



COMMUNITY REINVESTMENT AREA PROGRAM APPLICATION

Application Date	
Project Address or Parcel Number	

APPLICANT INFORMATION				
Contact Name		Title		
Company Name				
Address				
City		State		Zip Code
Phone		Email		
PROPERTY OWNER INFORMATION <i>(if different)</i>				
Name		Phone		
Address		Email		
City		State		Zip Code

Tax & Environmental Compliance <i>(check those that are applicable)</i>			
Does the Property Owner Owe:	<input type="checkbox"/> Any delinquent taxes owed to the State of Ohio?	<input type="checkbox"/> Any monies owed to the State or a state agency for administration or enforcement of environmental laws?	<input type="checkbox"/> Any delinquent taxes to a political subdivision of the state?
If yes to any of the above, please provide details of each instance including location, amount(s) and case identification numbers.			

PROJECT INFORMATION			
Business Type	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
Project Type	<input type="checkbox"/> New Construction	<input type="checkbox"/> Remodeling	<input type="checkbox"/> Addition(s)
Estimated Construction Cost			
Estimated Construction Schedule	Start		Completion
Project Description			

JOB RETENTION AND CREATION			
Current Number of Jobs	Full Time		Part Time
Total Annual Payroll at Time of Application			
Estimated Number of Jobs to be Created	Full Time		Part Time
Estimated Payroll of New Jobs Created			
Combined Payroll at Project Completion			

BUSINESS REQUESTS THE FOLLOWING TAX EXEMPTION			
% of Requested Property Tax Exemption		Years	

SUBMISSION AND ACKNOWLEDGEMENTS:

Submission of this application expressly authorizes the City of Wadsworth to contact the Ohio Environmental Protection Agency to confirm statements contained within this application and to review applicable confidential records. As part of this application, the property owner may also 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.

The Applicant affirmatively covenants that the information contained in and submitted with this application is complete and correct and is aware of the ORC Sections 9.66(C) (1) and 2921.13(D) (1) penalties for falsification which could result in the forfeiture of all current and future economic development assistance benefits as well as a fine of not more than \$1,000 and/or a term of imprisonment of not more than six months.

Signature of Property Owner

Date

Signature of Applicant

Date

* A copy of this proposal must be forwarded by the local governments to the affected Board of Education along with notice of the meeting date on which the local government will review the proposal. Notice must be given a minimum of fourteen (14) days prior to the scheduled meeting to permit the Board of Education to appear and/or comment before the legislative authorities considering the request.

** Attach to Final Community Reinvestment Area Agreement as Exhibit A

Please note that copies of this proposal must be included in the finalized Community Reinvestment Area Agreement and be forwarded to the Ohio Department of Taxation and the Ohio Development Services Agency within fifteen (15) days of final approval.