ATTN: Project Manager: _Bob Long____





Date: __9/27/2019___

For any project seeking assistance through the following agencies, a completed application form must be provided. Those agencies include: Tax Increment Financing Commission, Land Clearance for Redevelopment Authority, Port Authority, and Planned Industrial Expansion Authority, Chapter 353.

REDEVELOPMENT PROJECT APPLICATION

Application must be submitted electronically.

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

1.	APPLICANT INFORMATION
	Applicant/Organization Name: Centerfield Asset Properties, LLC
	Business Address: 3238 Gillham Road, KCMO 64109
	Contact Person: Paul Migliazzo
	E-Mail Address: Pmig42@gmail.com
	Phone: 816.806.5356 Fax:
	Address (if different than business address)
	Attorney for Applicant: Vince Gualtier
	Attorney's Address: 4600 Madison Ave. Suite 600, KCMO 64112
	Attorney's Phone: 816.410.4600
2	LOCATION OF THE PROJECT
2.	LOCATION OF THE PROJECT
	General Boundaries: 1328 Agnes St. / 1301 Agnes St. / 1320 E 14 th St.
	County: Jackson Council District: 3 rd District
	Total Acreage: 1
	Is the project located in any incentive areas? NO

	What is the current zoning of the project area?	M1 - 5		
	What is the proposed zoning for the project area?			
	If a zoning change is pending, cite application number made, briefly describe what change will be needed N/A			nas not been
	Land Use Plan _Heart of the City Need for Mo	odification	NO	
3.	THE PROJECT			
	Provide a detailed narrative description of the prop- project, amount of land (property) to be purchased structure(s), expansion, or the construction of a new services are to be manufactured or provided through	d, whether the prove facility, residence	ject is a rehabilita	tion of existing
>	☐ New Construction X Rehab/Expansion	Residential	X Commercial	Industrial
>	☐ Single Family/Duplex ☐ Multifamily	Retail	X Mixed Use	Office
	We are planning to rehab the existing building for t	ise as affordable A	rtist Studio Space.	Included with
	the studios would be some meeting and gallery space	ce.		
	Square footage:40,000			
	No. of dwelling units No. of hotel room	oms N/A	No. of parking spa	nces <u>75</u>
	List any nationally or locally historical properties at (Contact the City Landmarks Commission at (8) national historical properties and/or districts) N/A	16) 513-2902 for		
	NUMBER OF JOBS			
	Created 2 Av	verage Salary:\$	12,000	
	Retained N/A Av	verage Salary: _\$		
	Relocated N/A Av	verage Salary:\$		
	Construction jobs 10 Av	verage Salary: \$_\$	Hourly	

	Projected real property investment. \$220,000		
	Projected personal property investment. \$250,000		
	Will there be the use of federal or state incentives for this project? Which incentives and how much is being sought?		
	No		
	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.)		
	Blighted property in great need for rehab. A market shortage of affordable studio space in the		
	Community. Injection of positive activity in an area in need of that very thing.		
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.		
	Fair Market Value of Land: \$220,000		
	Fair Market Value of Improvement \$250,000		
	Projected Assessed Value of the Land & Improvements Upon Completion: \$500,000		
	<u> </u>		
5.	CONTROL OF PROPERTY		
	If the Applicant owns the project site, indicate:		
	Date of Purchase 9/1/2019		
	Sales Price <u>\$220.000</u>		
	If the Applicant has a contract or option to purchase the project site, indicate:		
	Sales Price		
	Date purchase/option contract signed		
	Closing/expiration date		

	If the Applicant will lease the project site, indicate:	
	Legal Name of Owner	
	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 	
	(See Bottom of Form)	
	 Current owners of all parcels to be acquired 	
	Is the use of Eminent Domain anticipated? NO	
7.	SOURCES OF FUNDS:	
	State amount and sources of financing for each Project costs listed letters for any sources received listing terms and conditions.	above. Please provide commitment
	SOURCE	<u>AMOUNT</u>
	Centerfield Asset Properties, LLC	\$250,000
		Φ.
8.	DEVELOPMENT TEAM	
	Identify members of the development team and provide evidence o projects.	f experience with other development
	Paul Migliazzo – Owner and Contractor / Davin Watne – Director U	JMKC Gallery of Art,
	Professor UMKC / John Migliazzo – Owner / Matt Anthony - Own	er

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.

N/A

10. BOND FINANCING

Bond Financing is handled on a case-by-case basis. N/A

11. REQUIRED ATTACHMENTS

Attachment A A map showing the boundaries of the project.

 \triangleright 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.

12. CERTIFICATION OF APPLICANT:

The undersigned hereby represents and certifies that to the best knowledge and belief of the undersigned, this project application contains no information or data, contained herein or in the attachments, that is false or incorrect, and that it is truly descriptive of the property for which this application is being made.

NAME:	Paul Migliazzo
SIGNATURE:	
TITLE:	Managing Partner, Centerfield Asset Properties, LLC

RETURN COMPLETED APPLICATION AND NON-REFUNDABLE APPLICATION FEE TO:

Economic Development Corporation 1100 Walnut, Suite 1700 Kansas City, Missouri 64106



FOR INTERNAL USE ONLY

Assistance Project will be evaluated for with financial analysis:
X LCRA
☐ PIEA/Chapter 353
☐ Chapter 100
Comments:
Advance KC Project Inquiry Meeting Date:
Score Card No.
Financial Analysis Review Committee:
6. Parcel ID: 28-330-14-01-00-0-000 Parcel Address: 1328 Agnes Ave, KCMO 64127
Parcel ID: 28-330-13-05-00-0-000 Parcel Address: 1301 Agnes Ave, KCMO 64127
Parcel ID: 28-330-13-01-00-0-000 Parcel Address: 3020 E 14 th St., KCMO 64127
Owners Info Centerfield Asset Properties, LLC 3238 Gillham Rd, KCMO 64109