifies that all information contained above and in exhibits attached hereto is true to his/her best knowledge and belief and are submitted for the purpose of obtaining financial assistance from the City of Elmhurst, Illinois.

Applicant: \_\_\_\_\_  
 Contact Name/Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Date: \_\_\_\_\_