

Community Revitalization & Economic Growth



ENTERPRISE ZONE

Application for Incentives

City of Savannah Enterprise Zone (EZ) Municipal Tax Abatement Program

FOR INTERNAL OFFICE USE:

Date Application Received: _____ Date of Review by EZ Review Committee: _____

EZ Committee Determination: APPROVED DENIED

Date Tax Exemption Begins: _____ Date Tax Exemption Ends: _____

The Enterprise Zone Municipal Tax Abatement Program was established by the City of Savannah, in accordance with the State of Georgia Enterprise Zone Employment Act of 1997, to incentivize revitalization of geographic areas experiencing high levels of disinvestment, underdevelopment and economic decline. The program offers abatement of municipal ad valorem (property) taxes for a ten year period on business, commercial and residential properties located within the designated geographic area, when property owners successfully achieve and maintain one of the following criteria.

- **Job Creation** – A business or service enterprise within an EZ must create and maintain a minimum of five (5) new full-time equivalent jobs at the time of application to receive tax abatement. The five jobs must be new positions above and beyond the existing/prior positions employed by the business, thereby reflecting the creation of five “additional jobs.” The five new jobs must not have a pre-determined end date, include a regular work week of 30+ hours or more, and have the same benefits provided to similar employees. The five jobs must be maintained throughout the ten year period of abatement in order to maintain tax exemption. Additionally, qualifying business or service enterprises must make improvements to the property.

- **Land Improvement (Construction/Rehabilitation)** – A business, service enterprise or other party carrying out new residential construction, residential rehabilitation, or other rehabilitation of an existing structure within an EZ such that the value of the improvement(s) exceeds the value of the land by a ratio of five to one by the Chatham County Tax Assessors valuation.
 - **EZ-Approved Residential Property - Home Ownership Purchase** – To encourage home ownership in EZ areas, initial home buyers purchasing EZ-approved residential properties for primary residency, and where the property developer has met the five to one increase in value of the property, shall be eligible to obtain tax abatement for this same property. A Notification of Sale of EZ Approved Residential Property/Home Owners Application form with new home owner information and necessary proof of sale documentation is required.

IMPORTANT NOTICE: Once property tax abatement is granted, the incentive remains in effect for the full ten-years, regardless of the expiration of the Enterprise Zone area designation. However, failure of EZ applicants to accomplish the applicable criterion stated above can result in revocation of the tax abatement and recapture of any and all abated taxes or other incentives granted. EZ applicants must show verifiable proof to document compliance with EZ program requirements. Applicants approved for EZ Job Creation incentives must provide proof annually of the maintenance of these jobs to the City of Savannah’s Office of Business Opportunity no later than 30 days following the close of each calendar year in which taxes were abated.

Tax Abatement Schedule

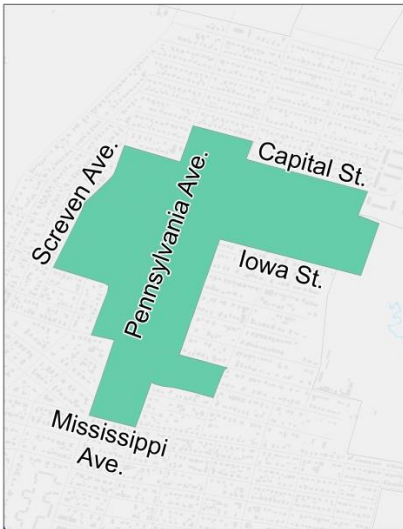
Year 1-5 100%	Year 6-7 80%	Year 8 60%	Year 9 40%	Year 10 20%
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TO BE CONSIDERED FOR TAX ABATEMENT INCENTIVES IN THE UPCOMING CALENDAR YEAR, THIS APPLICATION MUST BE COMPLETED AND RECEIVED BY THE OFFICE OF BUSINESS OPPORTUNITY NO LATER THAN JUNE 30TH.

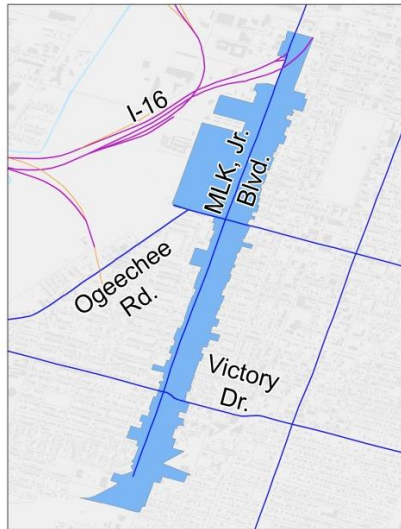
Applications received after this date may be submitted but will not be considered for the upcoming year. For more information, please call the Office of Business Opportunity at (912) 652-3582.

