

## **APPLICATION INSTRUCTIONS**

Application forms must be completed by applicant and then certified by the Clark County Enterprise Zone Administrator and sales tax certificates issued by Illinois Department of Revenue before you are eligible for sales tax exemption! Each contractor and who is providing materials must provide and or complete the sales tax application form. Do not order or purchase building materials before your sales tax certificates are issued!

### ***Information and items needed to complete applications***

1. *Enterprise Zone Business Name*

2. *Project address*

3. **Sales Tax Certificate Application:** *Information on each contractor or other entity that purchases building materials to be incorporated into real estate within Clark County Enterprise Zone by rehabilitation, remodeling or new construction, sales tax exempt must complete the required form provided to receive the sales tax exemption. You must apply to the Clark County Enterprise Zone Administrator to receive the tax exemption from Illinois Department of Revenue. All information requested on the sales tax exemption application form must be completed! This is required by state law! You may copy the form provided for each contractor or entity whom you want to provide materials tax exemption to be incorporated into the real estate for your project.*

4. *Number of full and part-time employees at project address including construction jobs.*

5. *Starting date & completion date*  
**(The starting date must not be sooner than approval date of application)**

6. *Cost of remodeling, new construction, building materials, capital equipment and site cost and preparation.*

7. *Company FEIN#*

8. *Illinois Unemployment Insurance Number*

9. *NAICS Number (<http://www.naics.com/search.htm>) or your tax preparer*

10. *Correct parcel number*

**Serving Properties of Clark County  
PROJECT APPLICATION**

**PROJECT #** \_\_\_\_\_  
# will be issued by Zone Administrator upon approval

**Please Print**

Enterprise Zone Business Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Owner or Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell#: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Business Owner** (*if different than above*)

Name of Individual or Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell#: \_\_\_\_\_

Email Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial

Product(s) or Service: \_\_\_\_\_

Estimated Date of Project Start: \_\_\_\_\_ Completion: \_\_\_\_\_

Date must not be earlier than cert date

Estimated Cost of Project: **Abatement of real estate taxes will not be given over amount declared. Tax Increment Financing District by state law cannot receive real estate tax abatement.**

1. Remodeling \$ \_\_\_\_\_
2. New Construction Cost \$ \_\_\_\_\_
3. Building Materials Cost \$ \_\_\_\_\_
4. Capital Equipment \$ \_\_\_\_\_
5. Site (purchase and preparation) \$ \_\_\_\_\_

**JOBS:**

Current Number of Full-time Equivalent Jobs \_\_\_\_\_ (Full-time equivalent jobs are calculated by dividing the total number of hours worked by persons at the project site, whether salaried or hourly by 1,820 hours.)

Jobs Retained due to Project \_\_\_\_\_

Jobs Created within two years due to Project \_\_\_\_\_ Construction Jobs at site \_\_\_\_\_

Description of Project: \_\_\_\_\_

Federal Employer Identification Number: \_\_\_\_\_

IL Unemployment Insurance Number: \_\_\_\_\_

NAICS Code Number: \_\_\_\_\_

Does this project involve a move from another location? \_\_\_\_\_

If yes, indicate City and State of previous location: \_\_\_\_\_

**Signature:** \_\_\_\_\_

Project Representative

Title

Date

(To be filled in by Enterprise Zone Administrator)

Received date: \_\_\_\_\_

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

\_\_\_\_\_ Date

\_\_\_\_\_ Date

Project Parcel Number: \_\_\_\_\_

Reply and documents sent: \_\_\_\_\_ Date

By Enterprise Zone Administrator: \_\_\_\_\_

Signature

**PROJECT #** \_\_\_\_\_

Project # will be issued by Zone Administrator

All items must be completed on this form before the **Clark County Enterprise Zone Administrator will submit application to the Illinois Department of Revenue** for a sales tax exemption certificate to the contractor and or project owner for the address declared on this application. Each contractor must have their own issued tax exemption certificate issued by the Department of Revenue.

Project/Company Owner Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Email Address: \_\_\_\_\_

Contractors Phone #: \_\_\_\_\_ Cell# \_\_\_\_\_

Contractor/Owners FEIN#: \_\_\_\_\_

**If you do not have an FEIN#, you must go to the Illinois Department of Revenue website and apply for ID# before this application may be processed.**

Contract Amount: \$ \_\_\_\_\_

Estimated Average Tax Rate: \_\_\_\_\_ %

Percentage of contract that consist of building materials qualifying for exemption: \_\_\_\_\_ %

Estimated amount of exemption for purchased materials: \$ \_\_\_\_\_

Contractors Starting Date: \_\_\_\_\_ & Completion Date: \_\_\_\_\_

**This form must be included with the application project for approval to the Clark County Enterprise Zone Administrator!**

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