

# MACOMB/BUSHNELL ENTERPRISE ZONE PROJECT APPLICATION

The building materials exemption certificate (BMEC) will not be issued until the completed application and application fee has been received by the Enterprise Zone Administrator. Once processed, you will receive your BMEC via email from the Illinois Department of Revenue (this can take up to 72 hours).

## PROJECT INFORMATION

Date: \_\_\_\_\_

Parcel ID #: \_\_\_\_\_ Property Owner/Business: \_\_\_\_\_

FEIN #: \_\_\_\_\_ Project Site Address: \_\_\_\_\_ Macomb, IL 61455

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Project:  Commercial  Industrial

Check all that apply:  Agriculture  Capital Equipment  New Construction  Rehab/Remodeling  Site

Detailed Project Description (Please be more specific than 'remodeling'): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### TOTAL OVERALL PROJECT COSTS

(General Contractor ONLY—total must include all subcontractors as well GC costs)

Total Estimated Cost of Improvements  
(Must equal breakout. Round to nearest dollar) \$ \_\_\_\_\_

Labor \$ \_\_\_\_\_

Materials \$ \_\_\_\_\_

### CONTRACTOR COSTS ONLY

(Your individual portion of costs for the project. Make sure to take out subcontractor costs if you are the general contractor)

Total Estimated Cost of Improvements  
(Must equal breakout. Round to nearest dollar) \$ \_\_\_\_\_

Labor \$ \_\_\_\_\_

Materials \$ \_\_\_\_\_

## CONTRACTOR INFORMATION

All contractors and subcontractors must fill-out individual project applications with their own cost of improvements.

Also, Illinois law requires all contractors to file a BMEC report annually. See page 4 of packet. [www2.illinois.gov/rev/businesses/incentives/pages/default.aspx](http://www2.illinois.gov/rev/businesses/incentives/pages/default.aspx)

Contractor: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

FEIN or Social Security #: \_\_\_\_\_ (must be nine digits) Applicant ID #: \_\_\_\_\_ (must be seven digits)

Are you the General Contractor or Subcontractor for this project?  General Contractor  Subcontractor

Please list the General Contractor or Subcontractor(s) for this project: \_\_\_\_\_

\_\_\_\_\_

Project Representative: \_\_\_\_\_

*Printed Name*

*Signature*

## PROJECT APPLICATION FEE

Applies only to building material costs of \$5K or more.

Building Materials: \$ \_\_\_\_\_ x .5% = \$ \_\_\_\_\_ Check Number: \_\_\_\_\_

*Include Application # on Check*

# MACOMB/BUSHNELL ENTERPRISE ZONE PROJECT APPLICATION

## **ORIGINATING OFFICE**

Mail a copy of this application to the township assessor and county assessor.

Date Application Submitted: \_\_\_\_\_ Date Sent to Zone Administration Office: \_\_\_\_\_

Originating Office:  Bushnell City Hall  Macomb Community Development Office  Zone Administration Office (MAEDCO)

Corresponding Clerk or Community Development Coordinator:

\_\_\_\_\_  
*Printed Name* *Signature*

## **MACOMB COMMUNITY DEVELOPMENT OFFICE ONLY**

Has the building permit been issued for this project?  Yes  No Permit #: \_\_\_\_\_

Permit Type:  Electrical  Plumbing  General  Other: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_ Permit Expiration Date: \_\_\_\_\_

## **ZONE ADMINISTRATION OFFICE USE ONLY**

The following questions pertain to the business/industry where the project is being completed:

Number of Full-time Equivalent (FTE) jobs presently at project? \_\_\_\_\_

Number of FTE jobs to be retained as a result of this project? \_\_\_\_\_