



12159 South Pulaski Road
Alsip, Illinois 60803
708-653-3122

708-653-3123 www.calsagezone.org • E-mail calsagezone@aol.com

DATE _____

PROJECT INFORMATION

To be completed by Project Representative

1. NAME OF OWNER _____ PERSONAL PHONE # _____
2. NAME OF BUSINESS _____ BUSINESS PHONE # _____
3. STREET ADDRESS _____
4. CITY _____ STATE _____ ZIP _____ E MAIL _____
5. NAME OF PROPOSED BUSINESS/COMPANY (If different from applicant)

6. STREET ADDRESS OF PROPOSED PROJECT

 - 6a. FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN) _____
 - 6b. UNEMPLOYMENT INSURANCE NUMBER (UIN) _____
7. NAME OF CONTRACTOR/S (List general contractor and all subs. Each must have their own BMEC (Building Materials Exemption Certificate). Use spread sheet provided to submit all contractors.
CONTRACTOR/SUB CONTRACTOR NAME _____ FEIN# _____
PHONE _____ ADDRESS _____
EMAIL _____ COST OF CONTRACT _____
COST OF BUILDING MATERIALS _____
- 7a. Estimated # of construction jobs this project will create _____
8. General description of proposed project, including any rehabilitation/remodeling of existing structures, new construction, major paving or new equipment. (Use additional sheet if necessary)
TYPE AND STYLE OF CONSTRUCTION _____
BUILDING SIZE _____ LOT SIZE _____
TYPE OF BUSINESS _____
DESCRIBE OTHER FEATURES _____
9. PROJECT CLASSIFICATION
COMMERCIAL _____ INDUSTRIAL _____ RETAIL _____

10. EXPECTED START DATE OF PROJECT _____ EXPECTED COMPLETION _____

11. ESTIMATED COST (LABOR AND MATERIALS) OF

A. REMODELING/REHABILITATION Labor _____ *Materials _____

B. NEW CONSTRUCTION _____ Labor _____ *Materials _____

C. CAPITAL EQUIPMENT _____ D. SITE (COST OR VALUE IF PRE-OWNED) _____

12. NUMBER OF FULL-TIME EQUIVALENT JOBS

A. PRESENTLY AT PROJECT LOCATION _____ B. RETAINED* _____

C. CREATED ** WITHIN 2 YEARS OF PROJECT COMPLETION _____

D. CONSTRUCTION JOBS CREATED _____

* "Retained" means the number of jobs that will remain in the zone as a result of the new investment being made, that otherwise would be lost.

** "Created" means the number of jobs for which persons are newly hired (not transferred in-State) or are expected to be hired within 2 years as a result of the new investment, **not including construction jobs** or spin-offs that may be created.

13. DOES THIS PROJECT INVOLVE A MOVE FROM ANOTHER LOCATION?

YES _____ NO _____ If yes, indicate City and State _____

14. IS THIS PROJECT LOCATED IN A TIF _____? HAVE YOU RECEIVED, OR WILL YOU BE APPLYING FOR ANY OTHER REAL ESTATE TAX INCENTIVE _____?

PLEASE EXPLAIN _____

FROM YOUR MOST CURRENT TAX BILL

15. EQUALIZED ASSESSED VALUATION (EAV) OF EXISTING PROPERTY

LAND _____

IMPROVEMENTS _____

TOTAL _____

16. PROPERTY TAX IDENTIFICATION NUMBER _____

17. _____

Print Name of Project Representative

Title

Signature of Project Representative

Date

18. ENTERPRISE ZONE ADMINISTRATION FEE 1/2 of 1% of the building material costs.

Please enclose check for 0.005 of estimated building material cost (Line 11A and/or Line 11B).

\$ _____ (\$200.00 Minimum/ Maximum \$50,000 fee)

Application must be filed, and exemption certificates issued prior to purchasing materials for full benefit.

PLEASE MAKE CHECK PAYABLE TO: CAL-SAG ENTERPRISE ZONE 12159 South Pulaski Road, Alsip, Illinois 60803

708-653-3122

www.calsagezone.org

e mail application to calsagezone@aol.com

01/2021