SAVANNAH ENTERPRISE ZONE APPLICATION

Please indicate the Enterprise Zone where the proposed business is or will be located.



Pennsylvania Avenue / Savannah Gardens
Established November 2009



Martin Luther King, Jr. Blvd. / Montgomery Street
Established October 2010



Waters Avenue
Established January 2016

Required Documentation Checklist for ALL Applicants

(Documents not available at time of submission must be provided before benefits can begin.)

	Completed Enterprise Zone Application for Incentives
	Detailed plans & scope of work for property improvements <i>(Construction, parking, façade, signage, landscape, etc.)</i>
	Proof of costs paid to upgrade/improve property <i>(Labor & material costs, professional & other fees paid)</i>
	City of Savannah Business License
	Map of site <u>with boundary survey</u>
	Photographs of site and site improvements

Required Documents for Job Creation Applicants ONLY

	Evidence of business ownership
	Certified payroll from period prior to creating new jobs in the Enterprise Zone that reflects the number of total employees
	Certified payroll from most recent period verifying total number of new jobs later created in the Enterprise Zone.

Required Documents for Land Improvement Applicants ONLY

	Evidence of property ownership or notarized owner verification of improvements made by EZ applicant
	Evidence of parcel's Tax Assessed Value prior to land improvements
	Evidence of parcel's Tax Assessed Value after land improvements

Part I: General Information

Primary Contact Person

Name _____ Telephone Number _____
 Title _____ Fax Number _____
 Email _____ TDD Number _____
 Mailing Address _____
 Organization Name _____

Business Information

Legal Name of Business _____
(Please enter the exact legal name of the business applying for Enterprise Zone designation)

Federal Tax ID# _____ NAICS Code _____

Business Type *(Manufacturing, Restaurant, Retail, etc.)* _____

Primary Business Product or Service _____

Physical Address of Property/Site in Enterprise Zone* _____
**If a new facility is being constructed and an address is not available, please provide address as soon as possible.*

Legal Name of Applicant/Business _____

Mailing Address _____

Email _____ Telephone Number _____

Parent Company (if applicable) _____

Mailing Address _____ Telephone Number _____

Site Information

Name of Current Owner of the Site *(if different from Applicant)* _____

Owner Address _____

Tax Parcel ID Number (PIN)	Type of building construction <input type="checkbox"/> Combustible (wood) <input type="checkbox"/> Non-Combustible (concrete and/or steel)
What is the acreage of the site?	How is the site zoned?
What is the building's total square footage?	Did the project require a zoning variance?
Census tract where the site is located:	Anticipated/Estimated gross receipts one year following EZ designation?

Part II: Improvements & Economic Stimulus

A. General Narrative

What types of improvements will have been made to the parcel? (Check all that apply)

- New Construction
 Rehabilitation
 Adaptive Reuse
 Acquisition/Rehabilitation
 Exterior Improvements

Briefly describe the improvements to the site and the economic impact it will bring to the Enterprise Zone and the community. (You may substitute company documents or attach additional sheets if needed.)

B. Physical Improvements (If Applicable)

In the space below, list the physical improvements to the physical structure and to the exterior grounds (e.g. parking, façade, signage, landscaping, new construction, rehabilitation, etc.) along with the costs and project completion dates.

Type of Improvement	Cost (Labor/Materials)	Start Date (Month/Year)	End Date (Month/Year)
Total Cost of Improvements: \$ _____			

C. Professional Services and Other Fees

Please note any fees paid that are related to the improvements listed in Section B. You may skip any fees listed below that do not apply to your project.

Local Government Fees		Developer's Fee	
Building Permits	\$ _____	Developer's Overhead	\$ _____
Water Tap Permits	\$ _____	Consultant's Fees	\$ _____
Sewer Tap Permits	\$ _____	Short-term Reserves (held for less than life of loan)	\$ _____
Subtotal	\$ _____	Subtotal	\$ _____
Professional Services		Other Fees	
Architectural Fees	\$ _____	Other _____	\$ _____
Construction Fees	\$ _____	Other _____	\$ _____
Attorney Fees	\$ _____	Other _____	\$ _____
Accounting	\$ _____	Other _____	\$ _____
Subtotal	\$ _____	Subtotal	\$ _____
Total Professional Services and Other Fees (total all fees noted above): \$ _____			

D. Sources of Funding for the Project

Please list all sources of funding secured to finance the completion of this project.

Source (1) _____	\$ _____
Source (2) _____	\$ _____
Source (3) _____	\$ _____
Source (4) _____	\$ _____
Total Sources of Funding	\$ _____

E. Assessed Value

Please list the tax assessed value prior to land improvements being made and after land improvements were made.

***NOTE: Please attach a copy of the Property Record Card from the Chatham County Board of Assessors.**

	Prior Assessed Value
Land	\$ _____
Buildings	\$ _____
Misc (if applicable)	\$ _____
GRAND TOTAL	\$ _____

F. Economic Narrative

Please provide a brief overview of the history and type of business you own and operate, its products or services, total sales, locations (local, regional, national, international), and any other information that would be helpful or pertinent to this application. (You may substitute company documents for this section or attach additional pages if needed.)

Part III: Job Creation Supplement

Complete this section **only** if you are applying for the Enterprise Zone incentive for Job Creation.

A. Number of Employees prior to adding new jobs in the Enterprise Zone

1. Total number of jobs that existed prior to adding new jobs in the Enterprise Zone: _____
2. Base year, or last year, in which only the above number of jobs existed: _____
3. Total Amount of Annual Payroll for the above jobs: \$ _____

B. Number of Employees after adding new jobs in the Enterprise Zone

(NOTE: Leased, contract, temporary, and construction employees do not qualify as new employees and should not be listed.)

1. Total number of new/additional full-time jobs (30 work hours per week minimum) created in the Enterprise Zone boundaries not counted in Section A above _____
2. In the space provided below, please list all new jobs created within the Enterprise Zone, the month and year created, the estimated annual wages for each position, and whether the position is filled or vacant.

Job Title	Month/Year Created	Estimated Annual Wages	Filled (F) or Vacant (V)?
1) _____	_____	\$ _____	_____
2) _____	_____	\$ _____	_____
3) _____	_____	\$ _____	_____
4) _____	_____	\$ _____	_____

Total Annual Payroll for New Enterprise Zone Jobs \$ _____

REQUIRED:

- Attach certified payroll verifying total jobs/employees prior to the creation of new jobs in the Enterprise Zone.
- Attach certified payroll from the most recent quarter verifying the total number of new jobs/employees created within the Enterprise Zone.

NOTE: Application will be considered incomplete without proof of employment levels.

C. Jobs Summary (All Jobs)

Total number of jobs <u>prior to</u> adding new jobs in the Enterprise Zone (Section A)	_____
Total number of new, full-time jobs created in the Enterprise Zone (Section B)	_____
Total Number of All Jobs	_____
Total Annual Payroll for Jobs prior to adding new jobs in the Enterprise Zone (Section A)	\$ _____
Total Annual Payroll for New Jobs added in the Enterprise Zone (Section B)	\$ _____
Annual Payroll Grand Total (All Positions)	\$ _____

D. Employment of Low or Moderate Income Persons

Please list the number of persons employed who meet the following criteria.

# Employed	Low/Moderate Income Person Definitions (A-H)
	(A) Unemployed or unemployed for three of the six months prior to the date of hire
	(B) Homeless
	(C) A resident of public housing
	(D) Receiving temporary assistance for needy families or who has received temporary assistance for needy families at any time during the 18 months prior to the date of hire
	(E) A participant in the Workforce Investment Act or who has participated in the Workforce Investment Act at any time during the 18 months prior to the date of hire
	(F) A participant in a job opportunity where basic skills are required or who has participated in such a job opportunity at any time during the 19 months prior to the date of hire
	(G) Receiving supplemental social security income
	(H) Receiving food stamps
	Total Low/Moderate Income Persons Employed (Add all the numbers entered in the first column.)

Additional Economic Stimulus

Please describe any other economic stimulus this project will bring to the community as part of the Enterprise Zone.

If possible, assign a dollar value to the economic stimulus described above: \$ _____
(If no dollar value exists, enter "None" or "N/A." If the dollar value is unknown, enter "Unknown" or "Don't Know")

Projected Start Date for stimulus described above: _____

Part IV: Applicant Certification

Applicant Certification

I hereby certify that all information provided in conjunction with this Enterprise Zone application is true and correct to the best of my knowledge. I acknowledge that by completing this application and accepting the incentives granted, I am affirming that I have completed and met the City's Enterprise Zone program requirements. I further understand that falsification of documents or failure to carry out the project as described and approved can result in revocation of the tax abatement and recapture of any and all abated taxes or other incentives granted.

Applicant Signature _____ **Date** _____