

JERSEY-GREENE COUNTY INTERMODAL ENTERPRISE ZONE

*Serving the Cities of Carrollton, Grafton, Jerseyville, Roodhouse and White Hall;
the Villages of Brighton and Godfrey;
and the Counties of Greene and Jersey.*

Project Application Packet



**JERSEY-GREENE
INTERMODAL
ENTERPRISE ZONE**

**The Project Application must be completed and returned to receive Enterprise Zone benefits.
If you have questions in completing these application forms, please contact:**

**Shari Albrecht, Zone Administrator
Jerseyville City Hall
115 E. Prairie Street
Jerseyville, IL 62052
Office Phone: 618/639-5332
Cell Phone: 217/556-8696
Email: sharialbrecht@jedc-il.us**

JERSEY-GREENE COUNTY INTERMODAL ENTERPRISE ZONE

APPLICATION INSTRUCTIONS

Thank you for your interest in the Jersey-Greene County Intermodal Enterprise Zone. The zone was certified on October 16, 2017, expiring on December 31, 2032. The purpose of the Enterprise Zone is to promote economic growth, encourage economic development, create & retain jobs and reduce unemployment in the area.

Enterprise Zone Application Packet Includes:

- *Enterprise Zone Fee Structure
- *Enterprise Zone Local Sales Tax Incentives
- *Enterprise Zone Verification Form
- *Enterprise Business Information Form
- *Local Building Permit Verification Form
- *Certificate for Sales Tax Exemption Form
- *Sub-Contractor Sales Tax Exemption Form

Steps to submit an Enterprise Zone Application:

1. Obtain an Enterprise Zone Application Packet from:
Shari Albrecht
Jersey-Green EZ Administrator
115 E. Prairie Street
Jerseyville, IL 62052
Phone: 217/556-8696
Email: sharialbrecht@jedc-il.us
2. Submit the completed documents to the EZ Administrator for certification.
3. Submit the EZ certified verification form to the appropriate municipality to obtain a building permit.
4. Submit the completed sales tax exemption form and building permit to the EZ Administrator. The EZ application fee is due at that time. Checks can be made payable to: City of Jerseyville, 115 E. Prairie Street, Jerseyville, IL 62052.
5. The EZ Administrator will apply to the Illinois Department of Revenue on your behalf for sales tax exemption certification.
6. The project applicant is responsible to provide copies of the sales tax exemption certificate to retailers to receive the exemption.

Reporting Instructions

Applicants are required to file reports with the Illinois Department of Revenue upon receiving Enterprise Zone incentives. Please visit the website for Frequently Asked Questions regarding the program: <http://www.revenue.state.il.us/Business/Incentives/>

Enterprise Zone Fee Structure

Property Currently within the Enterprise Zone

Application Fee: An application fee of one half percent (0.5%) of the cost of building materials for new construction and renovation projects within the enterprise zone. The fee is due at the time of certification of the project by the enterprise zone administrator and no fee shall exceed \$50,000.

Enterprise Zone Expansion

Application Fee*: \$500 or not to exceed .5% of building material costs

EXPANSION NOTE: The developer is also required to provide a legal description of the proposed property being added to the Enterprise Zone. Please contact the Enterprise Zone Administrator to determine the appropriate legal description.

*Expansion Application Fee Includes: Notice for public hearing, court reporter and dedication of staff time.

**Fees are due when submitting the sales tax exemption form
and/or property tax abatement form.**

Make checks payable to:

City of Jerseyville
115 E. Prairie Street
Jerseyville, IL 62052

Enterprise Zone Local Sales Tax Incentives

SALES TAX DEDUCTION ON BUILDING MATERIALS: Qualifying building materials used in projects in the Enterprise Zone are exempt from sales tax with a certificate from the Illinois Department of Revenue. In the Jersey-Greene County Enterprise Zone, you must have a certificate issued by IDOR prior to the start of construction to qualify for any local incentives.

