

MISSOURI DEVELOPMENT FINANCE BOARD

CULTURAL FACILITY REVENUE BOND PROGRAM

GENERAL INFORMATION AND LOAN APPLICATION

MISSOURI DEVELOPMENT FINANCE BOARD 200 MADISON STREET, STE. 1000 P.O. BOX 567 JEFFERSON CITY, MISSOURI 65102 (573) 751-8479

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200 Madison Street, Ste. 1000 P.O. Box 567 Jefferson City, MO 65102 Phone: (573) 751-8479 Fax: (573) 526-4418

CULTURAL FACILITY REVENUE BOND PROGRAM APPLICATION

The undersigned Applicant hereby submits this Project Application and requests the Missouri Development Finance Board (the "Board") to issue and sell its Cultural Facility Revenue Bonds (the "Bonds") for the purpose of financing the Project described below (the "Project").

The undersigned hereby agrees that the submission of this Project Application to the Board, and the Board's adoption of a Resolution indicating an intent to issue the Bonds to provide funds for the Project will not give rise to an obligation by the Board to fund such Project in the amount requested or in any amount. The undersigned further understand and agree that there is no assurance that Bonds will be issued by the Board or that Bond proceeds will be sufficient to fund the Project as hereby requested.

For the Board to consider an application, it must be complete with all required attachments or supporting documentation and received by Board staff on the first Monday of the month in which the applicant wishes to be considered. If this date is a state or federal holiday the application is due on the next business day. Applicants are encouraged to work with Board staff prior to submitting the final application to determine if additional information is needed. If sufficient information is not present, the application will be held until a subsequent meeting.

Preliminary resolutions of intent expire 180 days after the date of adoption by the Board. Final authorizing resolutions expire 90 days after the date of Board adoption. Preliminary resolutions for applications processed to the Final Resolution stage, or, not closed prior to expiration of the Final Resolution can only be extended or reauthorized by the Board at a regularly scheduled meeting. If a resolution has expired and the applicant wishes to proceed in closing, then all information in the application must be updated and the applicant, and sub-applicant if applicable, must certify in writing that no material adverse changes have occurred in their financial condition or any other aspect of the project prior to being represented to the Board.

The Board encourages the involvement of minority and women-owned businesses in all of its programs and purchases.

Date:	A	mount of Bonds Re	quested:	
Proposed Borro	ower (Applicant):			
Legal Name:				
Address:				
City:			Contact:	
Title:	Те	lephone:	Fax:	
E-Mail:		•		

A. THE APPLICANT

1. <u>Business Organization</u>

 Date of Incorporation as Nonprofit Corporation

 Date of 501(c)(3) determination letter from IRS

 (please attach)

 Federal ID No. (FEIN)

 MITS/Missouri ID. No.

Is the Applicant a subsidiary or affiliated directly with any other organization? If so, indicate relationship and name of related organization:

NAICS Classification

NAICS – North American Industry Classification System. The Federal Office of Management and Budget (OMB) adopted the NAICS as the industry classification system used by the statistical agencies of the United States. NAICS replaces the 1987 Standard Industrial Classification (SIC). The NAICS is used for classifying business establishments to assist with gathering data related to measuring productivity, unit labor costs, and the capital intensity of production, employment and other information. Missouri businesses are assigned a NAICS when the company files a "Report to Determine Liability Status" with the Missouri Department of Labor and Industrial Relations, Division of Employment Security to determine Unemployment Tax Liability. Normally, a general business employer becomes liable for the tax and responsible for providing unemployment insurance for its workers when it:

- Pays \$1,500 in wages (cash and in-kind) in a calendar quarter, or
- Has an employee in some portion of a day in each of 20 different weeks, or
- Becomes liable under the Federal Unemployment Tax Act (FUTA) and employs a worker in Missouri, or
- Acquires and continues without interruption substantially all the business of a liable employer.

2.	Officers and Directors: <u>Name</u>	Title

Attach resumes of each, if available. List other principal business affiliations, if any.

3.	Legal Counsel	to the Applicant:

4.

Name: Address:		
Telephone:	Fax:	
Applicant's Principal Bank	<u>cers:</u>	
Name: Address:		
Telephone:	Fax:	
Name: Address:		
Telephone:	Fax:	

Indicate whether any banks have been contacted concerning the issuance of a letter of credit.

5. <u>Applicant Historical Operations:</u>

Provide the date the Applicant's existing business was established and a brief history of the events leading to the current operations.

6. <u>Applicant's Current Operations:</u>

Briefly, describe the Applicant's operations, including description of existing services and facilities.

B. THE PROJECT

1.	Project Description:
	•

Type of Project:

 Construction of new facilities
 Additions or improvements to existing facilities
 Refinancing of existing facilities

Locations of Project Site:

(Street)	(City)	(County)
Legal Description:		
U.S. Congressional District:		

In which state legislative District(s) is the Project located:

House: ______ Senate: ______

Description of the Project, including land, buildings (type and size), improvements, machinery and equipment to be acquired or constructed, the principal use of the facilities once acquired or constructed and the address of the proposed Project: (attach Exhibits if necessary).

Has construction of Project commenced?

Yes _____ No _____

If so, state the date construction commenced, the extent of such construction and the time needed to complete each remaining portion of the Project:

2. <u>Project Costs:</u>

State the costs reasonably necessary for the acquisition of the site and/or construction of the proposed Project together with any machinery and equipment in connection therewith, including any utilities hook-up, access roads, or appurtenant structures.

