ATTN: Project Manager: Date:	
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For any project seeking assistance through the following agencies, a completed application form must be provided. Applications will be reviewed by EDC staff to determine the best course of action. Those agencies include: Tax Increment Financing Commission, Land Clearance for Redevelopment Authority, Port Authority, Planned Industrial Expansion Authority, and Chapter 353.

# **UNIVERSAL REDEVELOPMENT PROJECT APPLICATION**

## > Application may be submitted electronically

Email completed application to Susan Tumey at stumey@edckc.com. 816-221-2106

If more space is required for response to any question, please attach additional sheet(s).

		LINEOL	RMATION				
	Applicant/Organization Name: Greenleaf Preservation LP						
	Business Address: 3475 Pie			edmont Road Suite 1525 Atlanta, GA 30305			
	Contact Person	n:	Cathy Co	oler			
	E-Mail Address: Phone:		CCC	oler@mrkpartne	ers.com		
			424-999-4582		Fax:		
	Address (if different than business Los Angeles, CA 9004			ess address) 5230 Pacific		Concourse Drive Suite 350	
	Attorney for Applicant: Attorney's Address:			David Calabria			
	Attorney's Phone:		-	561-343-6929			
The F Road	, on the south b	of appro	oximately 1	1 huildings 0 d	which are on land h	pordered on the north by Winner	
ocate	ed on the East s	side of H	2th Street, ardesty Av	and on the Eas	st by Hardesty Aveni East 11th Street and	ue, and the remaining 2 of which are East 12th Street, all in the City of	

	Total Acreage:	5.9					
	Is the project locate	ed in any	incentive areas?	Yes - East Kansas City Urban Renewal Area			
	What is the current	t zoning c	of the project area?	R-0.75			
	What is the propos	ed zoning	g for the project area?	R-0.75			
If a zoning change is pending, cite application number and present status. If application has not become made, briefly describe what change will be needed and plans for submitting application:							
	N/A - Project previously had a section zoned R-1.5 and has been rezoned to R-0.75 to make it						
	legally conformin	ıg.					
	Land Use Plan	ultifamily	affordable Need	l for Modification	[N/A]		
3.	THE PROJECT						
	project, amount of structure(s), expan	f land (pr sion, or tl	description of the proper operty) to be purchased he construction of a new ared or provided through	l, whether the pro facility, residence	ject is a rehabilitat	tion of existing	
	☐ New Construct	ion	■ Rehab/Expansion	Residential	Commercial	☐ Industrial	
A	Single Family/	Duplex	Multifamily	Retail	Mixed Use	Office	
	Please see attach	ned Proje	ect Narrative.				
	Square footage:	08,443	Processing V and Manager				
	No. of dwelling un	its <u>1</u>	95 No. of hotel roo	oms N/A	No. of parking spa	130	
	(Contact the City	Landma	y historical properties as trks Commission at (81 des and/or districts)				

Project is listed on the NPS register.

Please describe any environmental sustainability features of your project including level of LEED certification (if applicable) and/or any energy efficiency/alternative energy features. (Please note if you are interested in receiving free information from EDC staff on how available energy efficiency programs can reduce your overall project costs.) See also: <a href="www.kcpl.com/businessrebates">www.kcpl.com/businessrebates</a>.

Appliances will be Energy Star and low flow toilets will be installed at the project. The Project will not pursue LEED certification and will comply with all applicable state and federal guidelines.

NUMBER OF JOBS		
X Created 5	Average Salary:	\$ 49,000
Retained	Average Salary:	\$
Relocated	Average Salary:	\$
X Construction jobs 57	Average Salary:	\$ 88,400
Projected personal property investment:	\$135,000 (est)	
		<del></del>

Will there be the use of federal or state incentives for this project? Which incentives and how much is being sought?

The Project will utilize federal, state, and historic tax credits to finance the rehabilitation of the existing 195-unit project.

State the need for an incentive (i.e., competitive pressures of the location, need for remediation of blight in proximity to the Project, addition of jobs to a high unemployment area, etc.)

The Project is located in a continually distressed area and in need of extensive repairs and upgrades. The proposed upgrades will remove blight and create a community residents will feel safe in and proud to call home. Due to the need for extensive rehabilitation and the restricted income, the Project will need a tax exemption to support its debt service obligations.

