



**CITY OF EL CENTRO**

**COMMUNITY FACILITIES AND ASSESSMENT DISTRICT APPLICATION**

**1. Petitioner/Applicant**

**A. Official Company**

Name: \_\_\_\_\_  
 Any DBA's" \_\_\_\_\_  
 Official Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone: ( ) \_\_\_\_\_  
 Company Headquarters and address of each operating location in California:  
 \_\_\_\_\_  
 \_\_\_\_\_

**B. Business Type:**

Partnership \_\_\_\_\_ Corporation \_\_\_\_\_  
 Sole Proprietorship \_\_\_\_\_ Other (describe) \_\_\_\_\_

Is the proposed owner a subsidiary or affiliated directly or indirectly with any organization? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If so, indicate relationship and name of related organization:

If corporation, indicate state of corporation: \_\_\_\_\_ and  
 Date qualified to do business in California (if incorporated elsewhere): \_\_\_\_\_

**C. Officers:**

	<u>Name and Address</u>	<u>Business Affiliations</u>
President	_____ _____	_____ _____
Vice-President	_____ _____	_____ _____
Finance Secretary	_____ _____	_____ _____
Directors	_____ _____ _____	_____ _____ _____

**D. Equity Owners of 10% or More:**

List name and home address of equity owners of 10% or more. If publicly held, indicate stock exchange traded on. If partnership, list General and Limited Partners and interest owned by each. If trust, list beneficiaries.

<u>Name:</u>	<u>Home Address:</u>	<u>\$ Amount of Equity/ Interest Owned:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name, Business address, and phone number of officer to whom all notices and communications concerning the project should be sent:

\_\_\_\_\_  
\_\_\_\_\_

**E. County of Application:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

**F. Principal Bank(s) of Account:**

Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

**G. Company History:**

a. Description of Development Project completed:

\_\_\_\_\_

b. Any tax exempt financing outstanding:

\_\_\_\_\_

\_\_\_\_\_

**H. Project Size/Location:**

A description, if applicable, of the statewide size and location of the development projects of the Applicant (including related persons and principal users):

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**I. Audited Financial Statements:**

Attach copies of the year-ending Audited Financial Statements for each of the last five (5 years), or for as many years as are available.

1. For public corporations, Form 10K's plus most recent from 10Q.

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**2. Proposed Project:**

**A. Development Concept:** (Narrative Description: including renderings if available).  
Proposed facilities (off-site) to be constructed with Bond Proceeds (describe):

Off-site cost breakdown:

Does applicant now own the site of the proposed facility? \_\_\_\_\_

If not, has applicant entered into an option commitment or other agreement to purchase the land? \_\_\_\_\_

If so, please attach a copy of such agreement.

If project is located within city limits, please identify prior contact with city officials regarding the facility (certification of prior contact required).

Estimated useful life of building equipment, or off-site improvements.

Does the proposed project involve, in whole or in part, any of the following:

Residential real property, sports facilities, commercial property or industrial land development activities? Yes \_\_\_ No \_\_\_

If so, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed commencement date of acquisition or construction of the public facilities:

Estimated date of when facilities will:

Start construction: \_\_\_\_\_

Complete Construction: \_\_\_\_\_

Attach an initial study for purposes of environmental impact.

Will the facilities meet zoning requirements at the proposed location? \_\_\_\_\_

Has the Specific Plan or Tract Map received approval by the City of El Centro Council?

\_\_\_\_\_.

Have construction plans been approved? \_\_\_\_\_

Please list the date, purpose and amount of any of the costs proposed to be financed in connection with the proposed project which have been incurred prior to the date of this application: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please summarize any capital expenditures paid or incurred in City of El Centro within the last three (3) years.

**3. Cost of the Project:**

State the costs reasonably necessary to the acquisition of the site and construction of the proposed project together with any machinery and equipment necessary or convenient in connection therewith, and including any utilities, access roads or apportionment facilities.

**Land Facilities:**

Contract Price	\$ _____
Legal, Filing, Misc.	\$ _____
Fees, permits and/or Taxes	\$ _____
Subtotal	\$ _____

**Architectural and Engineering**

Construction Costs	
Site Preparation	\$ _____
Materials	\$ _____
Construction Contracts	\$ _____
Labor	\$ _____
Utilities Connection	\$ _____
Subtotal	\$ _____

**Interest During Construction**

(From _____ to _____)	\$ _____
Financing, legal miscellaneous	\$ _____
Contingency (if applicable)	\$ _____

<b>TOTAL</b>	<b>\$ _____</b>
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**Note:** Projects costs may not include working capital, other than construction loans. Generally, only costs paid or incurred after application is accepted can be reimbursed out of bond proceeds.

**A. Source of Funds:**

Redevelopment	_____
Tax Increment	_____
Sales Tax Agreement	_____
Development Fees	_____
CFD	_____
Developer	_____
Other	_____

**Please outline your determination of value of the proposed project to be financed. (Attach recent appraisals).**

**B. Public Benefits of Projects:**

Include a description of the public benefits which would accrue from Undertaking the project. (If applicable, information in this section is to be given for both the applicant and all entities that will be principal users of the facilities.)

**C. Publicly Held Companies:**

Copies of the annual report to stock holders for each of the last five (5) years. If applicable, include copies of any registration statements, prospectuses and 1-K's filed with the Securities and Exchange Commission with each of the last five (5) years, and copies of the applicant's last 10Q And most recent 8-K.

