

### **Application Form**

This application form must be completed and signed by the Applicant to initiate the grant application review process by the City of Rochester Hills (the City). To be eligible, the project must be located within one of the designated areas listed on the application.

The completed application form and any supplemental materials must be emailed to planning@rochesterhills.org

Attach copies of proposed preliminary site plan development or concept plans to illustrate how the proposed redevelopment and land uses will be situated on the subject property. Attach a copy of a final unsigned access agreement (See Exhibit 1, example attached) that the Applicant will be willing to execute if approved. Provide electronic copies of all environmental assessment and investigation reports. Please refer to the document Restoration and Remediation Subgrant, Policies and Procedures, City of Rochester Hills for additional information.

Please note that if this application is approved to be funded, the Applicant will be required to execute a Subgrant Agreement (See Exhibit 2, example attached).

For assistance in completing this application form, please contact Sara Roediger at the Rochester Hills Planning and Economic Development Department at 248.841.2573 or by email at roedigers@rochesterhills.org

Attachments
Example Access Agreement
Example Subgrant Agreement



Section 1 Project Information					<u>:</u>			
Project Su	mmary							
Project Name:			City:	Rocheste	r Hills			
No. of Parcels:			Schoo	I District(s):				
	Preliminary Site Plan				Landfill Area A	☐ Landfill Area B		
Parcel	Street address	Parcel ID No.		Improveme	ents	Current Taxable Value		
1						\$		
2						\$		
3						\$		
5						\$		
Current Use	e:		Proposed Future Use:		Ι Ψ			
Current Zor	ning:		Proposed Future Zoning:		ning:			
Amount of	Grant Funding Requested							
Amount of	Orant Funding Requested				Schedule (N	Months Following Signed		
Task	vironmental Assessments and	Amount Re	queste	d		Agreement)		
Monitoring	vironmental Assessments and	\$						
Task 2: Re	emediation, Remedial Actions,	\$						
	and Removal Actions agineered Controls	\$						
	rant Request	\$						
	,	ľ						
Project De								
Detailed Pi	roject Description (include descrip	otion of project and benefits	5):					
Describe a	nticipated schedule, including c	ritical dates to implemen	t eligibl	e activities:				
Why does	the project need incentives? Are	e there excess costs or n	narket o	conditions tha	at make investm	ent difficult?		
Describe t	he status of permits and applicat	ions:						
Describe e	nvironmental activities to be fun	ded under the grant:						



Section 1 Project Information (continued)

Section i P	roject informat	ilon (conti	iliueu)			
Project Details: F	Provide Information Al	out the Type o	of Project			
	Describe Fr	ed I loo				
Manufacturing	<u>Describe End Use</u>		Square Footage		Lease/Sale Price	\$
Commercial/Retail			Square Footage		Lease/Sale Price	\$
Office			Square Footage		Lease/Sale Price	\$
Housing	☐ Rental ☐ For	Sale	Number of Units		Price of Unit	\$
Other	- Norman 1 or	Cuic	<u> I</u>		l	<u> </u>
	III time jobs only, not i	ncludina const	truction iobs), if a	vailable		
End Use		First Year	Second Year	Third Year	Fourth Year	Fifth Year
	Jobs Retained					
	Jobs Created					
Construction Des						
		\$	Construction Jobs			•
If Yes, describe ho	omote	е речеюртет	? □ Walkable C	ommunices?	Sustainable Develo	pment?
Will the project be	LEED Certified, Sustair	able or "Green"	'? □ Yes □ N	lo		
If Yes, describe:						
Other Incentives o	r Overlay Districts to be	included in this	project:			



### **Section 2 Applicant Information**

• •	
Applicant Information	
Company (the Applicant):	Contact Person:
Street Address:	Cell Phone:
City/State/Zip:	Email:
Office Phone:	Fax:
Applicant's Interest in Property: (if Applicant does not own the property requested tasks, is required)	, an executed access agreement with permission to conduct the
Property Owner's Name (if different from Applicant):	Property Owner's Phone:
Property Owner's Address:	Property Owner's Fax:
City/State/Zip:	Property Owner's Email:
Applicants Designated Representative:	Contact Person:
Street Address:	Cell Phone:
City/State/Zip:	Email:
Applicant Brownfield and Grant Experience	
How much experience do key staff who will be working on this project Describe experience with incentives for assessment and remediation.	have with similar brownfield projects in their current positions?
☐ less than 1 year ☐ 1 to 3 years ☐ 3 c	or more years
Describe an example project (or provide attached narrative).	
How many similar types of brownfield grant projects has the Applicant,	and its subcontractors, previously completed?
☐ less than 1 year ☐ 1 to 3 years ☐ 3 c	or more years
Describe an example project (or provide attached narrative).	
Has the Applicant, or its subcontractors, ever had a permit violation or	other violation with EGLE? ☐ Yes ☐ No
If yes, explain (or provide attached narrative):	
Within the last 24 months, has the Applicant, or its subcontractors, has Energy (EGLE) revoked or terminated, or has been determined by EGI	
If yes, explain (or provide attached narrative):	Le de de dinable le manage à grant.
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### **Section 3 Required Attachments**

Required Attachments		Attached?	
Proposed preliminary site plan, development or concept plans.		☐ Yes	□ N/A
A draft written access agreement between the property owner, EGI is required. The agreement must include a commitment from the prand City of Rochester Hills staff or their designated representative the proposed eligible activities.	operty owner that allows EGLE staff	☐ <b>Yes</b> Previous p	□ <b>N/A</b> rovided to the City
(NOTE: An example is attached for your use.)			
Detailed list of eligible costs to be funded by the grant.		□ Yes	□ N/A
Detailed list of other incentives which may be applied for as part of	this project.	☐ Yes	□ N/A
All available reports on environmental investigations and assessme	ents (provide electronically)	☐ <b>Yes</b> Previously	□ <b>N/A</b> submitted to the Ci
If Applicant does not own the properties listed above, an executed to conduct activities at the property.	access agreement with permission	☐ Yes	□ N/A
The undersigned, as a representative of the Applicant contained in documents submitted herewith are true a Applicant and the undersigned.	nd complete to the best know	ledge and	belief of the
contained in documents submitted herewith are true a	nd complete to the best know nt, certifies that the Applicant ncluding those associated wit nended, its administrative rule	ledge and will compl th the Nati es, and the	l belief of the ly with all ural Resources ose statutes
contained in documents submitted herewith are true a Applicant and the undersigned.  The undersigned, as the representative of the Applicant applicable state and federal statutes and regulations, it and Environmental Protection Act, 1994 PA 451, as an	nd complete to the best know nt, certifies that the Applicant ncluding those associated wit nended, its administrative rule	ledge and will compl th the Nati es, and the	l belief of the ly with all ural Resources ose statutes
contained in documents submitted herewith are true a Applicant and the undersigned.  The undersigned, as the representative of the Applicate applicable state and federal statutes and regulations, it and Environmental Protection Act, 1994 PA 451, as an elated to civil rights, equal opportunity, labor standard	nd complete to the best know nt, certifies that the Applicant ncluding those associated wit nended, its administrative rule ls, environmental protection, a	ledge and will compl th the Nati es, and the	l belief of the ly with all ural Resources ose statutes



### Attachment A CONFIDENTIAL INFORMATION

(Information contained on this page will not be published in any Agenda Packet, nor will it made available to any person interested in viewing this file)

#### Section 4 Investment Information

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<b>Project Costs:</b> Include the estimated costs date when tasks in each category will be com	_	ne tables below. Include an estimated
Cost Category	Estimated Costs	Estimated Date Completed
General Costs		
Land Purchase	\$	
Construction Costs (bricks and mortar)	\$	
Equipment and Fixtures	\$	
Soft Costs (professional costs and fees)	\$	
Incentive Category	Estimated Costs	Estimated Date Completed
Eligible Costs		
Environmental Assessments	\$	
BEA/Due Care	\$	
Remediation Planning and Options Analysis	\$	
Remediation, Mitigation, Control	\$	
Removal Actions	\$	
Additional Response Activities	\$	
Vapor Mitigation Systems	\$	
Other Engineered Controls	\$	
Operations and Maintenance Plans (1)	\$	
Removal of Unstable Soils (2)		
Project Management and Oversight of Above	\$	
Other:	\$	
Total Estimated Project Cost	\$	
Requested Incentives	Amount Requested (3)	
Rochester Hills Grant Funding (4)	\$	Attach detailed cost breakdown
Brownfield TIF	\$	Attach detailed cost breakdown
Other Incentives:	\$	Attach detailed cost breakdown
	\$	
	\$	
Total Estimated Incentives	<b>I</b> \$	

#### Footnotes:

- (1) Limited to plan preparation and approval. Does not include operation and maintenance costs.
- (2) Limited to removal of soils. Does not include foundation work or fill.
- (3) Ranges may be provided
   (4) To be eligible, costs must be incurred after execution of the Subgrant Agreement

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For City Use Only						
ELIGIBILITY CRITERIA Date of Review:						
Project is located in designated area	Yes □	,	No □			
Intended future use is consistent with proposed clean-up and EGLE policies (not appliable for assessment only applications)	Yes □	ı	No 🗆	NA 🗆		
Applicant successfully screened on www.SAM.gov	Yes □	ı	No □			
Property has, or has reason to believe it has, historical contamination to soil, groundwater, surface water, sediment or air quality	Yes □		No □			
The project will provide substantive improvements in reducing historical threats to public health or the environment	н□	M 🗆	LO			
The project will provide a potential beneficial effect in the area that would not have occurred without the incentives	н□	M 🗆	LO			
The project incorporates a preference for source control, active remediation, or mitigation beyond what is required for due care obligations	н□	Μ□	LO			
The project will ensure a desirable and cohesive development with the surrounding area, the Master Land Use Plan and zoning requirements (not appliable for assessment only applications)	н□	M 🗆	LO	NA 🗆		
EVALUATION CRITERIA Date of Review:						
Applicants' ability to complete the scope of work and experience with similar projects	н□	М□	LO			
Proximity of the property to sensitive receptor or environmental features	н□	М□	LO			
Amelioration of threats to public health or the environment	н□	М□	LO			
Whether the projects implements best practices or innovative approach to cleanup	н□	М□	LO			
Whether the project substantially supports the key objectives of the Grant	н□	М□	LO			
FUNDING CRITERIA Date of Review:						
Location appropriate to the intended future use	н□	М□	LO			
Job retention, creation and quality	н□	М□	LO			
Demonstrated need for incentives	н□	M 🗆	LO			
Increases taxable value	Η□	М□	L□			
Development ready	Η□	М□	LO			
Is the project leveraging other funding sources?	Η□	М□	L□			