

**APPLICATION FOR TAX ABATEMENT AND DESIGNATION
OF REINVESTMENT ZONE**

CASS COUNTY TEXAS

FILING INSTRUCTIONS:

This application must be submitted before any construction begins to be eligible for a tax abatement. This filing acknowledges familiarity and assumed conformance with Cass County's "Tax Abatement Guidelines and Criteria".

This application will become a part of any later agreement or contract. There is a one thousand dollar (\$1,000.00) non refundable application fee for each application filed.

Persons who wish to apply for tax abatement must complete this application and return a copy with supporting documents to the Cass County Judge, 604 Texas Highway 8 North, Linden, Texas, 75563.

Property must be secured through a lease or purchase prior to consideration by the court for reinvestment zone

Applicant Information

Applicant Name:

Applicant Address, Phone, and Email:

Applicant's Project Entity:

Type of Business Association:

Corporation/Partnership Proprietorship Other

State of Incorporation

Project Entity Address, Phone, and Email:

Project Entity Contact Person's Name:

Project Entity Contact Person's Address, Phone, and Email:

Project Information

1. Proposed Project or Facility Address, Including Map and Property Description:

2. Brief description of project, facility, and eligible property for which tax abatement is sought:
3. Does this property fall under the designation of an Authorized Facility as defined in the Cass County Guidelines and Criteria?
4. This application is for (choose one): ___New Plant___Expansion___Modernization
5. Please list all of the taxing jurisdictions in which the proposed project or facility is located:
6. Please provide the following information on the Project:
 - a. Initial Year of Development
 - b. Year Project will be Completed and Placed in Service
 - c. For each year prior to Completion and Placement in Service, list the Estimated Taxable Value of Construction Work in Progress (“CWIP”).
 - i. Construction Year 1: Year End CWIP \$ _____
 - ii. Construction Year 2: Year End CWIP \$ _____
 - iii. Construction Year 3: Year End CWIP \$ _____
 - d. For each year after the Project is placed in service, list the Estimated Taxable Value or Range of Taxable Values of the Eligible Property for which Abatement is sought.
 - i. Project Operation Year 1: Year End Taxable Value \$ _____
 - i. Project Operation Year 2: Year End Taxable Value \$ _____
 - i. Project Operation Year 3: Year End Taxable Value \$ _____
 - i. Project Operation Year 4: Year End Taxable Value \$ _____
 - i. Project Operation Year 5: Year End Taxable Value \$ _____
 - i. Project Operation Year 6: Year End Taxable Value \$ _____
 - i. Project Operation Year 7: Year End Taxable Value \$ _____
 - i. Project Operation Year 8: Year End Taxable Value \$ _____
 - i. Project Operation Year 9: Year End Taxable Value \$ _____
 - i. Project Operation Year 10: Year End Taxable Value \$ _____
 - e. Please describe basis to be used for the Eligible Property’s depreciation.
6. Please attach information describing how the Proposed Project or Facility meets the minimum requirement for tax abatement outlined in the Guidelines & Criteria.
7. Please attach information on the following aspects of the proposed project or facility:
 - a. Current Value of Land and Existing Improvements, if any;

- b. Type of Proposed Improvements and Eligible Property;
 - c. Estimated Useful Life of Proposed Improvements and Eligible Property;
 - d. Impact of Proposed Improvements on Existing Jobs;
 - e. Number and Type of New Jobs, if any, to be created by Proposed Improvements;
 - f. Costs to be incurred by Cass County, if any, to provide facilities or services directly resulting from the new improvements;
 - g. Types and Values of Public Improvements, if any, to be made by Applicant Seeking abatement;
8. List impacts on the business opportunities of existing businesses and the attraction of new businesses to the area, if any
9. Please provide a copy of the Project's submittal to the Texas State Comptroller, if applicable.
10. List all Cass County Appraisal District Property Tax Identification Numbers associated with all parcels within which the Project will be located.

I attest that I have reviewed Cass County's Guidelines and Criteria for Granting Tax Abatements in Reinvestment Zones and that the information provided in this application is true and correct to the best of my knowledge.

Applicant Signature