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**\*\*\*\*\*IMPORTANT NOTICE TO APPLICANT\*\*\*\*\***

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Approval for financial assistance by City of El Centro is determined by the information presented in this application. Any changes in the status of the proposed project from the facts presented herein and Exhibits attached hereto, could disqualify the project and cause it to be ineligible for financial assistance. In general, commencement of construction or nay award of contract for the final acquisition of the proposed project, prior to formal approval by the City where such construction or acquisition is to be financed by a tax-exempt issue, is likely to result in the application being considered ineligible for approval.

The following information and schedule must be attached as Exhibits to the application:

SCHEDULE A  
Housing Classification

SCHEDULE B  
Debt Service by Housing Types

SCHEDULE C  
Types of Public Facilities to be  
Constructed

SCHEDULE D  
Housing Characteristics

SCHEDULE E  
Appraisal/Market Value

SCHEDULE F  
Proposed Debt Service Schedule

**SCHEDULE A**

\*To be provided by landowners individually or jointly owing more than 25% of land being assessed.

Product Classification By Anticipated Sales Price And Type	Price with Public Financing	Price Without Public Financing	No. of Units to Be Built	Absorption Rate	Current Inventory of Housing Type in Local Area	Shortage of Housing Type Addressed by Project
A _____	\$ _____	\$ _____	_____	_____	_____	_____
B _____	\$ _____	\$ _____	_____	_____	_____	_____
C _____	\$ _____	\$ _____	_____	_____	_____	_____
D _____	\$ _____	\$ _____	_____	_____	_____	_____
E _____	\$ _____	\$ _____	_____	_____	_____	_____

Additional questions:

Are utilities currently available within project boundaries:

- a) gas
- b) electrical
- c) water
- d) sewer

Are additional utility resources required to meet increased demand caused by project?

Are the following public services presently available within or near the project boundaries?

- a) Police
- b) Fire
- c) Schools (Elementary through High School)
- d) Flood Control
- e) Public Works
- f) Hospital

Are public services noted above able to absorb the additional demand caused by the project?

If not, will the increased tax offset the cost of the additional services that are required? Please provide the analysis on which you base your responses.



**EXHIBIT B**

Type of  
Residential  
Construction

Year  
1

Year  
2

Year  
3

Year  
4

Year  
5

Type

Cost

Units

Units

Units

Units

Units

A

---

B

---

C

---

D

---

E

---

Number  
Residential  
Units Sold

A

---

B

---

C

---

D

---

E

---

Annual  
Special Tax  
By Residential  
Unit

A

---

B

---

C

---

D

---

E

---

Anticipated  
Total Debt \$ \_\_\_\_\_

**SCHEDULE C**

**FINANCING SOURCES**

(Principal, Interest and Cost of Issuance)

Type of Public Facility to be Constructed:

Assessment District \_\_\_\_\_

Mello Roos \_\_\_\_\_

Other \_\_\_\_\_

Construction Costs/Year of Construction/Bank Equity District (1915 Act)

\$ _____	20 _____	-20 _____
\$ _____	20 _____	-20 _____
\$ _____	20 _____	-20 _____
\$ _____	20 _____	-20 _____

Additional questions:

Are any of the facilities listed above oversized? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please identify the facility and estimated percentage of costs attributable to oversizing. Also, provide reason and the source of funds for any oversizing.

Please state the reasons for construction of each facility listed.

Are any of the facilities listed urgently needed in the area?

**SCHEDULE D**

- 1) Total Number of Residential Units \_\_\_\_\_
- 2) Total Number of Residents \_\_\_\_\_

A) By Age Group:

1	–	4	_____
5	–	10	_____
19	–	40	_____
41	–	62	_____
62	–	+	_____

3) By the type of home, total household income:

Class or type of residence

Sales price range:

A.	_____	From	_____	To \$	_____
B.	_____	\$	_____	To \$	_____
C.	_____	From	_____	To \$	_____
D.	_____	\$	_____	To \$	_____
E.	_____	From	_____	To \$	_____
		\$	_____		
		From	_____		
		\$	_____		
		From	_____		
		\$	_____		

4) Total additional annual sales tax revenue to be generated y household income:

Class or type of residents:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_

5) Additional annual property tax revenues by class of home:

Class or type of residence/# of units/property tax increment

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_

**SCHEDULE E**

Parcel Number

Current Market Value  
(Assessor's Roll)

Appraised Raw

**SCHEDULE F**

Proposed Debt Service Schedule

\$ \_\_\_\_\_  
 Estimated Side of Bond Issue

Estimated Year	Interest Rate (Assumed)	Estimated Principal	Estimated Interests	Debt Service
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			
20__	%			

- 1) Dollar amount of funded interest \$ \_\_\_\_\_
- 2) Dollar amount of total reserve fund \$ \_\_\_\_\_
- 3) Dollar amount of letter of credit (if any) \$ \_\_\_\_\_
- 4) Dollar amount of discount per thousand \$ \_\_\_\_\_
- 5) If multiple series of bonds are contemplated, provide year of sale of each offering. \$ \_\_\_\_\_
- 6) Projected date of sale and bond date \$ \_\_\_\_\_
- 7) State name of proposed underwriter \$ \_\_\_\_\_

Banking services for paying registrar and authenticating agent must be coordinated in advance with Finance Director (760) 337-4550.