

Instructions for Application for Property Tax Incentives for New or Expanding Businesses and/or Application for Carrington Renaissance Zone

Line 1: Name of Applicant ----- Name of Business applying to Renaissance Zone

Line 2: Federal ID or SSN ----- Federal Identification Number given by state or business owner's Social Security Number.

Line 3: North Dakota Sales and Use Tax Permit No. if applicable ----- ND Sales and Use Tax Permit # issued by the State

Line 4: Mailing Address of Applicant ---- Mailing Address of Business applying to Renaissance Zone.

Line 5: City ---- Carrington
County ----- Foster
Zip ----- 58421

Line 6: Telephone Number and Email Address ---- Telephone and E-mail of the Business

Line 7: Physical Street Address of project ---- Business's Physical Street Address

Line 8: If corporation, specify the state and date of incorporation

Line 9: Name and title of individual to contact if other than applicant ---- Name of Manager or Business Owner for Business applying to Renaissance Zone

Line 10: Mailing Address ---- Mailing address of Manager or Business Owner

Line 11: City ---- Carrington
County ----- Foster
Zip ----- 58421

Line 12: Telephone and Email address: Telephone and e-mail of business manager or owner

Line 13: Indicate terms for property tax exemption and be specific ---- The number of years and percentage of exemption the business is applying for.

_____ Number of years ----- Maximum is 5 years for RZ Incentives

_____ Percent of Exemption ----- Maximum is 100% exemption

Line 14: Which of the following would better describe the project for which this application is being made ---- Either:

_____ Purchase with improvements

City of Carrington, North Dakota

**Application for Property Tax Incentives for New or Expanding Businesses
and/or Application for the Carrington Renaissance Zone**

THIS APPLICATION IS CONSIDERED A PUBLIC RECORD

Name of Applicant: _____

Federal ID No. or Social Security No.: _____

North Dakota Sales and Use Tax Permit No. if applicable: _____

Mailing Address of applicant: _____

City: _____ County: _____ ZIP: _____

Telephone No. and Email Address: _____

Physical Street Address of Project: _____

If Corporation, Specify the State and Date of Incorporation: _____

Name and Title of Individual to contact if other than applicant: _____

Mailing Address: _____

City: _____ County: _____ ZIP: _____

Telephone No. and Email Address: _____

Indicate terms for property tax exemption and be specific:

_____ Number of Years _____ Percent of Exemption

Which of the following would better describe the project for which this application is being made?

_____ New Business Project _____ Expansion of existing business project

Legal Description of real property for project: _____

Will the project be owned or leased by the project operator? Owned Leased

If the answer is leased, will the incentive benefit the project operator? Yes No

If the property will be leased, attach a copy of the lease or other agreement establishing the project operator's benefits.

Will the project be located in a new structure or an existing facility? New Existing

If existing facility, when was it constructed? _____

If new construction, complete the following:

Estimated date of commencement of construction of the project: _____

Description of project to be constructed including size, type and quality of construction: _____

Projected number of construction employees during the project construction: _____

Approximate date of commencement of operations for this project: _____

Estimated market value of property used for this project:	Estimate taxable valuation of the property eligible for exemption by multiplying the market values by 5 percent:
Land \$ _____	a. Land (not eligible) \$ _____
Existing buildings and structures for which exemption is claimed \$ _____	b. Eligible existing buildings and structures \$ _____
Newly constructed buildings and structures when completed \$ _____	c. Newly constructed buildings and structures when completed \$ _____
Total \$ _____	d. Total taxable valuation of property eligible for exemption (Add lines b and c) \$ _____
Machinery and equipment \$ _____	e. Enter the consolidated mill rate for the appropriate taxing district \$ _____
	f. Annual amount of the tax exemption (Line d x line e) \$ _____

Description of Project for Business

Note: A "project" means a newly established business or the expansion portion of an existing business. Do not include any established part of an existing business.

Type of business to be engaged in: Ag processing Manufacturing Retailing
 Wholesaling Warehousing Services

Describe in detail the activities to be engaged in by the project operator, including a description of any products to be manufactured, produced, assembled or stored: (Use additional sheets if necessary)

Indicate the type of machinery and equipment that will be installed: _____

Projected annual revenue, expenses, and net income of the project for each year for the first five years:

Year	_____	_____	_____	_____	_____
Annual revenue	_____	_____	_____	_____	_____
Annual expense	_____	_____	_____	_____	_____
Net Income	_____	_____	_____	_____	_____

Projected annual average number of persons to be employed by the project at the project location for each year for the first five years and the estimated annual payroll. (Please indicate F-Full-time or P-Part-time employees)

Year	_____	_____	_____	_____	_____
No. of Employees	_____	_____	_____	_____	_____
Estimated Payroll	_____	_____	_____	_____	_____

Previous Business Activity

Is the project operator succeeding someone else in this or a similar business? Yes No

Has the project operator conducted this business at this or any other location either in or outside of the state? Yes No

Has the project operator or any officers of the project received any prior property tax incentives? Yes No

If the answer to any of the questions is Yes, please give details including locations, dates and name of former business. Attach additional sheets if necessary.

Property Tax Liability Disclosure Statement:

Does the project operator own real property in North Dakota which has delinquent property tax levied against it?

Yes No

Does the project operator own a greater than 50% interest in a business that has delinquent property tax levied against any of its North Dakota real property?

Yes No

If the answer to either question is Yes, please explain: _____

Estimated Yearly North Dakota State Income Tax Paid Out: _____

CERTIFICATION:

Applicant certifies that, to the best of his/her knowledge and belief, the information contained in the application and attached hereto is true and correct. If the project is a single-family residence, the applicant also certifies that the property is his/her primary place of residence.

Signature _____ Date: _____

OFFICE USE ONLY

High Priority Land Use

Targeted Area

Public Space

Capital Investment

Relocation

Historic Property

Comments:

Number of Years _____ Percent of Exemption _____