

WATERBURY CONNECTICUT

Information Technology Zone Acknowledgement Receipt

I hereby certify that I have the Program Information Brochure from the IT Zone Program Administrator. The program requirements and benefits were explained to me, and I understand that the information conveyed by the Information Technology Zone Program Administrator in no way represents a commitment or contract (expressed or implied) or offer made on the part of the City of Waterbury.

Signed: _____

Print Name: _____

Address: _____

Date: _____

Name of Business: _____
(if applicable)

Naugatuck Valley Development Corporation
156 West Main Street
Waterbury, CT 06702
Phone (203) 756-2719 Fax (203) 756-9077
E-mail: Genovese@NVDC.org



WATERBURY CONNECTICUT

Information Technology Zone Application

To be completed prior to signing of property lease or purchase.

SECTION I

Name of Business: _____

Current Address: _____ Tel # _____

Address of Proposed Activity: _____

Map # _____ Block # _____ Lot # _____

Contact Person: _____ Tel # _____

Owner of Facility: _____ Tel # _____

Type of Facility:

Retail/Office/Other: _____

Commercial: _____

If Vacant Land (Acres): _____ Zoning: _____

SECTION II

EMPLOYMENT

Current # of Employees: _____

Anticipated # Employees After Completion of Move: _____

SECTION III

ESTIMATED VALUE OF PERSONAL PROPERTY-*New to Waterbury's Grand List*

IT Personal Property: \$ _____

Non-IT Personal Property: \$ _____

Total Personal Property: \$ _____

SECTION IV

BUSINESS PROFILE

Start Up Existing Date Est.: _____

NAICS/SIC # _____

Nature of Business: _____

Ownership Type

Corporation LLC Sole Proprietorship Other

Size of Current Location(SF): _____ # of Stories: _____

Lease Rental rate: _____ Term: _____

Own Purchase price: _____ Date: _____

Size of Proposed Location(SF): _____ # of Stories: _____

Lease Rental rate: _____ Term: _____

Own Purchase price: _____ Date: _____

Address of Proposed Location: _____

SECTION V

PROPOSED REHAB/RENOVATIONS

Existing Square Footage: _____

Square Footage after Improvement: _____

Description of Proposed Improvements: _____

Estimated \$ Value of Improvements: _____

Estimated Start and Finish Date of Improvements: _____

SECTION VI

NEW CONSTRUCTION

Size of Real Property Parcel: _____ Est. Value: _____

Size of Structure: _____ Est. Value: _____

Description of Structure: _____

Estimated Start & Finish Date of Construction: _____

I, the undersigned, hereby attest that to the best of my knowledge, the above information is truthful and accurate. I fully understand that the processing of my application is based on; the above information, and therefore, any submission of false information may result in disqualification for benefits.

Signature: _____ Date: _____

Title: _____

For Office Only

Is application currently located in the Zone Yes No

Is applicant relocating into Zone Yes No

Verification: _____

ITZ Administrator

WATERBURY CONNECTICUT

Name of Buisness: _____

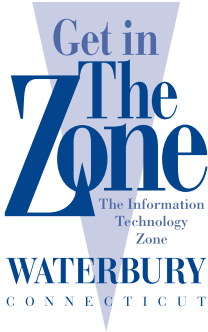
Address: _____

Phone Number: _____

Contact Person: _____

Date: _____

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WATERBURY CONNECTICUT

Information Technology Zone Tax Deferral Application

To be completed after business commences operation in the Zone.

