

TIF Investment Program Application

Property Address: _____

Property legal description (or attach): _____

Applicants:

Applicant name(s): _____

Address: _____

Phone: _____ Email: _____

Property Owner (if not same as applicant)

Name(s): _____

Address: _____

Phone: _____ Email: _____

Estimated total construction cost: \$ _____

Requested funding from LDDA: \$ _____

Project Information (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> First & Main Transit Area | <input type="checkbox"/> Historic Rehabilitation |
| <input type="checkbox"/> Main Street Corridor | <input type="checkbox"/> Mixed Use Project (commercial/residential) |
| <input type="checkbox"/> Opportunity Development Site (per Master Plan) | <input type="checkbox"/> Alley-facing Façade Improvements |
| <input type="checkbox"/> Coffman Corridor | <input type="checkbox"/> Street-facing Façade Improvements |
| <input type="checkbox"/> 3rd Avenue Corridor | <input type="checkbox"/> Property Engagement (2 streets, corner) |
| <input type="checkbox"/> Other District Location | |

Proposed construction (check all that apply):

- building remodel area: _____ square feet
- building addition area: _____ square feet
- new building(s) area: _____ square feet

Existing building area: _____ square feet

Project Uses/Tenant Information:

Commercial units: existing sq ft: _____ proposed sq ft: _____

Residential units: existing sq ft: _____ proposed sq ft: _____

Building floors: existing: _____ proposed: _____

Parking spaces: existing: _____ proposed: _____

List any existing or proposed tenant(s) and square footage:

Existing Tenants: _____

Proposed Tenants: _____

Do any tenants need relocated? _____

Contact Information:

Identify one person to serve as the contact for the application during the review process. This person will be notified by LDDA regarding comments and meetings and responsible for notifying other parties who may be involved in the project.

Name: _____

Phone: _____

Email: _____

Architect(s) & Firm:

Name: _____

Company: _____

Phone: _____

Email: _____

Contractor(s):

Name: _____

Company: _____

Phone: _____

Email: _____

Certification

I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. In filing the application, I am acting with the knowledge and consent of those persons who are owners of the subject property or are parties to this application. I understand that all materials required by the Longmont Downtown Development Authority and must be submitted prior to having this application processed.

Please also attach/include ALL REQUIRED INFORMATION requested in the TIF Investment Program document.

Applicant Signature

Property Owner Signature (if different than applicant)

Print Name, Title

Print Name, Title

Signature

Signature

For Staff Use:

Date application submitted: _____ Date application completed for review: _____

This application serves as a TIF and Façade (DIP) application