

ENTERPRISE ZONE

All Enterprise Zone Applicants must have either an FEIN (Federal Employer Identification Number) or an Applicant ID. It will also be required that a valid email address be entered as they will send you a copy of your certificate once completed.

For those who do not have the FEIN, below are the steps for applying for an Applicant ID.

First, go to this website:

<https://www.revenue.state.il.us/app/ezci/servlet/EZCServlet? CWSKEY=1078879621384360568858& CWSREQ=63730>

Then Click on the "Certificate Applicant" on the left side of the page

Then you will choose which "ID Type" you will be using, which will be "Social Security Number"

It will then take you through the applicant process, asking for name, address, email, phone number, etc.

Once you complete this and are given your Applicant ID, please write it on the EZ application and submit to my office. In the event you need assistance, please come to Vandalia City Hall.

Any questions, please contact LaTisha Paslay, Zone Administrator of the Vandalia/Fayette County Enterprise Zone at 618-283-1152, 618-267-7965 or via email: econdev@vandaliaillinois.com

Sincerely,

VANDALIA/FAYETTE COUNTY ENTERPRISE ZONE

**LaTisha L. Paslay
Zone Administrator**

(11/2013)

THE VANDALIA-FAYETTE COUNTY ENTERPRISE ZONE PROJECT INFORMATION FORM

PART I - PROJECT INFORMATION (to be completed by Project Representative)

1. Name of Business: _____
2. Street Address/City/Zip: _____
3. Telephone Number: Home: () _____ Business: () _____
4. FEIN #: _____ Unemployment Ins. #: _____
5. Name of Business/Company (if different from applicant): _____

6. Street Address of Proposed Zone Project: _____

7. Please provide a "general description" of proposed zone project, including plans for rehabilitation/remodeling of existing structures, new construction, major on-site improvements, or new equipment purchases, etc.:

8. Project Classification: _____ Commercial _____ Industrial
9. Proposed Date of Project Start: _____/_____/_____
Completion: _____/_____/_____
10. Estimated Costs for Zone improvements:

Land Acquisition:		\$ _____
On-Site Improvements:		\$ _____
Remodeling/Rehabilitation: (Total Est. Cost)		\$ _____
Labor:		
Materials:		
New Construction: (Total Est. Cost.)		\$ _____
Labor:		
Materials:		
Capital Equipment:		\$ _____
Other:		\$ _____
Total Project Cost:		\$ _____

PART I - PROJECT INFORMATION (Continued)

11. Number of Full-Time Equivalent Jobs: **(MUST BE COMPLETED)**
- a. Presently at project's zone location: _____
 - b. Retained* at project's zone location: _____
 - c. Created* * within 2 yrs. of project completion: _____

12. Does this project involve a move from another location:

Yes () No () If yes, indicate city & state of present location:

NOTE: The Illinois Supreme Court has not spoken on the precise issue of the application of the Prevailing Wage Act in TIF and Enterprise Zones. You as a developer may find varying legal opinions on this issue. Notwithstanding the foregoing, while the City of Vandalia cannot warrant that the Prevailing Wage Act will not be required from any particular project or development. We emphasize that it is the developer's responsibility to ascertain applicability of the Act on a particular project. If you have further questions, consult your own attorney or the Illinois Department of Labor.

13. Signature of Project Representative:

Name & Title

Date

* "Retained" means the number of jobs that will remain in the Zone as a result of the investment being made.

** "Created" means the number of jobs for which persons are hired or are expected to be hired within 2 years as a result of the new investment, not including construction jobs or spinoffs that may be created.

PART II - PROJECT DEVELOPMENT INFORMATION - (to be completed by City Clerk/Zone Administrator)

- 1. Property Tax Identification Number: _____
- 2. Building Permit Number: _____
- 3. Date Building Permit Issued: _____
- 4. Dollar Value of Bldg. Permit Fee Waived: \$ _____
- 5. NAICS Code _____

PART III - ESTIMATED TAX ABATEMENT - to be completed by Zone Administrator)

1. EAV of Property Prior to Project Start:

Improvements: \$ _____
Land: \$ _____
Total: \$ _____

2. Estimated EAV of Project Improvements:

Improvements: \$ _____
Land: \$ _____
Total: \$ _____

3. Est. EAV of Property upon Project
Completion (1 + 2): **Grand**

Total: \$ _____

4. Tax Rate Amount

Currently approved for Abatement: _____ /\$100 EAV

5. Estimated Amount of Real Estate

Tax Abatement: \$ _____ /First Year

6. Estimated Total Amount Abated for Term of Abatement:

\$ _____ Three Yrs. _____
\$ _____ Ten Yrs. _____

**PART IV. - VERIFICATION OF ACTUAL ABATEMENT (to be completed later by
City/County Staff/Zone Administrator)**

1. Increased Assessed Value
of Improvements:

\$ _____

2. Current Total Tax Rate/\$100 EAV:

\$ _____

3. Dollar Value of Tax Rate Eligible

\$ _____

4. Eligible for Abatement:

\$ _____

5. Total Amount of Taxes Abated in First Yr.

\$ _____

THE VANDALIA-FAYETTE COUNTY ENTERPRISE ZONE PROJECT INFORMATION FORM

1. PROJECT NAME: _____
2. PROJECT COMPLETE ADDRESS: _____
3. (please check one): Primary Contractor _____ Sub-Contractor _____
4. COMPANY NAME: _____
5. COMPANY ADDRESS (street address, no PO Box): _____

6. FEIN NUMBER *required: _____
7. COMPANY CONTACT PERSON: _____
8. E-MAIL ADDRESS *required: _____
9. PHONE NO.: _____ FAX NO.: _____
10. Project Classification: _____ Commercial _____ Industrial _____ Residential
11. Proposed Date of Project Start: _____/_____/_____
Completion: _____/_____/_____
12. Estimated Costs for Zone improvements (**Breakdown of Labor and Materials is required**):

On-Site Improvements:	\$ _____
Remodeling/Rehabilitation: (Total Est. Cost)	\$ _____
Labor:	_____
Materials:	_____
New Construction:	\$ _____
Labor:	_____
Materials:	_____
Other:	\$ _____
Total Project Cost:	\$ _____

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13. Signature & Title: _____ Date: _____