

MENTOR VILLAGE COMMUNITY REINVESTMENT AREA (CRA) APPLICATION / AGREEMENT (FOR COMMERCIAL PROJECTS)

ROPOSED AGREEMENT for Communite ity of Mentor located in the County of Lake		icentives between the	
ny of Wentor focuted in the County of Dake	(property owner)		
a. Name of property owner, mailing address additional pages if multiple business part		er and email (attach	
Property Owner	Conta	Contact Person	
Address	Phone	E-Mail	
b. Project Site			
Address		1 " T TD"	
Address	Permanent Pa	rcel # or Tax ID#	
	nmercial activity to be conducted at dustry Classification System (NAI)	the site. CS Code):	
a. Describe the nature of the proposed comb. List primary 6-digit North American In	dustry Classification System (NAI	the site. CS Code): f the consolidation?	
 a. Describe the nature of the proposed com b. List primary 6-digit North American In List other relevant NAICS numbers: c. If the project involves a business consol 	dustry Classification System (NAI didation; what are the components or syment positions to be transferred):	the site. CS Code): f the consolidation?	
 a. Describe the nature of the proposed community b. List primary 6-digit North American In List other relevant NAICS numbers: c. If the project involves a business consol (Describe the location, assets and employed) 	dustry Classification System (NAI) idation; what are the components or yment positions to be transferred):	the site. CS Code): f the consolidation?	

4. a	Businesses' current employment level at the project site (as of date of the application):
ł	• Will the project involve the relocation of employees or assets from another Ohio location to this site? Yes No
c.	If yes, identify the location(s) from which employees or assets will be relocated:
d	Business' current employment level at site or site(s) to be relocated (itemized for full- and part-time and permanent and temporary employees):
e	Business' current assets at site or site(s) to be relocated:
f	• What is the project impact of the relocation in terms of income and property tax loss?
	Ooes the Property Owner owe: Any delinquent taxes to the State of Ohio or a political subdivision of the State? Yes No If yes, to whom and how much?
	Any moneys to the State or a state agency for the administration enforcement of any environmental laws of the State? Yes No If yes, to whom and how much? Any other moneys to the State, a state agency or a political subdivision of the State that are past due
	whether the amounts owed are being contested in a court of law or not? Yes No
6 . I	location, amounts and/or case identification numbers (add additional sheets). Project Description:

7.	Project will begin (date), 2	20	and be completed (date)	, 20
	provided a tax exemption is provided.			
8.	a. Estimate the number of new employees the projection must be itemized by the name of temporary):			
	b. Projected timeframe for project hiring:c. Projected schedule for hiring (itemize by f			
	employees):	ian and	part time and permanent and temporary	
9.	a. Estimate the annual payroll for new employannual payroll must be itemized by full- are employees).			_ (new
	b. Estimate the amount of existing annual pa	ayroll the	at will be retained from the project:	
10.	An estimate of the amount to be invested by facility: A. Acquisition of Land/Building: B. Addition/New Construction: C. Improvements to Existing Building: D. Machinery & Equipment: E. Furniture & Fixtures: F. Inventory: Total New Project Investment:	\$_ \$_ \$_ \$_ \$_ \$_	nterprise to establish, expand, renovate o	or occupy a
11.	a. Most recent real estate tax bill (attach cop b. Business' reason for requesting tax incer			
12.	a. Does this project involve a structure of h	nistoric a	nd/or architectural significance?	
	b. If yes, attach certification from the Lake		_	ety, or the

3

National Register of Historic Places.

Updated 2/2020

#1: Date of School Board Notification: #2: Date of Council Approval: #3: Resolution No. #4: Date Sent to the Ohio Development Services A #5: Date Sent to the Lake County Auditor: Application Fee enclosed: Housing Officer Certification: I certify that the project describe herein meets the resolution of the project describe herein meets the project describe herein meets the resolution of the project describe herein meets describe herein meets described herein meets	Agency:			
#1: Date of School Board Notification:	Agency:			
#1: Date of School Board Notification:#2: Date of Council Approval:#3: Resolution No#4: Date Sent to the Ohio Development Services A	Agency:			
Agency. ** A copy of this proposal will be sent to the	on fee made payable to Ohio Development Services Mentor Exempted Board of Education a minimum of eting at which this will be reviewed to permit the Board neil considering the request.			
Signature	Print Name & Title			
1	not more that \$1,000 and/or a term of imprisonment of Date			
The Applicant affirmatively covenants that the information contained in and submitted with the pplication is complete and correct and is aware of the ROC Sections 9.66(C)(1) and 2921.13(D) concludes for falsification which could result in the forfeiture of all current and future economics.				
Environmental Protection Agency to confirm statements contained within this application including ite #5 and to review applicable confidential records. As part of this application, the property owner may a be required to directly request from the Ohio Department of Taxation or complete a waiver form allowing the Department of Taxation to release specific tax records to the local jurisdiction considering the request. The Applicant agrees to supply additional information upon request.				

^{*}Attach the Final Community Reinvestment Area (CRA) Agreement as Exhibit A.

^{**}Please note that copies of this proposal <u>must</u> be included in the finalized Community Reinvestment Area (CRA) Agreement and be forward to the Ohio Development Services Agency within fifteen (15) days of final approval and executed by all relevant parties.