Tax Increment Financing Fund (TIFF) Informational Page

Thank you for showing interest in our TIF district. Tax Increment Financing Fund (TIFF) is a state authorized, locally driven funding mechanism that allows cities and counties to direct property tax dollars that accrue from new development, within a specifically designated district, to community and economic development activities.

The TIFF District has the ability to assist with projects within the district to help improve the town and remove blight. Only certain projects qualify and will be funded.

"Blighted area" means an area that is conducive to ill health, transmission of disease, infant mortality, juvenile delinquency, and crime, that substantially impairs or arrests the sound growth of the city or its environs, that retards the provision of housing accommodations, or that constitutes an economic or social liability or is detrimental or constitutes a menace to the public health, safety, welfare, and morals in its present condition and use, by reason of:

- (a) the substantial physical dilapidation, deterioration, age obsolescence, or defective construction, material, and arrangement of buildings or improvements, whether residential or nonresidential:
- (b) inadequate provision for ventilation, light, proper sanitary facilities, or open spaces as determined by competent appraisers on the basis of an examination of the building standards of the municipality;
- (c) inappropriate or mixed uses of land or buildings;
- (d) high density of population and overcrowding;
- (e) defective or inadequate street layout;
- (f) faulty lot layout in relation to size, adequacy, accessibility, or usefulness;
- (g) excessive land coverage;
- (h) unsanitary or unsafe conditions;
- (i) deterioration of site;
- (j) diversity of ownership;
- (k) tax or special assessment delinquency exceeding the fair value of the land;
- (I) defective or unusual conditions of title;
- (m) improper subdivision or obsolete platting;
- (n) the existence of conditions that endanger life or property by fire or other causes; or
- (o) any combination of the factors listed in this subsection (2).

TIFF District map
Also available online under Business Tab on our website. www.townofwhitehallmt.com



1. Which 2 conditions does your project represent? (Circle 2 conditions)

- a. (a) the substantial physical dilapidation, deterioration, age obsolescence, or defective construction, material, and arrangement of buildings or improvements, whether residential or nonresidential;
- b. (b) inadequate provision for ventilation, light, proper sanitary facilities, or open spaces as determined by competent appraisers on the basis of an examination of the building standards of the municipality;
- c. (c) inappropriate or mixed uses of land or buildings;
- d. (d) high density of population and overcrowding;
- e. (e) defective or inadequate street layout;
- f. (f) faulty lot layout in relation to size, adequacy, accessibility, or usefulness;
- g. (g) excessive land coverage:
- h. (h) unsanitary or unsafe conditions;
- i. (i) deterioration of site;

- j. (j) diversity of ownership;
- k. (k) tax or special assessment delinquency exceeding the fair value of the land;
- I. (I) defective or unusual conditions of title;
- m. (m) improper subdivision or obsolete platting;
- n. (n) the existence of conditions that endanger life or property by fire or other

		causes				
2.	Please	e explain in detail how your project meets these conditions.				
3.	Applic	cant Information				
	a.	First and Last Name:				
	b.	Physical Address:				
	C.	c. Mailing Address (if Different):				
	d.	d. Phone Number:				
	e.	Email:				
	f.	If the applicant is not an individual doing business under his/her own name, the applicant has the status indicated below and is organized or operating under the laws of: State of Montana (Circle One) i. A Non-Profit or Charitable Institution/ Corporation ii. A Partnership or Corporate Entity iii. District Resident iv. Local Government v. I am Applying as myself, the applicant				
		vi. Other:				

4.

5.

6.

Project a.	ct Information Brief description of project (you will provide a full description later)					
a.	Brief description of project (you will provide a full description later) EX: Business receiving new exterior paint on the building.					
b.	Estimated Start Date of Project:					
C.	Estimated End Date of Project:					
d.	I hereby state that a copy of project plans will be attached to this application					
	when turned into the office. Check the circle below.					
	i. I Agree — ()					
e.	Project Building Address:					
f.	This project area is (Circle One)					
	i. Residential					
	ii. Commercial					
	iii. Industrial					
	iv. Other:					
g.	Is the property owned by the applicant? (Circle One)					
	i. Yes - Skip to Architectural Firm Information					
	ii. No - Fill out Property Owner Information					
Prope	rty Owner Information					
Since	you are not the owner of the property, we must have permission from the owner					
before	the project can be carried out.					
a.	a. Property Owner first and last name:					
b.	Property Owner's Mailing Address:					
C.	c. Property Owner's Phone Number:					
d.	Property Owner's Email Address:					
Archit	tectural Firm Information					
a.	Will you be using an Architectural Firm to assist with your project? (Circle One)					
	i. Yes - Fill out Architectural Firm Information					
	ii. No - Skip to Financial Institution Information					
b.	Architectural Firm Name:					
C.	Phone Number:					
d.	Point of Contact:					
e.	Point of Contact Email:					

7.	Finan	cial Lending Institution Information				
	a.	. Will you be required to take out a loan to fund this project? (Circle One)				
		i. Yes - Fill out Financial Institution Information				
		ii. No - Skip to Project Contractor				
	b.	Financial Lending Institution Name:				
	C.	Phone Number:				
		Point of Contact:				
		Point of Contact Email:				
8.						
	a.	Will you be using a contractor to run your project? (Circle One)				
		i. Yes - Fill out Project Contractor Information				
		ii. No - Skip to Project Cost Analysis				
	b.	Project Contractor Company Name:				
	C.	Phone Number:				
	d.	Point of Contact:				
	e.	Point of Contact Email:				
9.	Projec	ct Cost Analysis				
	a. Estimated TOTAL cost of the Project:					
	b.	Type of Grant being requested (Circle One):				
		i. 1:1 Matching Grant- Meaning I invest the same amount or more as the				
		granting funds I am looking for				
		ii. Non-Profit Grant \$2,000- Only Non-Profits within the district can apply for				
		a non-matching grant of up to \$2,000.				

c. Estimated Grant Funds I am requested based on the TIFF Grant type chosen:

Thank you for completing this application. Your application will be reviewed during the next Whitehall TIFF Board meeting.

The meetings are the second Wednesday of every month. You are not required to attend the meeting, but it is recommended for complex projects, in case the board has questions for you. Once approved, you will receive an approval letter and funds will be dispersed to you as a reimbursement after invoices have been submitted to the board upon project completion. Funds will not be provided in advance and the TIFF board will only release funds after the project has been completed and proper invoices have been received.

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application as it may be necessary in arriving at an application decision. I understand that false or misleading information given in my application or interview(s) may result in rejection of my application.

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Date:

Office Use Only

Signature:

Date Received	Office Personnel Initials	TIFF Meeting Date	Added to the Agenda