

Application for Establishment of a Tax Abatement District

Date: _____

Industrial Development:

Plant Rehabilitation:

Legal Name of Applicant: _____

Contact Person: _____

Telephone: _____ Fax: _____

Address: _____

Project Address: _____

1. Name and nature of applicant's business: _____

2. Type and cost of new construction or rehabilitation: _____

3. When will work begin? (month/year) _____

4. Type and cost of equipment to be ordered: _____

5. When will the first piece of equipment be ordered? (month/year) _____

6. When will the construction be completed and/or new facility occupied?
(month/year) _____

7. Total number of employees at the present time: _____

8. How many jobs are expected to be created within 2 years after project completion? _____

9. What types of jobs are expected to be created?

10. Legal Description of the real property involved: (attach)

11. Permanent parcel number: _____

12. Name and address of all property owners within the proposed district:

Current SEV: Real Property: _____ Personal Property: _____

13. Current zoning of the site: _____

Note: No tax abatement will be considered for any projects commencing prior to the establishment of the district.

Signed: _____

Attachment B

APPLICATION FOR INDUSTRIAL FACILITIES TAX EXEMPTION CERTIFICATE

Click on the link or copy and paste into your browser to go to the Michigan Department of Treasury – Form 1012 – Application for Industrial Facilities Tax Exemption Certificate.

<http://www.michigan.gov/-/media/Project/Websites/treasury/Forms/Local-Government/1012.pdf?rev=7597f9b078f74a22afa115fc5fc37b67>

Cable Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Computer & Peripheral Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Improvements

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Machinery & Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Computer Controlled Machinery & Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Furniture & Fixtures

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Office Machines

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Electronic, Video & Test Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Consumer-Utilized Equipment

| Description | Type | Identification | Date of Expected Acquisition (Mo/Day/Yr) | Projected Cost |
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Rehabilitations Only

Existing machinery, equipment, furniture, and fixtures that will be replaced.

| Description | Type | Identification | Year Acquired | Original Cost |
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Existing machinery, equipment, furniture, and fixtures that will continue to be used in the facility.

| Description | Type | Identification | Year Acquired | Original Cost |
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