

I.

CITY OF LAREDO NEIGHBORHOOD EMPOWERMENT ZONE (NEZ) PROGRAM

Deportunity of the state of the

PROJECT CERTIFICATION APPLICATION

,	ion Checklist – please submit the following documentation
1	
	A completed application form
	Non Refundable Application fee – For basic incentives application excluding Tax Abatement, the
	application lee is \$100.00. For multi-family, commercial industrial commercial facilities and in
	ase tax abatement application; 0.5% of the total Capital Investment of the project with the first occurrence of the first occurrence of the project with the first occurrence of the project with the first occurrence of the first occurrence occurre
,	minimum and not to exceed \$1,000.00; for residential tax abatement applications: \$100.00 per bases
	roof of ownership, such as a warranty deed, affidavit of heirship, or a probated will on
o	the control, such as option to buy (A registered warranty deed is required for a tay chotomort
/a	pplication)
A	A reduced 11 x 17 floor plan, site plan, and site elevation with a written detailed project description
/"	that metades a baseline performance standard and a construction time
1 1	A detailed line item budget showing the cost breakdown for the aminut
A	Appraisal Card from Webb County Appraisal District
	Transfer in coo county Appraisal District
he eml	City Ethics Code prohibits certain city officials and employees, as well as their close family
avin ne C uest	ig a financial interest in a contract, purchase or sale with the City. Please refer to Section 2.09 of City Ethics Code (Prohibited Interest in Contracts) for complete information. If you have any ions, please contact the City Attorney's Office to request to speak with the Ethica Complete.
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Ct en	urrently, or within the past twelve (12) months, have you, your spouse, sibling, parent, child or other mily member within the third degree of consanguinity or second degree of affinity served as a City Laredo official or employee? If so, please provide the name of the official or employee, dates of rvice, and relationship to the official or employee. (12) Intentity, or within the past twelve (12) months, has an owner, partner, or employee of a business tity in which you, your spouse, parent, child own 10% or more of the vertice of the ver

issue under Section 2.01 of the City Ethics Code for any city official or employee. If so, please explain.
Answering in the affirmative to any of the questions above will require this application be referred to the City Attorney's Office for review and determination on whether your project would violate any of the applicable provisions of the City of Laredo Code of Ethics.
Applicant's Signature: Date: 12 19 223
WARNING: THIS IS A GOVERNMENT DOCUMENT TEXAS PENAL CODE, SECTION 37.10 SPECIFIC PENALTIES FOR MAKING FALSE ENTRIES OR PROVIDING FALSE INFORMATION IN THIS DOCUMENT
Incomplete applications will not be processed for certification until all required documents shown in the above checklist are submitted within 30 days after the application is received.
You must apply for tax abatement before any building permits are issued for your property and before any improvements are made to your property. It takes 30-60 business days to complete the Tax Abatement Agreement approval process after the issuance of the NEZ Certification depending on the complexity of your project. All building permits must be pulled within the 12 month period that certification was approved, or within 12 month period that the tax abatement was approved or you will be required to reapply for NEZ incentives.
II. Applicant/Agent Information
1. Applicant: 786 KNR STORE LLC
2. Contact Person: NAEEM MUHAMMAD
3. Address: 2819 SPRINGFIELD AVE LAREDO To 78040
Street City State Zip 4. Phone Number: 281-690-7840
5. Fax No.:
6. E-Mail: Nacem, noor 79 agmail. com
7. Agent (if any):

	Str	SPRING FIE		City		St	ate	Zi
9. Phone No.:	13-1	14 212						231
9. Fhone No.: 1	1.5 6	11-010)					
10 777 100	Pa.		~ ^					
10. E-Mail: NA	cem	· Woor	190	-9ma	11.00	u		
				AU:				
		PROJECT EL	IGIBI	LITY				
N								
Please list down the addr	esses and	legal description	s of the	project.	Attach me	etes and b	ounds d	escripti
no address or legal descr	iption is av	vailable. Attach	a map s	howing t	he locatio	n of the p	roject.	
Table 1 Property	Ownership	n						
Address	Zip	Subdivision N	ame	Lot	Block	Rasa	Year	Ton
(Project Location)	Code			No.	No.		ation	Tax Y
819 Spangfield	78040	EASTERN DIO	\$100	5-6	346	\$130,9		200.
,		****					•	
						-		

or each property listed i	n Table 1	mlan 1 1 /1		_				
or each property listed i	n Table 1,	please check the	boxes b	elow to i	ndicate if:			
		,	boxes b	elow to i	ndicate if:			
There are taxes past due	e Yes	No	boxes b	elow to i	ndicate if:			
There are taxes past due There are City liens You (meaning the appli	e Yes Yes icant, devel	No No oper, associates,	ngents r	vrincipale)) have been		o O . 1	C
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There are taxes past due There are City liens You (meaning the appli Demolition where the p	e Yes Yes icant, devel	No No oper, associates, as demolished with Liens Proper ty	ngents, p nin the la Weed	orincipals) ast 5 years) have been s. Yo	n subject to		Order
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There are taxes past due There are City liens You (meaning the appli Demolition where the p	e Yes Yes icant, devel	No Oper, associates, as demolished with Liens Proper ty Taxes	ngents, p nin the la Weed	orincipals) ast 5 years) have been s. Yo	n subject to es No Demolit ion	Paving	Order of Demol
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2.

