

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). Please be sure to check your spam folder.

PROJECT INFORMATION

EZ Application #: _____ Date: _____

Parcel #: _____ FEIN #: _____

Is this parcel also in the TIF District? Yes; eligible for Sales Tax Exemption only
 No; eligible for Sales Tax Exemption & Property Tax Abatement

Owner/Business: _____

Site Address: _____

Contact: _____ Phone: _____

Email: _____

Type: Commercial Industrial Agriculture New Construction Rehab/Remodeling Site

Detailed Project Description: _____

CONTRACTOR INFORMATION

General Contractor

Sub-Contractor

Company: _____ Contact: _____

Address: _____

Email: _____ Phone: _____

FEIN #: _____ Applicant ID#: _____

Please list sub-contractors, if applicable: _____

GENERAL CONTRACTOR TOTAL CONTRACT COSTS

Includes General & Sub-Contractor costs

Labor Costs _____

Materials Cost + _____

Total Contract Amount = _____

CONTRACTOR COSTS ONLY

Contractor's individual portion of the contract

Labor Costs _____

Materials Cost + _____

Total Contract Amount = _____

PROJECT APPLICATION FEE

Only applies to materials of \$5K or more. Make checks payable to Macomb/Bushnell Enterprise Zone

Materials: _____ X 0.5% = _____ Check #: _____

I, THE CONTRACTOR, BELIEVE THIS APPLICATION WAS FILLED OUT TO THE BEST OF MY KNOWLEDGE AND WILL NOT PURCHASE BUILDING MATERIALS UNTIL I RECEIVE OUR BMEC FROM THE ILLINOIS DEPARTMENT OF REVENUE.

Printed

Signature

ORIGINATING OFFICE

Macomb Zoning Office

Bushnell City Hall

Zone Administrator Office

Date Application Submitted: _____ Sent To Zone Administrator: _____

Sent To Township Assessor: _____ Sent To County Assessor: _____

I, THE CORRESPONDING CLERK OR COMMUNITY DEVELOPMENT DIRECTOR, BELIEVE THIS APPLICATION WAS FILLED OUT TO THE BEST OF MY KNOWLEDGE AND HAS BEEN SENT TO ALL CORRESPONDING PARTIES.

Printed _____

Signature _____

MACOMB ZONING OFFICE ONLY

Has a Permit been issued for this project? Yes No Permit #, If Applicable: _____

Permit Type: Electrical Plumbing General

Other, Explain: _____

Permit Issued Date: _____ Permit Expiration Date: _____

ZONE ADMINISTRATOR OFFICE ONLY

Number of FTE employees prior to project: _____

Number of new FTE employees to be created: _____

Total FTE employees to be retained after project: _____