### 4. PROJECT COSTS

Identify the costs reasonably necessary for the acquisition of the site and/or construction of the proposed Project together with any machinery and equipment in connection therewith, including any utilities hook-up, access roads, or appurtenant structures.

Acquisition Price:	\$8,500,000	
Total Development Budget:	\$39,513,605	
Current Assessed Value:	\$3,973,000	
Projected Assessed Value:	TBD	

5.	CONTROL OF PROPERTY
	If the Applicant owns the project site, indicate:
	Date of Purchase
	Sales Price
	If the Applicant has a contract or option to purchase the project site, indicate:  Sales Price \$8,500,000  Date purchase/option contract signed July 27, 2022  Closing/expiration date August 28, 2023
	If the Applicant will lease the project site, indicate:  Legal Name of Owner N/A - site will be purchased.  Owner's Address  Owner of land upon completion of the Project
6.	LAND ACQUISITION  For each Project Area, please provide the following:  A map showing all parcels to be acquired  Addresses and parcel numbers of all parcels to be acquired  Current owners of all parcels to be acquired  Is the use of Eminent Domain anticipated?
7.	SOURCES OF FUNDS:

# 7.

State amount and sources of financing for each Project costs listed above. Please provide commitment letters for any sources received listing terms and conditions.

SOURCE	<u>AMOUNT</u>
Tax Exempt Permanent Loan	<sub>\$</sub> \$15,929,539
Federal Tax Credit Equity	§ 12,810,097
Federal Historic Tax Credit Equity	\$ 3,866,788
State Historic Tax Credit Equity	<b>\$ 4,655,140</b>
Deferred Development Fee	\$ 1,630,941

## 8. DEVELOPMENT TEAM

Identify members of the development team and provide evidence of experience with other development projects.

**Developer - MRK Partners** 

General Contractor - Equitable Housing Construction Group

Property Manager - Sansone Group, LLC

#### 9. FINANCIAL INFORMATION

- A. Budget include a detailed breakdown of all hard and soft costs
- B. Complete list of sources and uses of funds (indicate if you have received tax credits and secured other financing)
- C. 10 year operating pro forma
  - One that shows the project without any incentive assistance
  - One that shows the project with requested incentive

The Pro forma should also include assumptions such as estimated lease rates, revenue assumptions, and expense assumptions.

- D. If seeking TIF assistance, provide projections for PILOTS and EATS.
- E. If seeking TIF or Chapter 100 assistance, provide a personal property depreciation and replacement schedule.
- F. Financing Term Sheet

## 10. BOND FINANCING

Bond Financing is handled on a case-by-case basis.

### 11. REQUIRED ATTACHMENTS

- Attachment A A map showing the boundaries of the project.
- Attachment B A development schedule for the project, including the phasing of development and the locations and improvements to be accomplished in each phase.
- Attachment C Design plans for the project (including site plans & elevations), if available.
- Letter(s) of Support from one or more of the following: councilpersons, mayor, county official, state representative, state senator, local taxing entities, and/or neighborhood organization(s).

# Has the applicant or any parent, subsidiary or business entity otherwise affiliated with the applicant, ever filed a petition for bankruptcy or appointed a receiver? If Yes, the applicant must obtain and file a "Statement of Bankruptcy/Receivership." X No Yes FEES WILL BE CALCULATED AND COLLECTED AT A FUTURE DATE. **CERTIFICATION OF APPLICANT:** The undersigned hereby represents and certifies that to the best of their knowledge and belief this project application contains no information or data that is false, incorrect or misleading. Sydne Garchik NAME: SIGNATURE: Manager TITLE: APPLICATION MAY BE EMAILED TO: stumey@edckc.com or MAIL COMPLETED APPLICATION TO: Economic Development Corporation **Attn: Susan Tumey** 300 Wyandotte, Suite 400

Kansas City, Missouri 64105

13. BANKRUPCY DISCLOSURE:

# FOR INTERNAL USE ONLY

Assistance Project will be evaluated for which financial	l analysis:
☐ TIF ☐ LCRA	☐ PIEA/Chapter 353 ☐ Chapter 100
Comments:	
Advance KC Project Inquiry Meeting Date:  Financial Analysis Review Committee:	Score Card Value: