

City of Moraine, Ohio

Non-Residential Notification and Application Form Community Reinvestment Area Tax Exemption Program

NOTIFICATION AND APPLICATION for Tax Exemption in the City of Moraine, Ohio located in the County of Montgomery and State of Ohio is filed on behalf of the property owner so that partial taxes on new projects and adjustments on taxes to remodeling projects, which may not be completed by the December 31 tax filing deadline are properly applied. Within 45 days of the issuance of an occupancy permit for the project identified below, the owner of the property must file for TAX EXEMPTIONS in accordance with the Community Reinvestment Area Program established by the City of Moraine, Ohio pursuant to O.R.C. §3735.66.

1. a. Name of business, home or main office address, contact person, and telephone number (attach additional pages if multiple enterprise participants).

_____	_____
business name	contact person
_____	_____
	telephone number
_____	_____
address	city, state, zip code

- b. Project site:

_____	_____
street address	contact person
_____	_____
city lot number	telephone number
J44-_____	_____
tax parcel number	Community Reinvestment Area No.

2. A. Nature of business (manufacturing, warehousing, wholesale or retail stores, or other).

B. List primary 4 digit Standard Industrial Code (SIC) # _____
Business may list other relevant SIC numbers.

C. Form of business (corporation, partnership, proprietorship, or other)

3. Name of principal owner(s) of the business.

_____	_____
name	title
_____	_____
name	title
_____	_____
name	title
_____	_____
name	title

4. Project Description: _____

5. Project will begin _____, 19__ and be completed _____, 19__.

6. A. Estimate the total number of new employees the business intends to hire at the facility that is the project site (job creation projections must be itemized by full and part-time and permanent and temporary).

total #jobs	MI-time	part-time	permanent	temporary
_____	_____	_____	_____	_____

B. State the time frame of this projected hiring:

	total #jobs	full-time	part-time	permanent	temporary
1st Yr.	_____	_____	_____	_____	_____
2nd Yr.	_____	_____	_____	_____	_____
3rd Yr.	_____	_____	_____	_____	_____

7. A. Estimate the total amount of annual payroll such new employees will add (new annual payroll must be itemized by full and part-time and permanent and temporary new employees).

total payroll	full-time	part-time	permanent	temporary
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

- B. State the annual payroll estimate for the projected hiring:

	total payroll	full-time	part-time	permanent	temporary
1st Yr.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
2nd Yr.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
3rd Yr.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

- C. Indicate separately the amount of total existing annual payroll itemized by full and part-time and permanent and temporary employees.

total payroll	full-time	part-time	permanent	temporary
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

8. Market value of the existing facility as determined for local property taxes: \$ _____

9. An estimate of the amount to be invested by the business to establish, expand, renovate or occupy a facility:

A. Acquisition of Buildings: \$ _____

B. Additions/New Construction: \$ _____

C. Improvements to existing buildings: \$ _____

Total New Project Investment \$ _____

10. A. Business requests a real property tax exemption of ____% for ____ years.

B. Business' reasons for requesting tax incentives (be as quantitatively specific as possible). _____

11. Does this project involve a structure of historical or architectural significance?
 () NO () YES -- if yes, attach a written certification or significance as issued by appropriate authority.
12. The applicant shall provide annual investment and payroll information not later than January 15th for each year that the exemption is in place.

I, the undersigned, affirm that the information contained in and submitted with this application is complete and correct to the best of my knowledge.

_____	_____
Name of the Business	Date
_____	_____
Signature	Typed Name and Title

On this ____ day of _____, 199__, before me, a Notary Public, in and for Montgomery County, State of Ohio, personally appeared _____, who acknowledge that he did sign the foregoing instrument and that the same is his free act and deed.

In Testimony Whereof, I have hereunto affixed my name and official seal on this _____ day of _____, 199__.

 Notary Public

FOR OFFICE USE ONLY

1. Project approved by Resolution number _____
2. Period of exemption for the improvement _____

I certify that the project described herein meets the necessary requirements for the Community Reinvestment Area Tax Exemption Program for the City of Moraine.

_____	_____
Signature of Housing Officer	Date

cc County Auditor