



Thank you for your application. If you have questions, please contact your IFA Funding Manager. Our office locations are listed at the end of this form.

LOCAL GOVERNMENT APPLICATION

The undersigned unit of local government (the "Applicant") requests that the Illinois Finance Authority extend financing to the applicant for the purchase of property or equipment. This application does not constitute a contract or a commitment to enter into a contract.

Please complete all questions. If not applicable, write N/A.

1. Legal Name of Applicant:

_____		_____	
Name		Address	
_____		_____	
City	State	Zip Code (9 digit)	County
_____		_____	
Contact Person	Title	(____)	Telephone Number

2. Type of Government: Describe Applicant's governing structure, including home rule status, if applicable.

3. Proposed Project Name and Location:

_____		_____	
Name		Address	
_____		_____	
City	State	Zip Code (9 digit)	County
_____		_____	
Contact Person	Title	(____)	Telephone Number

Districts: U.S. Congressional _____ IL House _____ IL Senate _____

4. Type of Financing: (Check One) Bond Lease

5. Amount of Funding Requested: \$ _____

6. **Project Description:** Provide a complete project description including any land acquisition, building construction, renovation, equipment purchases, installation, etc. (attach project estimates). Describe the purpose, nature, need and function of the project and its expected benefits.

7. **Facility Financing:** Does the facility possess all licenses and permits for current operations? No
Yes

If no, please explain.

Is any part of the facility to be used by another public or private entity? No
Yes

If yes, please explain.

Has an environmental study been performed on the site of the subject facility? No
Yes

Please explain if there any environmental risks known to the local government unit?

8. Provide names of architect, engineer and/or general contract, as available.

Architect

Contact Person

(____)_____
Telephone

Engineer/General Contractor

Contact Person

(____)_____
Telephone

9. Project Costs: Please provide a sources and uses of funds statement.

<u>Sources</u>	
IFA Bond/Lease	\$ _____
Bank Financing	\$ _____
Other	\$ _____
TOTAL SOURCES	\$ _____
 <u>Uses</u>	
Land and Site Improvement	\$ _____
Construction/Renovation	\$ _____
Equipment	\$ _____
Working Capital	\$ _____
Cost of Issuance	\$ _____
TOTAL USES	\$ _____

Approximate date funds are needed: _____ (explain)

**10. Federal & State Funding Sources and Contractual Agreements:
Please describe below any Federal or State Funding Sources that the corporation receives:**

Funding Agency	Funding Type	Certification Status	Total Amount Provided (Annually)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Also, please describe any Federal or State Contractual Agreements (i.e. State Contracts):

11. Economic: Describe applicant's geographic size and location, population and wealth level trends, and local economic base.

Population: 1990 _____ 2000 _____

Current Estimate _____ (if census information is not available)

Wealth Levels:

Median Home Value 1990 _____ 2000 _____ 2005 _____

Per Capita Income 1990 _____ 2000 _____ 2005 _____

Economic Base:

	Major Employers	No. of Employees
1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
5)	_____	_____

12. Equalized Asses Valuation: (For previous 5 years)

Summary of Applicant's Assessed Value (AV)

Levy Year	Collection Year	Commercial Assessment	Resident Assessment	Industrial Assessment	Railroad And Farm	Total AV	Equalized Assessed Value
20__	20__	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____
20__	20__	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____
20__	20__	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____
20__	20__	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____
20__	20__	\$_____	\$_____	\$_____	\$_____	\$_____	\$_____

Comment on any decrease in assessed value (e.g., multiplier effect, business relocation, abandoned property).

13. Major Taxpayers: (For most recent available year)

	<u>NAME</u>	<u>BUSINESS</u>	<u>AV</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____
5)	_____	_____	_____

14. Property Tax Rates (per \$100 of EAV), by fund, for the previous five levy years:
Please identify with an (*) all rates which are currently at their legal limit or which are expected to be at their legal limit in the coming year.

	LEVY YEARS				
	Tax Rates by Fund				
	20__	20__	20__	20__	20__
Corporate Fund _____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
TOTAL RATE LEVIED	_____	_____	_____	_____	_____

15. Debt Summary: Summarize all debts obligations outstanding as of the date of application, including leases, installment purchases, short-term borrowings, and long-term debt.

<i>Purpose of Debt</i>	<i>Principal Outstanding As of</i>	<i>Revenues Used For Repayment</i>	<i>General Obligation or Revenue Debt</i>	<i>Retirement Date</i>
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
TOTAL	\$ _____			

16. Legal Debt Margin (as of the date of application, excluding the subject bond/lease obligation request.

a) EQUALIZED Assessed Valuation for 20____ \$ _____

b) Statutory debt limitation (_____% of EAV) \$ _____

c) List applicable outstanding debt below:

<u>Amount</u>	<u>Purpose</u>
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

Subtotal (c) \$ _____

d) Remaining Debt Limit \$ _____

17. Finances: Describe Applicant's current financial condition. Comment on actions being taken to overcome any adverse trends or problems. Describe sources of revenue to be pledged for debt repayment. (Attached additional sheets if necessary).

18. Unissued Debt: Does the local government have any authorized but unissued debt? No
Yes

If yes, please explain.

19. Defaulted Debt: Has the local government unit been delinquent or defaulted on any debt obligation within the last ten years?

No
Yes **If yes, please explain.**

20. **Litigation:** Is there any pending or anticipated litigation against the local governmental unit?
No
Yes **If yes, please explain.**

21. **Contingent Liabilities:** Are there any contingent liabilities not disclosed in the financial statements?
No
Yes If yes, please identify.

22. **Liability Insurance:** Amount of comprehensive, general and auto liability insurance per occurrence.

If application is for a Water and/or Sewer Project, please complete the following

23. Are revenues from the water and sewer systems combined? Yes
No

24. Is the system in compliance with regulatory requirements? Yes
No

25. Is the system under any Federal or State mandate or court order? Yes
No
If yes, please attach a copy of the mandate or court order.

26. Please provide a map or describe the general geographical area of the district or service area:

<u>27. Number of Connections for last five years:</u>	<u>Total Billed Consumption or Volume (gallons):</u>
20____ - _____	20____ - _____
20____ - _____	20____ - _____
20____ - _____	20____ - _____
20____ - _____	20____ - _____
20____ - _____	20____ - _____

Are these numbers expected to increase after completion of the project? Yes
No

The following items constitute a complete application to the Illinois Finance Authority and must be submitted to prevent delay:

- 1. Signed original application form.
- 2. Three years of audited financial statements and current year budget.

Applicant hereby certifies that all information contained above and in exhibits attached hereto are true to his/her best knowledge and belief and are submitted for the purpose of obtaining financial assistance from the Illinois Finance Authority.

Date _____

Applicant _____

By _____

Title _____

Telephone (____) _____

Fax (____) _____

Confidential Information

If any personal or company information provided above is considered private and confidential information, please indicate below.

Thank you for your application

Return completed forms to Illinois Finance Authority

Offices of the Illinois Finance Authority

Chicago	180 N. Stetson Ave, #2555, Chicago, IL 60601	312.651.1300	312.651.1350 fax
Mt. Vernon	2929 Broadway, Suite 7B, Mt. Vernon, IL 62864	618.244.2424	618.244.2433 fax
Peoria	100 S. W. Water St., Peoria, IL 61602	309.495.5959	309.676.7534 fax
Springfield	620 E. Adams St., Third Floor, Springfield, IL 62701	217.782.5792	217.782.3989 fax

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