



Thank you for your application.
 If you have questions, please
 contact an IFA Funding Manager.
 Office locations listed below.

ILLINOIS FINANCE AUTHORITY

APPLICATION FOR QUALIFIED ENERGY CONSERVATION BOND FINANCING (GOVERNMENTAL PROJECTS)

APPLICATION # _____

1. Legal Name of Applicant / Governmental Unit and Contacts: (Attach Sheet if more space required)

 Name Address

 City (Must be in Illinois) Zip Code (9 Digit) County

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

_____ Name	_____ Village President	() _____ Telephone Number	_____ Email Address
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_____ Name	_____ Village Treasurer	() _____ Telephone Number	_____ Email Address
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_____ Name	_____ Village Clerk	() _____ Telephone Number	_____ Email Address
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_____ Name of Village Counsel	_____ Firm	() _____ Telephone Number	_____ Email Address
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_____ CPA for the Village	_____ Firm	() _____ Telephone Number	_____ Email Address
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_____ Name of Village Bond Counsel	_____ Firm	() _____ Telephone Number	_____ Email Address
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2. Type of Government: Describe Applicant's governing structure. Check if, Home Rule _____

3. Proposed Project Name, Location & Project Contact:

 Proposed Name of the Project Street Address, City / Location of Project

 City (Must be in Illinois) Zip Code (9 Digit) Email for Contact Person

 Contact Person / Title Firm Phone

- 4. Type of Bond Financing: (Check One)**
- General Obligation
 - Alternate Revenue (Revenue Supported, Non-Referendum GO)
 - Revenue
 - Private Placement / Bank Direct Purchase

10. Provide Contact information of architect, engineer and/or general contractor, as applicable.

Architect (Company)	Contact Person, Title
()	
Telephone	Email Address
Engineer/General Contractor (Company)	Contact Person, Title
()	
Telephone	Email Address

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

<u>Sources</u>	
IFA Bond Financing	\$ _____
Bank Financing	\$ _____
Other	\$ _____
TOTAL SOURCES	\$ _____
<u>Uses</u>	
Land and Site Improvement	\$ _____
Construction/Renovation	\$ _____
Equipment	\$ _____
Working Capital	\$ _____
Cost of Issuance* (Estimate 5%* of Bond Amount)	\$ _____
TOTAL USES	\$ _____

Approximate date funds are needed _____ (explain)

12. 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):

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

>> Please provide the Debt Service Schedules, as applicable for each obligation

<i>Purpose of Debt</i>	<i>Current Principal Outstanding</i>	<i>Original Amount Borrowed</i>	<i>Specific Revenues Source(s) Used For Repayment</i>	<i>Final Maturity</i>
	\$	\$		/ / 20
	\$	\$		/ / 20
	\$	\$		/ / 20
	\$	\$		/ / 20

TOTAL \$ _____

14. 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).

15. Unissued Debt: Does the local government have any authorized but unissued debt? No Yes
If yes, please explain.

16. 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.

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

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

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

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

Population: 1990: _____ 2000: _____ Current Estimate _____ (if census info is not available)

21. Wealth Levels:

Median Home Value 1990 _____ 2000 _____ 2005 _____

Per Capita Income 1990 _____ 2000 _____ 2005 _____

22. Economic Base:

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

23. Equalized Assessed Valuation (EAV): (For previous 5 years)

Summary of Applicant's Assessed Value (AV)

Levy Year	Collection Year	Fair Market Value	Equalized Assessed Value	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).

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

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

25. 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	_____	_____	_____	_____	_____

26. Legal Debt Margin (as of the date of application, excluding the subject bond financing request.)

- a) EQUALIZED Assessed Valuation for 20__ \$ _____
- b) Statutory debt limitation (_____ % of EAV) \$ _____
- c) List applicable outstanding debt below:

Amount	Purpose / Repayment Source / Pledged Fund(s)
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

Subtotal © \$ _____

d) Remaining Debt Limit \$ _____

27. Applicant's State Revenues:

Please check all State Revenues Applicant *may consider pledging* as additional revenue to secure payment of Bond Issue

State Revenue:	Fiscal Year: (Most Recent Fiscal Year)	Possible Additional Revenue Pledge:
IL State Income Tax	\$ _____	<input type="checkbox"/>
IL State Sales Tax	\$ _____	<input type="checkbox"/>
IL State Use Tax	\$ _____	<input type="checkbox"/>
Personal Property, Replacement Tax	\$ _____	<input type="checkbox"/>
Motor Vehicle Fuel Tax (Restricted Use)	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>

For Water and/or Sewer Project, please complete the following:

28. Are revenues from the water and sewer systems combined? Yes No
- A. Which System Revenue Fund will we pledged to repay the Bonds? **Specify:** _____
- B. Will the Applicant be pledging any additional Revenues (i.e.: State Aid payments, IL State Income, Sales, TIF revenues) to further secure Bond Repayment? **Specify:** _____

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

31. 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.

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

31. <u>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

32. Water and/or sewer rates for last five years:

<u>Year</u>	<u>Water and/or Sewer Rate</u>	<u>Effective Dates</u>
20____ - _____	_____	_____
20____ - _____	_____	_____
20____ - _____	_____	_____
20____ - _____	_____	_____
20____ - _____	_____	_____

Is a rate increase being contemplated? Yes No
If yes, please describe: (New Rate and Effective Date of increase)

<u>New Water and/or Sewer Rate</u>	<u>Effective Date(s)</u>
_____	_____
_____	_____

Have any rate requests been denied? Yes No

33. Current User Mix: _____ % Residential _____ % Commercial (Specify rate if different from Residential)

34. System Load: In gallons per day
Capacity _____ Average _____ Peak Demand _____

35. List the five largest water and/or sewer system users and their annual revenue contributions:

<u>Users</u>	<u>Annual Revenue</u>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____



Required Items:

- 1. **Signed original application form.**
- 2. **Three years of audited financial statements and current year budget.**
- 3. **\$1,500 application fee payable to “Illinois Finance Authority.”**

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 (____) _____

Email _____

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 with respective application fee 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	500 E. Monroe St., Springfield, IL 62701	217.782.5792	217.782.3989 fax

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