In order to receive Enterprise Zone benefits, the Zone Administrator, prior to the start of construction, must certify all Enterprise Zone projects. Building permits are required.

**PLEASE REFER TO THE ILLINOIS ENTERPRISE ZONE INCENTIVES
QUESTIONS & ANSWERS BOOKLET FOR MORE INFORMATION &
GUIDELINES OF THE TAX INCENTIVES OFFERED.**

<https://www.illinois.gov/dceo/ExpandRelocate/Incentives/taxassistance/Pages/EnterpriseZone.aspx>

For general information on the program contact:
Illinois Department of Commerce & Economic Opportunity
217/524-0165.

Enterprise Zone Verification Form

Shari Albrecht, Administrator: 115 E. Prairie Street, Jerseyville, IL 62052 • Phone: 217/556-8696
Email: sharialbrecht@jedc-il.us

This form must be submitted to the appropriate municipality to obtain a building permit.

Jersey-Greene County Intermodal Enterprise Zone

PLEASE PRINT

Name of Business Applying for Enterprise Zone Designation:

E-Zone Project Address: _____

E-Zone Property Tax Parcel Number (if assigned): _____

Contact Person: _____ Title: _____

Address: _____ Phone: _____

Email: _____

Business Owner (if different than contact): _____

Type of Business (circle one): Commercial Industrial Manufacturing or Other _____

Product(s) or Service: _____

For Enterprise Zone Administrator Use Only

It is hereby certified that the information above is physically located in the Jersey-Greene Enterprise Zone and that said address is entitled to Enterprise Zone incentives. Local incentive will include:

Enterprise Zone Administrator Signature

Date

FEE STRUCTURE:

- application fee for properties already within the Enterprise Zone are .5% of building material cost (not to exceed \$50,000)
- \$500 application fee to expand the Enterprise Zone boundaries (not to exceed .5% of building material cost)

Fees are due when submitting the sales tax exemption form and/or the property tax abatement form

Make Checks Payable to: City of Jerseyville, 115 E. Prairie Street, Jerseyville, IL 62052

Enterprise Business Information Form

Name of Zone: Jersey-Greene County Intermodal Enterprise Zone

Building Permit #: _____ Date Permit Issued: _____ Grantor: _____

Project Name: _____

Project Street Address: _____

Project City/Zip: _____ County: _____

Business/Company Legal Name: _____

Mailing Address: _____

Contact Name: _____ Title: _____

Email: _____ Phone: _____

FEIN: _____ UIN: _____

Type of Business: Commercial Industrial Retail Service Other (specify): _____

Product or Service: _____

Description of Project Improvements: _____

Est. Project Completion Date: _____

Est. Cost of New Construction: _____

Est. Cost of Rehab/Remodel: _____

Est. Cost of Building Materials: _____

Est. Cost of Site: _____

Est. Cost of Capital Equip. _____

Total Project Cost: _____

NAICS Code: _____ Current Employment: _____

Full-Time Equivalent Jobs to be Created: _____ Jobs Retained: _____

TO THE BEST OF MY KNOWLEDGE THIS IS TRUE AND CORRECT INFORMATION.

Applicant Signature

Date

*Please note this form must be filled out completely for processing.

Local Building Permit Verification Form

NOTE: A COPY OF THE APPROVED BUILDING PERMIT, AND THE PARCEL NUMBER MUST BE SUBMITTED BEFORE EZ PROJECTS CAN BE APPROVED.

Project Street Address: _____

Project City/Zip Code: _____ County: _____

Building Permit #: _____

Grantor: _____

Grantor Contact Name: _____ Title: _____

Grantor Phone Number: _____ Email: _____

Date: _____

Dollar Amount of Project Building Materials: _____

(Must correspond with amount provided on the Certificate for Sales Tax Exemption Form.)

X .005 = \$ _____ Project Application Fee

(To be calculated by the Zone Administrator.)

Project is: _____ **Accepted** _____ **Rejected**

Project Application Fee Paid: _____ **Yes** _____ **No**

Date Paid: _____ Check #: _____

Comments: _____

Signature of Enterprise Zone Administrator

Date

Certificate for Sales Tax Exemption Form

PROJECT# _____ (issued by EZ Administrator)

Each contractor and sub-contractor for a project must apply for a sales tax certificate issued by the Illinois Department of Revenue (IDOR). Each project owner and contractor must complete the information required on this form. All items must be completed on the form for the Enterprise Zone Administrator to apply to the IDOR for your sales tax certificate. Sales tax certificates will be downloaded by you as contractor and used for this project and project address only. Each new project for this address and any other project within the Jersey-Greene County Intermodal Enterprise Zone will require a new application and certificate.

All items must be completed on this form before the Jersey-Greene Intermodal Enterprise Zone Administrator will submit application to the IDOR for a sales exemption certificate to the contractor or project owner for the address declared on this application.

Project/Company Owner Name: _____

Project Address: _____

Contractor Company Name: _____

Contractor Address: _____

Contact Name: _____ Title: _____

Contractor Email Address: _____

Contractor Phone Number: _____

Contractor FEIN/ID#: _____

If you do not have FEIN# you must go to the IDOR website and apply for ID# before application maybe processed.

Contract Amount: \$ _____ Local Sales Tax Rate: _____

Percentage of contract that Consists of building materials qualifying for exemption: _____

Estimated amount of exemption for purchased materials: \$ _____

Contractors Starting Date: _____ Completion Date: _____

NOTE: A CONTRACTOR WHO ILLEGALLY USES THIS CERTIFICATE TO OBTAIN BUILDING MATERIALS FOR A PROJECT AT A LOCATION OTHER THAN THE LOCATION LISTED, WILL FORFEIT ALL LOCAL ENTERPRISE ZONE BENEFITS.

To the best of my knowledge this is true and correct information and I acknowledge that the certificate issued by the IDOR will be for this project and project address only. Any project beyond the amount or scope of work applied for by the owner requires a new application to the zone administrator and a new sales tax certificate from IDOR.

Signature

Date

Sub-Contractor Sales Tax Exemption Form

Project Name: _____

Each sub-contractor for a project must apply for a Sales Tax Exemption Certificate.

The Enterprise Zone Administrator will only apply for certificates for those sub-contractors listed below.

Sub-Contractor Sales Tax Exemption Form may be copied as appropriate to list all information needed.

Sub-Contractor's Business Name: _____ FEIN #: _____

Business Address, City & Zip: _____

Contact Name: _____

Email Address: _____ Phone: _____

Type of Business: _____

Contract Cost of Building Materials

Amount: \$ _____ that qualifies for exemption: \$ _____ Sales Tax %: _____

Sub-Contractor's Business Name: _____ FEIN #: _____

Business Address, City & Zip: _____

Contact Name: _____

Email Address: _____ Phone: _____

Type of Business: _____

Contract Cost of Building Materials

Amount: \$ _____ that qualifies for exemption: \$ _____ Sales Tax %: _____

Sub-Contractor's Business Name: _____ FEIN #: _____

Business Address, City & Zip: _____

Contact Name: _____

Email Address: _____ Phone: _____

Type of Business: _____

Contract Cost of Building Materials

Amount: \$ _____ that qualifies for exemption: \$ _____ Sales Tax %: _____

Sub-Contractor's Business Name: _____ FEIN #: _____

Business Address, City & Zip: _____

Contact Name: _____

Email Address: _____ Phone: _____

Type of Business: _____

Contract Cost of Building Materials

Amount: \$ _____ that qualifies for exemption: \$ _____ Sales Tax %: _____

Sub-Contractor's Business Name: _____ FEIN #: _____

Business Address, City & Zip: _____

Contact Name: _____

Email Address: _____ Phone: _____

Type of Business: _____

Contract Cost of Building Materials

Amount: \$ _____ that qualifies for exemption: \$ _____ Sales Tax %: _____