I. APPLICANT INFORMATION

Name of Business: _____

Mailing Address: _____

Property Address: _____

Map # _____ Block # _____ Lot # _____

Phone

Work: _____ Home: _____ Fax: _____

SIC/NAICS number designation: _____

Number of current Employees: _____ Number of New Jobs created in conjunction with this project: _____

Nature of Business: _____

2. GENERAL DESCRIPTION OF IMPROVEMENTS TO PROPERTY: _____

Actual Cost: _____

Rehabilitation: _____ New Construction: _____ Expansion: _____

Date Begun: _____ Date Completed: _____

3. BUILDING INFORMATION

Building Permit Number: _____

Date of Building Permit: _____

Certificate of Occupancy Number: _____

Date of Certificate of Occupancy: _____

Type of Structure

- Frame Masonry Other
 1 Story 2 Story 3 Story 4 Story 5 Stories or more

If new construction, indicate amount of additional/new space to be created: _____

Other Building Information: _____

Applicant hereby applies for participation in the Waterbury Information Technology Zone Program. Applicant agrees to: 1) Perform above work under City of Waterbury, Connecticut Building Code requirements and to obtain all appropriate permits accordingly, 2) Bring subject property up to full Code compliance during the course of these improvements. Applicant hereby authorizes the City of Waterbury, Connecticut or its agent(s) to verify data contained on this application.

Signature of Applicant/Title _____ Print Name _____ Date: _____

WATERBURY CONNECTICUT

Information Technology Zone Annual Renewal Certificate

This form must be filed with the municipal tax assessor by November 1 of each year.

FAILURE TO FILE THIS FORM EACH YEAR BY NOVEMBER 1 WITH THE MUNICIPAL TAX ASSESSOR, WILL, UNDER THE PROVISIONS OF THE CITY OF WATERBURY INFORMATION TECHNOLOGY ZONE PROGRAM GUIDELINES ORDINANCE, CONSTITUTE A WAIVER OF THE TAX ABATEMENT FOR THE REMAINDER OF THE PROGRAM.

INSTRUCTIONS

1. Print or type only. If you attach an additional sheet(s); clearly label section and question numbers.
2. If the occupant of the facility, the owner of the facility, or the owner of the machinery and equipment are different, a separate form must be filed by each. All the above certificate holders must complete Section I and IV.
3. This form must be notarized.

SECTION I

1. Company Name (Name of certificate holder): _____
2. Certificate number: _____ 3. Date issued: _____
4. Property Location No., Street and City or Town: _____
- 4a. Mailing address (if different from 4): _____
5. Name of person responsible for information on this form: _____
6. Title: _____ 7. Phone number: _____
8. As a certificate holder, I am:
 - Both owner and occupant of the facility (if so, complete Section II and III).
 - Owner of the facility (if so, complete Section II and skip Section III).
 - Occupant of the facility (if so, skip Section II but complete Section III).
 - Owner of the machinery and equipment leased to the facility occupant (if so, skip Section II but complete Section III).

SECTION II – REAL PROPERTY

1. Does this property continue to be engaged in a business activity approved by the Information Technology Zone Administrator as qualifying for a Real Property Tax exemption? Yes No
2. Briefly describe the nature of this business activity. _____

3. Has the building covered by this certificate undergone any structural change(s) between October 2 of last year and October 1 of this year?
 Yes No
- 3a. Completion date Month: _____ Year: _____
- 3b. Specify type of structural change(s). _____

- 3c. Total cost: \$ _____

SECTION IV – AFFADAVIT

I certify that I am a beneficiary under the above noted certificate as issued by the City of Waterbury. I hereby apply for a continuation of the property tax abatement for which I am eligible in accordance with the City of Waterbury Information Technology Zone Program Guidelines. I further declare that I am authorized to file this form on behalf of the above named company and that the information contained herein is true and complete to the best of my knowledge and belief.

Signature: _____ Date Signed: _____

Subscribed and sworn to before me this _____ day of _____ 20 _____

Notary Public: _____

My commission expires: _____

ASSESSOR CERTIFICATION

I certify that this prescribed form was filed with the Assessor's Office pursuant to the City of Waterbury Information Technology Zone Program. A tax abatement is hereby granted to the above named company for the Grand List of 20.

Signature: _____

Title: _____ Date: _____

EXEMPTION WILL NOT BE GRANTED UNLESS THIS FORM IS FILED WITH THE ASSESSOR ON OR BEFORE NOVEMBER 1 ANNUALLY AS PRESCRIBED BY THE CITY OF WATERBURY INFORMATION TECHNOLOGY ZONE PROGRAM GUIDELINES.