



## APPLICATION FOR RENAISSANCE ZONE PROJECT

Property owners, business owners, developers or investors interested in pursuing a Renaissance Zone project should review the 2019 RZ Plan. The RZ Plan delineates the current geographical boundaries of the program (only certain blocks within the downtown core are included) and provides additional detail on minimum investment requirements and applicable program goals and objectives that must be met.

Application submitted for (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> New Construction                 | <input type="checkbox"/> Commercial Lease   |
| <input type="checkbox"/> Purchase with Major Improvements | <input type="checkbox"/> Rehabilitation: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential |
| <input type="checkbox"/> Primary Residential Purchase     | <input type="checkbox"/> Block Addition   |

Property Owner Information
Name <i>(printed)</i> :
Name <i>(printed)</i> :
Address:

Contact Person Information <i>(if different than owner)</i>
Name <i>(printed)</i> :
Address:

Parcel Information
Address:
Unit Number:
Renaissance Zone Block Number:
Legal Description <i>(attach separate sheet if more space is needed)</i> :
Parcel Number:

- Is this property listed on or a contributing structure to the National Register of Historic Places?    Yes    No  
 Do you intend to apply for a Historic Preservation Tax Credit in conjunction with this project?    Yes    No

Project Information	
Total Project Cost: <small>(Qualified Capital Improvements)</small>	
Current Use of Property:	
Anticipated Use Upon Completion:	
Expected Date of Purchase:	Expected Date of Occupancy:
Estimated Property Tax Benefit: <small>(Over five year exemption period)</small>	Estimated State Income Tax Benefit: <small>(Over five year exemption period)</small>
Current Employees: <small>(Full-time equivalent)</small>	Anticipated Employees: <small>(Full-time equivalent)</small>

Scope of Work

Additional Project Information
--------------------------------

New Construction/Rehabilitation/Purchase with Improvements Only

Current Building Value: (Taxable Improvement Value)	Estimated Building Value Upon Completion: (Taxable Improvement Value)
Building Area Upon Completion (SF):	Number of Stories Upon Completion:

Commercial Lease Only

Lease Area Upon Completion (SF):			
Type of Business:			
<input type="checkbox"/> New business moving to the Renaissance Zone	<input type="checkbox"/> Expanding Business moving to the Renaissance Zone	<input type="checkbox"/> Existing Business Expanding within the Renaissance Zone	<input type="checkbox"/> Continuation of a lease moving from one Renaissance Zone Project to another Renaissance Zone Project

Residential Purchase Only

Will this be your primary place of Residency?:
--

**Acknowledgement** – We hereby acknowledge that we have familiarized ourselves with the rules and regulations to the preparation of this submittal and that the forgoing information is true and complete to the best of our knowledge.

Owner ( <i>Signature</i> ): _____	Date: _____
Joint Owner ( <i>Signature</i> ): _____	Date: _____
Representative ( <i>Signature</i> ): _____	Date: _____

**CONFIDENTIAL INFORMATION**

This application is an open record under NDCC 44-04 and will be available to the public for review. Telephone numbers and e-mail that are provided to the Planning and Development Department for the purpose of communicating with an applicant are exempt from this requirement and are considered to be confidential/non-public information.

This portion of the application must be completed, but it will be kept separate from the rest of the application and the contact information contained herein will not be available to the public for review.

<b>Applicant</b>
Name: _____
Daytime Phone Number: _____ Email: _____

<b>Contact Person/Representative (If Different than Applicant)</b>
Name: _____
Daytime Phone Number: _____ Email: _____

**THE FOLLOWING CHECKLIST MUST BE COMPLETED AND SUBMITTED WITH THE APPLICATION FORM:**

		Submitted	N/A
Renaissance Zone Project	Current photos of property, relevant to project scope and proposed renderings of the proposed project	<input type="checkbox"/>	
	<a href="#">Certificate of Good Standing</a> from the Office of the State Tax Commissioner	<input type="checkbox"/>	
	<a href="#">Business Incentive Agreement</a> from the Department of Commerce for all non-residential projects	<input type="checkbox"/>	<input type="checkbox"/>
	For residential purchases proved a copy of the purchase agreement	<input type="checkbox"/>	<input type="checkbox"/>
	Goals and objectives as outlined in the 2015 Fargo Renaissance Zone Development Plan (Attachment A)	<input type="checkbox"/>	<input type="checkbox"/>

**APPLICATION DEADLINES:**

The Renaissance Zone Authority regularly meets on the Fourth Wednesday of each month at 8:00 am in the in the City Commission Chambers at 225 4<sup>th</sup> Street North, Fargo, ND 58102. For consideration during a monthly meeting:

- **Renaissance Zone** applications are due by 4:30 pm on the **first Wednesday of each month.**

**REQUIREMENTS, POLICIES, AND GUIDELINES:**

The Renaissance Zone is administered according to the following written documents, each of which are available on the City of Fargo’s website.

- **Renaissance Zone Designation**
  - o City of Fargo Renaissance Zone Development Plan
  - o North Dakota Renaissance Zone Program Guidelines

**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. Applicant also certifies that he/she understands all written requirements, policies, and guidelines of the Fargo Renaissance Zone Authority, the City of Fargo, and/or the State of North Dakota governing the use of the procedure or program being applied for:

(Applicant’s Signature)	(Printed Name)	(Date)
-------------------------	----------------	--------

If the property owner(s) and applicant are different, the property owner certifies that he/she has full knowledge of this application and consents to its submission:

(Applicant’s Signature)	(Printed Name)	(Date)
-------------------------	----------------	--------

(Applicant’s Signature)	(Printed Name)	(Date)
-------------------------	----------------	--------

## Goals of the Fargo Renaissance Zone Plan

Is the proposed use of the project consistent with the RZ Plan? As noted in the Renaissance Zone Development Plan the desired land use will contribute to a number of goals:

1. *Grow as a Neighborhood.* How will this project invest in housing to increase the population living Downtown and maintain Downtown's diversity?

2. *Prosper as a Business Center.* How will this project increase the number and type of jobs Downtown (or accessible from Downtown)?

3. *Thrive as a Destination.* How will this project create a unique Downtown experience with an activated riverfront and vibrant sidewalks and public spaces that serve as the backdrop to the community's social life?

4. *Be a Model for Inclusive Growth and Development.* How will this project protect Downtown's diversity and evolve as a model for equitable growth and development?

5. *Complete our Streets.* How will this project make complete streets common place and encourage trips by foot, bicycle, and bus, as well as car?

6. *Park Smart.* How will this project manage parking resources to meet the needs of drivers, while also making room for new development and activity?

7. *Play with Purpose.* Will this project develop a system of connected all-season green spaces designed for people (of a range of ages and interests) and purpose (as infrastructure that absorbs stormwater)?