

**SUPPLEMENT TO STATEMENT OF BENEFITS
HOUSING
LAFAYETTE REDEVELOPMENT COMMISSION**

INSTRUCTIONS:

1. This completed SUPPLEMENT and the completed STATEMENT OF BENEFITS, along with all other requested materials, must be submitted to the Lafayette Redevelopment Commission prior to a hearing before the Commission.

2. This SUPPLEMENT TO STATEMENT OF BENEFITS is part of the total application, and the CERTIFICATION in the STATEMENT OF BENEFITS applies to all statements in the APPLICATION.

SECTION I APPLICANT & PURPOSE

Name of Taxpayer <input type="text"/>	
Address of Taxpayer (street and number, city, state & ZIP code) <input type="text"/>	Telephone: <input type="text"/> FAX: <input type="text"/> E-mail: <input type="text"/>

Name of Applicant if different from Taxpayer Address of Applicant if different from Taxpayer (street and number, city, state & ZIP code) <input type="text"/>	
<input type="text"/>	Telephone No <input type="text"/> FAX <input type="text"/> E-mail <input type="text"/>
Description of relationship of Applicant to Taxpayer <input type="text"/>	

Contact for this Application <input type="text"/>	
Address of Contact if different from Taxpayer (street and number, city, state & ZIP code) <input type="text"/>	Telephone <input type="text"/> FAX <input type="text"/> E-mail <input type="text"/>

Name of Parent Company (if any) <input type="text"/>

Purpose of Application: Real Property Tax Abatement for <input type="text"/> years

SECTION II PROPERTY DESCRIPTION

Location of Real Property (street and number, city, state & ZIP code) <input type="text"/>
ATTACH LEGAL DESCRIPTION & PLAT MAP WITH LOCATION

Assessor's Parcel Key No(s): <input type="text"/> Real Property
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Does the company currently conduct business at this site? Yes <input type="checkbox"/> No <input type="checkbox"/>
If "No", how is the site currently used? <input type="text"/>

Current Zoning <input type="text"/>
Will any changes be required? Yes <input type="checkbox"/> No <input type="checkbox"/>
Will any changes, special exceptions be required? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have they been approved? Yes <input type="checkbox"/> No <input type="checkbox"/>

To be completed by RD Staff	
Is this area currently designated as an Economic Revitalization Area ?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has it ever been so designated in the past?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is this property in a Tax Increment Finance (TIF) district (requires RD Commission Approval)?	Yes <input type="checkbox"/> No <input type="checkbox"/>

SECTION III

NATURE OF IMPROVEMENT

Describe any Real Property Improvements:

Size of facility to be constructed and /or renovated

Rehabilitation of existing structure(s), especially architecturally significant or historic structures

Demolition of architecturally significant or historic structure(s)

SECTION IV

EMPLOYMENT

How many do you employ today?

How many will you employ after the project is complete?

How many jobs will be created?

Full-time

Part-time

How many jobs are retained?

Full-time

Part-time

How many jobs will be eliminated?

Full-time

Part-time

Will any of the new positions be temporary or filled by contract employees?

Yes

No

If "Yes", describe the contract:

Will new employees be hired from the Tippecanoe region?

Yes

No

If any positions are to be eliminated, please explain the circumstances and if any of the employees from these positions will be eligible for the new positions.

How many additional employees are:

	Number	Average Wage
Administrative	<input type="text"/>	<input type="text"/>
Management	<input type="text"/>	<input type="text"/>
Professional/Technical	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Total/Average Wage	<input type="text"/>	<input type="text"/>

Is the number of retained jobs the total workforce?

Yes

No

If "No", explain:

How many retained employees are:

	Number	Average Wage	Hourly Average
Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>
Management	<input type="text"/>	<input type="text"/>	<input type="text"/>
Professional/Technical	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total/Average Wage	<input type="text"/>	<input type="text"/>	<input type="text"/>

What is the anticipated time frame for reaching full employment and the salary goals, per SB-1, from completion of improvement?
Year

	1 yr	2 yrs	3 yrs	4 yrs	5 yrs	> 5
Employment	<input type="text"/>					
Salary	<input type="text"/>					

If greater than five years provide detailed timetable:

Does the company provide benefits to all employees?

Yes

No

If "Yes", explain and list:

Health Insurance	<input type="text"/>	% paid
Life insurance	<input type="text"/>	% paid
Disability	<input type="text"/>	% paid
Childcare	<input type="text"/>	% paid
Vacation	<input type="text"/>	min. # of days
Retirement	<input type="text"/>	% paid
Other	<input type="text"/>	% paid

To be completed by RD Staff.

Is the average wage at or above the Tippecanoe County average? revised 11/2/06

Yes

No

SECTION V HOUSING

This is a request for: Rehabilitation of an existing structure
 New development

List the number and % of household units by income level and bedroom number to be built and maintained in the project.

Income	Units		Units			
	#	%	1 BR / Eff	2 BRS	3 BRS	4 BRS
Low	<input type="text"/>	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Moderate	<input type="text"/>	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Market Rate	<input type="text"/>	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	100%	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

List the projected rents by number of bedrooms.

Bedrooms	Low	Moderate	Market
	Income Rent	Income Rent	Rate Rent
1 / Eff	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are any low or moderate income households being displaced by the project? Yes No
 If "Yes", explain:

SECTION VI IMPACTS & STATUS

Will local firms and suppliers receive preference for this project? Yes No N/A
 If yes, please list:
 If this is a multi-family housing project, is the local market underserved? Yes No
 If yes, please provide a market study or other documentation:

Will any additional public utilities, city services or other infrastructure be required by this project? Yes No
 If "Yes", explain:

Will this project result in any negative impact on the environment? Yes No
 If "Yes", explain and describe the measures to be taken to alleviate it:

 Will any environmental permits be needed? Yes No
 If "Yes" please list and note if they have been obtained:

Has financing for this project been approved? Yes No
 Has any construction begun? Yes No

Attachments (please list and include)