	Description of Estimated Project Costs	Amount	Cost Financed With Bonds <u>Proceeds</u>
A.	Acquisition of Land and Existing Buildings	\$	\$
В.	Construction Costs:		
	1. Architectural and Engineering	\$	\$
	2. Site Preparation	\$	\$
	3. Materials	\$	\$
	4. Labor	\$	\$
	5. Construction Contracts	\$	\$
	6. Utilities Connection	\$	\$
	7. Paving and Landscaping	\$	\$
С	Renovation Costs	\$	\$
D.	Machinery and Equipment	\$	\$
E.	Furniture and Fixtures	\$	\$
F.	Interest During Construction	. <u>.</u>	
	From To	\$	\$
G	Accounting, Legal, Miscellaneous	\$	\$
H.	Contingency	\$	\$
I.	Working Capital, Moving Costs, etc.	\$	\$
	TOTAL PROJECT COSTS	\$	\$

The Board encourages the involvement of minority and women-owned businesses in all of its programs and purchases. The following disclosure is compiled for information purposes only:

	<u>No. of Firms</u>	<u>Amount \$</u>
Minority Business Enterprise (MBE)		
Women Business Enterprise (WBE)		

Source of Funds:

State amount and sources of financing of all of the Project costs listed above.

Sources	Amount
Bond Proceeds	\$
Other Financing	\$
Capital Campaign	\$
Applicant's Funds	\$
TOTAL	\$

3. <u>Effect of Project on Employment:</u>

- a. Number of temporary jobs (including construction) created as a result of the Project: ______.
- b. Number of new permanent jobs created as a result of the Project:_____.
- c. Number of existing jobs that will be retained as a result of the Project:_____.
- d. If the proposed Project results in the closing of facilities or the reduction of employees at other Missouri sites, indicate the reasons for such closing or reduction and set forth facts upon which the Board may determine that the Project will result in added employment for the State of Missouri and that financing the Project will be in the public interest.

C. 1. <u>Financial Statements:</u>

Attach financial statements for at least the three (3) fiscal years, including a recent statement (less than 60 days old). If pro forma financial statements have been prepared, please submit.

2. <u>Certified Public Accountant:</u>

List the name of the certified public accounting firm(s) which has(have) performed audits of the Applicant's books and records for the past five years.

3. <u>Outstanding Prior Bond Issues:</u>

Has the Applicant (or related persons or organizations) previously received financing from the sale of tax-exempt bonds?

Yes_____ No_____ If yes, give details.

4. <u>Financial Difficulties:</u>

Has the Applicant or any of the management of the Applicant or its affiliates, or any concern with which such management has been connected, ever defaulted on its debt obligations, been involved in bankruptcy, creditor's rights, or receivership proceedings, or involved in criminal proceedings bearing on the handling of financial matters?

_____Yes____No If yes, please give details.

5. <u>Litigation:</u>

Is the Applicant presently involved in any litigation, which would have a material effect on its financial solvency?

_____ Yes_____ No If yes, please give details.

6. <u>Payroll and Employment Data at Location to be financed:</u>

	<u>Current</u>	After the First Year of Project
Annual Payroll		
Number of Employees		

7. <u>Other Information:</u>

Indicate facts which would support the Board's determination that the Project will tend to maintain or provide gainful employment for the people of the State of Missouri; maintain or increase the tax base or the economy of the State; maintain, diversify or expand industry in the State or in any other way will be a benefit to the economy of the State.

D. **CERTIFICATION OF APPLICANT:**

- I certify that I am an authorized representative of the applicant and as such am authorized to make the statement of affirmation contained herein.
- I certify that the applicant does NOT employ illegal aliens and that the applicant has complied with federal law (8 U.S.C. § 1324a) requiring the examination of an appropriate document or documents to verify that an individual is not an unauthorized alien.
- I understand that if the applicant is found to have employed an illegal alien in Missouri and did not, for that employee, examine the document(s) required by federal law, that the applicant shall be ineligible for any state-administered or subsidized tax credit, tax abatement or loan for a period of five years following any such finding.
- I hereby agree to allow representatives of the Department of Economic Development and the Missouri Development Finance Board access to the property and applicable records as may be necessary for the administration of this program.
- I certify under penalties of perjury that the above statements and information contained in the application and attachments are complete, true, and correct to the best of my knowledge and belief.

The undersigned hereby represents and certifies that, to the best knowledge and belief of the undersigned, the Project Application contains no information or date contained herein or in the exhibits or attachments that are false or incorrect and that they are truly descriptive of the property which is intended as the security for the proposed bonds.

A check in the amount of \$_____ representing the application fee is enclosed.

The issuance fee of \$_____ will be due simultaneously with the issuance of the Bonds.

NAME: _____

SIGNATURE: _____

TITLE: _____

Application Fee:	0.10% of the principal amount of the bonds requested (with a minimum of \$500 and a maximum of \$2,500)
Issuance Fee:	0.30% of the principal amount of the bonds issued
	The maximum issuance fee is \$75,000.
	(Please note: For the refunding of bonds that were originally issued by the Board, the Board:(1) will not charge an application fee and(2) will reduce the issuance fee to:
	• 0.165% of the principal amount of the bonds issued up to and including \$25,000,000.
	• 0.066% of the principal amount of bonds issued for that portion that is over \$25,000,000.
	• The maximum refunding issuance fee is \$50,000.)

STATE OF MISSOURI)) ss COUNTY/ CITY OF _____)

On this _____ day of _____, 20___, before me, _____, a Notary Public in and for said state, personally appeared ______, known to me to be the person who executed the Certification and acknowledged and states on his/her oath to me that he/she executed the same for the purposes therein stated.

(SEAL)

Notary Public

My commission expires _____