If then	e are taxes due	or liens against a	ny property in	the City of Lar	redo you <u>ma</u>	<u>y not</u> be eligib	le for NEZ incenti	ves.
3.	Does the prop	osed project confo	orm to the City	of Laredo zon	ing?	Nes	□No	
If		e being taken to en			8	7 103		
4.	Project Type:	Single Family	Multi- Family	X Commercial	Industrial	Community Fa	acilities Mixed-Use	
		Occupied Property						_
5.	Please describ Remod New	e the proposed res eling and Roof, Ad	idential or com	mercial projects the parking	ct and provid	de 11 x 17 dra	wing: 100659.	H
		is commercial, in	dustrial, or mix				of business that is	
7.	Is this new con	struction or rehab	ilitation projec	t? d'i	/ New Constru	ıction	Rehabilitation	ī.
8.	How much is th	ne total developme	nt cost of your	project?	5332,	703.59		
9.	Will the eligible (WEEBCAD) a	e rehabilitation wo ssessed value of th	rk equal to at l e structure dui	east 25% of th	e Webb Cou	inty Appraisal	District Yes No	
•	equipment, a	abilitation includes concing consisting of and/or supplies. To structure during the	t chain-link or so tal eligible rehal	olid material co	nstruction: no	erconol success	- 1 C :	
10. H	How much is the	e total square foot	age of your pro	ject? <u>188</u>	38	_sq. ft.		
11. <u>I</u>	or a single fam umber of resid	ily homeownershi ential units.	p, mixed-use, o	r multi-family	developmen	<u>t project,</u> plea	se fill out the	

Table 3	Number of Residential Units			
	Number of Unites	Percentage		
	U/A			
-				

12. For a commercial, industrial, or community facilities project, indicate square footage of non-residential space.

Commercial	Industrial	Community Facilities
1888	NA	4) (4

13. What is your Capital Investment***for this project? Please use the following table to provide the detail and amount of your Capital Investment (Attached additional sheets if necessary).

Table 4 Itemized Budget of the Project

Item	Amount	Notes
ice Budget attack	100	
•	† 1	

^{***}Capital investment includes only real property improvements such as new facilities and structures, site improvements, facility expansion, and facility modernization. Capital Investment DOES NOT include land acquisition costs and/or any existing improvements, or personal property (such as machinery, equipment, and/or supplies or inventory).

14. For a mixed-use project, please indicate the percentage of all uses in the project in the following table.

Table 5 Percentages of uses in a Mixed Use Project

Type	Square Footage	Percentage
N/H		
TOTAL		

III. INCENTIVES - What incentives are you applying for? **Municipal Property Tax Abatements** 5 years More than 5 years ☐ Apartments Residential Owner Occupied Residential Rental Property Commercial **Development Fee Waivers** Select all that applies All building permit related fees (including Plans Review and Inspection ☐ Plat application fee (including concept plan, preliminary plat, final plat, short form replat) Zoning application fee ☐ Doard of Adjustment Application Fee Demolition Fee ☐ Structure Moving Fee ☐ Street Utility Easement vacation application fee **Impact Fee Waivers** Water (Meter Size____) (No. of meters____) ☐ Transportation IV. Release of City Liens Are there any outstanding city liens pending Weed Liens ☐ Paving Liens ☐ Board up-open structure Liens ☐ Demolition Liens NONE ☐ I do not know **ACKNOWLEDGMENTS**

V.

I hereby certify that the information provided is true and accurate to the best of my knowledge.

I understand that the approval of fee waivers included those waived under expedited fee waiver process, and other incentives shall not be deemed approved of any aspect of the project and that the application must be ratified by the City Council. I understand that I am responsible in obtaining required permits and inspections from the City and in ensuring the project is located in the correct zoning district. If denied by City Council I understand that I am responsible for all fees previously waived.

City Council retains sole authority to approve or deny any tax abatement agreement, permit fees waivers all applications certified under the expedited Building Permit fee waiver

NAEEM MUHAMMAD

PRINTED OR TYPED NAME

AUTHORIZED SIGNATURE

Please email your application to:

Roland H. Lozano, Jr. at rlozano1@ci.laredo.tx.us

Building Development Services Department

1413 Huston Street, Laredo, Texas 78040 P: 956.794.1625 F: 956.795.2998

Electronic version of this form is available on the City of Laredo website. For more information on the NEZ program, please visit our website at www.cityoflaredo.com/building

		For Offic	e Use Only	
Application No		In which NEZ?		Council District
Application Completed Date:		Conform with Zoning?		□ No
Type: Single Family Mu	lti-Family		☐ Industrial ☐ Community Fac	
Applicant is Property Owner □Ye	s □No		Control of the contro	2000 to 100 to 1
WEEBCAD Account No				e noss:
Consistent with the NEZ plan?			Meet Mixed-Use Definition	
Minimum Capital Investment?	☐ Yes	□No	City liens on this property?	□Yes □No
Rehabilitation at or higher than 25%	? 🗆 Yes	□N/A □No		□Yes □N/A □No
Tax current on this property?	□ Yes	□No	en en en	S. COLOURS S THE ST LANDSCORE PERSONNELS
Tax Current on other properties	□ Yes	□No		
	<u>This</u>	Property		Other Properties
Weed Liens	☐ Yes	□ No		☐ Yes ☐N/A ☐ No
Board-up/open structure liens	☐ Yes	□ No		☐ Yes ☐ N/A ☐ No
Demolition liens	☐ Yes	□ No		☐ Yes ☐ N/A ☐ No
Paving liens	☐ Yes	\square No		\square Yes \square N/A \square No
Order of Demolition	□ Yes	\square No		☐ Yes ☐ N/A ☐ No
Tax Department Certified? Yes	s	Date certifica	ation issued:	
Name:			atton issued.	
Referred to:			Received by:	
Building Departme			Staff	
			Sun	