



# DOWNTOWN APPLICATION

903 W Main Street, Blue Springs, MO | 816.228.0207 | [DevelopmentSubmittals@bluespringsgov.com](mailto:DevelopmentSubmittals@bluespringsgov.com)

| OFFICE USE ONLY – Updated Jan. 29, 2021 |      |
|---|------|
| CASE #                                  |      |
| ACCT #                                  | CK # |
| RECEIVAL DATE:                          |      |
| DRB MEETING:                            |      |
| HPC MEETING:                            |      |
| MCRC MEETING:                           |      |
| CDBG MEETING:                           |      |
| PLANNER:                                |      |

## PROJECT LOCATION INFORMATION

|  |  |
|--|--|
| Project Name   |  |
| Project Address (Parcel ID if No Address Assigned or Multiple Addresses) | Legal Description (attach as a separate page if too large) |

## APPLICATION (check all that apply)

- |  |   |
|--|---|
| <p><b>REVIEW BOARDS</b></p> <p><input type="checkbox"/> DOWNTOWN REVIEW BOARD</p> <p><input type="checkbox"/> HISTORIC PRESERVATION COMMISSION</p> | <p><b>FINANCIAL ASSISTANCE</b></p> <p><input type="checkbox"/> MCRC TAX ABATEMENT</p> <p><input type="checkbox"/> FAÇADE IMPROVEMENT GRANT (MUST COMPLETE SEPARATE APPLICATION)</p> |
|--|---|

## APPLICANT INFORMATION

|                   |         |       |          |
|-------------------|---------|-------|----------|
| Name of Applicant | Company |       |          |
| Address           | City    | State | Zip Code |
| Email             | Phone   | Fax   |          |

I agree to allow the City of Blue Springs to copy and distribute all project plans, materials, and information and post on the official City of Blue Springs web site as necessary for the project approval process, including public hearings. Additionally, I agree to pay the City of Blue Springs in full all applicable fees and costs required for the project approval process, including all public notifications.

|                     |      |
|---------------------|------|
| Applicant Signature | Date |
|---------------------|------|

## PROPERTY OWNER INFORMATION

|                        |         |       |               |
|------------------------|---------|-------|---------------|
| Name of Property Owner | Company | Phone | Email Address |
| Address                | City    | State | Zip Code      |

I declare, under penalty of perjury, that in applying for this application, I am the owner of this property and that the statements herein and all information herewith submitted are, to the best of my knowledge and belief, true and correct. In the event of corporate ownership, a list of all Directors, Officers, Stockholders of each Corporation owning more than five percent (5%) of any class of stock must be attached. With the signing and submittal of this application, I authorize the City of Blue Springs to enter onto the subject property to collect data and other information in order to accurately prepare reports or other documentation for review by City Council, Boards & Commissions, and City Staff. Additionally, as the legal owner of the above property, I hereby grant authorization to complete the improvements indicated on this application.

|                          |      |
|--------------------------|------|
| Property Owner Signature | Date |
|--------------------------|------|

**REQUIRED DOCUMENTS CHECKLIST FOR ALL APPLICATIONS**

| <b>REQUIREMENT</b>  | <b>DESCRIPTION</b>  | <b>NUMBER</b> |
|---|---|---------------|
| <input type="checkbox"/> <b>Project Information</b>                 | Complete on 1 <sup>st</sup> page of this Application  |               |
| <input type="checkbox"/> <b>Project Description</b>                 | Provide narrative describing the project in space provided below. If necessary, attach additional pages   |               |
| <input type="checkbox"/> <b>Contact Information Sheet</b>           | Complete the contact information on Page 3  |               |
| <input type="checkbox"/> <b>Additional Application Requirements</b> | Complete all applicable information listed on pages 4-6 of this application   |               |
| <input type="checkbox"/> <b>Other Required Information</b>          | See <i>UDC Chapter 402 – Review &amp; Decision-Making Bodies &amp; UDC Chapter 408 – Supplemental Standards</i> for all other required information. |               |

**PROJECT DESCRIPTION:**

# CONTACT INFORMATION FORM

**Name of Project Lead**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Developer**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Engineer**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Architect**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Surveyor**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Landscape Architect**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Attorney**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Other**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**Name of Other**                      **Company**                      **Phone**                      **Email Address**

