

New Markets Tax Credit Application

DAYTON REGION NEW MARKET FUND

Moving Dayton Forward

| Company | Name | | | | |
|---|------|-------|-------------------|----------------|--|
| □ For Profit Entity □ Non-Profit Entity | | Corp | o. 🗆 LLC 🛛 Partno | ership 🛛 Other | |
| Borrower Name (If Applies) | | | | | |
| Group For Profit Entity Group Non-Profit Entity | | Corp | o. □ LLC □ Partno | ership 🛛 Other | |
| Company Address | | | | | |
| City | | State | | Zip Code | |
| Company Phone Number | | | Company Fax Nun | nber | |

| Project Name | | | |
|--------------------|---|----------|--|
| Project Address | | | |
| City | State | Zip Code | |
| Project Descriptio | Project Description: (Describe the project briefly) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Total site acreage of the project: | Number of floors: | |
|--|--|------------|
| Proposed building size (square feet): | Are you pursuing LEED certification? | 🗆 Yes 🛛 No |
| | ors or contractors/subcontractors that are Minority- | 🗆 Yes 🛛 No |
| owned or Minority-Controlled, or Won | nen-Owned or Women-Controlled? | |
| Is this project a community facility, op | en to the general public? | 🗆 Yes 🛛 No |
| Primary tenants (if known; if not know | n, types of tenants anticipated) | |
| | | |
| Will you provide reduced rents and mo | □ Yes □ No | |
| Is the project located on a Brownfield | □ Yes □ No | |
| If rehabilitation is involved, what is the | | |



Community Impact:

| Permanent Jobs | Construction/Temporary Jobs | |
|--|--|--|
| Estimated number of jobs created: | Estimated number of jobs created: | |
| Estimated number of jobs retained: | Estimated number of jobs retained: | |
| Estimated number of jobs created/retained to be filled by low-income persons or residents of low-income communities: | Estimated number of jobs created/retained to be filled by low-income persons or residents of low-income communities: | |
| Average hourly wage for these jobs: | Average hourly wage for these jobs: | |
| Average hourly wage with benefits: | Average hourly wage with benefits: | |

| Community Goods and Services | | | | |
|--|------------|---|--|--|
| Will the project provide goods or services to the residents of low-income communities or low-income persons? | 🗆 Yes 🗆 No | If a community service project, number of people to be served annually: | | |
| Type of Services Provided: | | | | |

| Commercial Goods and Services/Amenities | | | | |
|---|------------|--|--|--|
| Will the project provide goods and services/amenities to the residents of low- income communities or low-income persons? | □ Yes □ No | Estimated number of people to be served annually: | | |
| Will the project finance or assist low-income community businesses? | □ Yes □ No | Will the project finance or assist minority or women owned businesses? | | |
| What types of services/amenities? | | | | |

| Housing Development | | | | |
|--|------------|---|-------|------|
| If housing is part of the project, how many units are to be developed? | | Does the project commit 20% or more of all housing units to low-income persons? | □ Yes | □ No |
| Estimated Residential Sqft: | | Estimated Commercial Sqft: | | |
| Type of Housing (check all that apply): | □ Rental □ | For-Sale | 1 | |



How will the project serve as a catalyst for further development in the area? Please provide a narrative that describes in detail the community impact that will result from this project:

Other Project Information:

Financial Profile:

| Anticipated project closing date: | | | |
|--|---|----|--|
| Anticipated construction sta | rting date: | | |
| Anticipated completion date | e: | | |
| Total project costs: | | \$ | |
| Total construction costs: | | \$ | |
| Requested \$ amount of NM | Requested \$ amount of NMTC financing: \$ | | |
| \$ Amount of debt financing in place: | | | |
| Name of Debt Provider | | | |
| Financing Status | □ Disbursed □ Committed □ Term Sheet □ Application Pending □ Estimate | | |
| \$ amount other tax credits to be used (list types below): | | \$ | |
| | | | |
| \$ amount of grants, if any \$ | | \$ | |
| \$ amount of developer equity \$ | | \$ | |
| Other sources of Funds: \$ | | | |

Briefly describe why this project needs NMTC financing and why this project would not be feasible without an NMTC allocation.

| Have other sources of NMTC allocation been sought? If so, with whom and what \$ amounts. | | |
|--|------------|--|
| | | |
| | | |
| Have you identified an NMTC Investor? | □ Yes □ No | |
| Name of NMTC Investor | | |
| Phone Number of NMTC Investor | | |
| Email of NMTC Investor | | |

Application Information:

| Date Submitted: | |
|---------------------------|--|
| Application Completed By: | |
| Contact Person: | |
| Contact Phone Number: | |
| Contact Fax Number: | |
| Email: | |

Certification and Signature:

The undersigned hereby attests that all information furnished herein as part of this application is true and accurate to the best of his/her knowledge:

| Signature: | Name (Print): |
|------------|---------------|
| | |
| Company: | _ Title: |
| | |

Date: _____

Applications can be submitted electronically or on paper to either of the following staff members.

Staff Contact Information:

Economic Development—Brian Heitkamp 937.853.2533|bheitkamp@citywidedev.com

Economic Development—Caitlin Bortolotto Krebs 937.853.2563 | cbortolotto@citywidedev.com

Neighborhood and Community Development—Karen DeMasi 937.853.2555|kdemasi@citywidedev.com

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