

**HILLSBOROUGH COUNTY
BROWNFIELDS COMMUNITY REDEVELOPMENT PROGRAM
APPLICATION FOR BROWNFIELDS DESIGNATION**

Complete this form to request designation by Hillsborough County as a Brownfield Area. It is important to complete all applicable sections and attach all necessary information. It is required that a Brownfields Preapplication Meeting be held before submitting this application. If you have any questions, concerning completion of this application or wish to schedule a Preapplication Meeting, please call Janet Mueller, 813-276-8303.

PROPERTY INFORMATION

Property Name:

Address:

City:

State:

Zip Code:

Property Size (acres/square feet):

Parcel/Folio Number(s):

Attach map showing location of property.

PROPERTY DESCRIPTION

Briefly describe property (for example, vacant land, unoccupied):

Zoning:

Future Land Use Designation:

Is property located within one or more of the following? (check all that apply)

Orient/Eastlake Brownfields Assessment Pilot Area

Community Redevelopment Area

Enterprise Zone

Empowerment Zone

Located within one-half mile of an existing major street? Yes No

Public Street Access? Yes No

Outside floodplain area? Yes No

Describe all outstanding property taxes due on the property:

APPLICANT INFORMATION

Name:

Address:

City:

State:

Zip Code:

Phone:

Fax:

E-mail:

Interest in Property:

CURRENT PROPERTY OWNER(S) (if different from applicant)

Name:

Address:

City:

State:

Zip Code:

Phone:

Fax:

E-mail:

Legal Status of the Current Property Owner(s):

Individual/Sole Proprietorship

General Partnership

State

Limited Liability Company

Limited Partnership

State

Florida Corporation

Out of State Corporation -----State of Incorporation:

ENVIRONMENTAL STATUS

Brief description of the nature and geographical extent of contamination by hazardous substances and/or pollutants, if known:

Brief description of any previous or current remedial action:

If remediation is needed, will you agree to enter into a Brownfield Site Rehabilitation Agreement with the Florida Department of Environment Protection or authorized designee? Yes No

Attach Phase I or Phase II Environmental Reports, if available.

DEVELOPMENT PLAN

General Description of Redevelopment Plans:

Attach further illustrative or graphic information, as appropriate.

How many new permanent full-time or part-time jobs will the project create after remediation, and what are the job titles?

FINANCIAL RESOURCES

Reasonable assurances must be provided by the applicant that sufficient financial resources are available to the applicant to implement and complete a rehabilitation agreement and redevelopment plan.

Attach a statement, as well as any other appropriate information, outlining the financial resources available to the applicant for rehabilitation and redevelopment.

This statement can include financial resources the applicant anticipates to obtain (private loans, equity and assistance) through designation as a Brownfield Area. In short, describe your general financial plan for your project.

SERVICES TO BE PROVIDED

Have you had a Brownfields Preapplication Meeting? ___Yes ___No

(It is required that applicants have a Preapplication Meeting. Please call Christy Supp, 813-276-8415, for more information.)

In order to better assist you, please check the type of designation you are requesting and the type of assistance/incentives (check all that apply) you are seeking through this designation:

Type of Designation: ___Several parcels ___Single parcel

Type of Assistance/Incentives:

___Regulatory Assistance (for example, aid for meeting government agency permitting requirements)

___Technical Assistance (for example, aid in obtaining grants or loans)

___Grants (gap financing for brownfields remediation)

___Loans (remediation loan funds)

___Tax Credits/Exemptions due to Brownfield Area Designation

___Job Creation Credits due to Brownfield Area Designation

___Job Training Grants due to Brownfield Area Designation

___Other (describe):

Please describe in greater detail the services you would like to receive as a participant in the Brownfields Program (Optional):

What are your goals with respect to the property (for example, sale, redevelopment, or business expansion)?

The contents of this application shall be considered public records of the County. The undersigned affirms that the information contained in this application is true and accurate.

Applicant:

Signature:

Date:

Print/Type Name:

For Office Use Only

Application Received By:

Date:

Application Completeness Review Completed By:

Status of Application: _____ Complete _____ Incomplete (Specify reason[s] below):

Applicant Contacted on:

Date Information Received to Complete Application (if applicable):

Signature of Reviewer:

Date:

BOCC HEARING DATE FOR DESIGNATION OF SITE AS A BROWNFIELD AREA: