

CITY OF TOPEKA
APPLICATION FOR COMMUNITY IMPROVEMENT DISTRICT

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: _____

Address: _____

Contact Person (if an entity): _____

Email: _____ Fax : _____

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

Address: _____

Email: _____ Fax: _____

c. Applicant's Engineer: _____ Phone: _____

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 CID Project for which financing is requested: _____

b. General Location of CID 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: _____

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

5. Financing/Bonds:

- 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: _____
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- 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: _____
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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; and
- 6. Legal description of the boundaries of the proposed district

APPENDIX I to CID APPLICATION

Documentation of the following will be helpful to the Review Committee:

- Evidence of site control.
- Current financial statements of the applicant and owner and/or operating entity if different from the Applicant (2 years); P&L (2 years); and Balance Sheet (2 years)
- Market studies which identify target markets, analysis of competition, demographics, market rents and sales prices, letters of intent/interest from prospective tenants.
- Financial analysis (projected revenue is sufficient to pay costs)
- 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.