**Address**    **City**    **State**                      **Zip Code**

**ADDITIONAL APPLICATION REQUIREMENTS FOR  
DOWNTOWN REVIEW BOARD & HISTORIC PRESERVATION COMMISSION**

| TYPE OF DEVELOPMENT  | REQUIREMENT   | FORMAT |
|--|---|--------|
| <i>Only complete applicable sections</i>                                       |   |        |
| <input type="checkbox"/> <b>New Building</b>                                   | <ul style="list-style-type: none"> <li>• A PDF set of scaled drawings showing the proposed site plan, building elevations, and landscape plan (if applicable).                             <ul style="list-style-type: none"> <li>○ Site Plan must show setbacks from right-of-way, property lines, and any other buildings on site.</li> <li>○ Building elevations must label building materials and colors.</li> </ul> </li> <li>• A Site Plan Design Review application may also be required.</li> </ul> | PDF    |
| <input type="checkbox"/> <b>Building Addition</b>                              | <ul style="list-style-type: none"> <li>• A PDF of scaled drawings showing the proposed site plan, building elevations, and landscape plan (if applicable).                             <ul style="list-style-type: none"> <li>○ Site Plan must show setbacks from right-of-way, property lines, and any other buildings on site.</li> <li>○ Building elevations must label building materials and colors.</li> </ul> </li> <li>• A Site Plan Design Review application may also be required.</li> </ul>     | PDF    |
| <input type="checkbox"/> <b>Building Façade Alterations (includes signage)</b> | <ul style="list-style-type: none"> <li>• A PDF set of scaled drawings showing the proposed building elevation changes.                             <ul style="list-style-type: none"> <li>○ Building elevations must label building materials and colors.</li> </ul> </li> <li>• A PDF set of photographs and/or renderings showing the proposed changes (Before &amp; After).</li> <li>• A Site Plan / Design Review application may also be required.</li> </ul>  | PDF    |
| <input type="checkbox"/> <b>New Accessory Structure</b>                        | <ul style="list-style-type: none"> <li>• A PDF plot plan showing the proposed accessory structure.                             <ul style="list-style-type: none"> <li>○ Plot Plan must show location of accessory structure and applicable setbacks.</li> <li>○ Note the dimensions, square footage, height, and material of accessory structure.</li> </ul> </li> <li>• A Building Permit may also be required.</li> </ul>   | PDF    |

**ADDITIONAL APPLICATION REQUIREMENTS FOR  
MCRC TAX ABATEMENT PROGRAM**

|                            |  |                         |        |
|----------------------------|--|-------------------------|--------|
| <b>PROJECT INFORMATION</b> | Address of Property to be Improved: _____  |                         |        |
|                            | Does this applicant own the project building?  |                         | YES NO |
|                            | Has this property received MCRC abatement before?  |                         | YES NO |
|                            | Are you applying for any other abatement programs for this project?  |                         | YES NO |
|                            | Amount of property taxes paid last year: \$ _____  |                         |        |
| <b>BUILDING OCCUPANCY</b>  | What is (are) the existing use (uses) of the building?   |                         |        |
|                            | Existing Business Name   | Business License Number |        |
|                            |  |                         |        |
|                            |  |                         |        |
|                            | Does the proposal result in a change in use of the building? If so, please explain:  |                         | YES NO |
| <b>PROJECT DETAILS</b>     | The project will involve the buildings: <input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Both                          |                         |        |
|                            | Estimated Investment: \$ _____   |                         |        |
|                            | Program Level Requested: <input type="checkbox"/> Level A(1) <input type="checkbox"/> Level A(2) <input type="checkbox"/> Level B <input type="checkbox"/> Level C |                         |        |
| <b>ESTIMATED TIMELINE</b>  | Start Date: _____  | Completion Date: _____  |        |

The information submitted herein is true and accurate to the best of my (our) knowledge. Also, I (we) have read and understand the conditions of the MCRC Tax Abatement Policy and agree to abide by its conditions and guidelines.

X

*Applicant(s) Signature*

*Date*

**MCRC TAX ABATEMENT PROGRAM LEVELS**

|                    | <b>PURPOSE</b>   | <b>INVESTMENT THRESHOLD</b>   | <b>INCENTIVE AMOUNT</b>  | <b>APPLICATION FEE</b> |
|--------------------|--|---|--|------------------------|
| <b>LEVEL A (1)</b> | To attract   | \$1,000,000 minimum – Requires “But for” economic analysis, paid by the applicant | 10 years 100% abatement + 15 years at 100% abatement                                 | \$750                  |
| <b>LEVEL A (2)</b> | To attract   | \$750,000 Minimum   | 10 years 100% abatement + 15 years at 75% abatement                                  | \$750                  |
| <b>LEVEL B</b>     | To attract mid-market investments (market stimulating)           | \$100,000 - \$749,000   | 10 years 100% abatement + 15 years at 50% abatement                                  | \$750                  |
| <b>LEVEL C</b>     | To attract market stabilizing investments (market stabilization) | \$5,000 - \$99,000  | Equal to cost of improvements or 100% abatement for 10 years, whichever occurs first | \$250                  |