

**Oregon Enterprise Zone Certification Application
Long-Term Rural Tax Incentive**

ORS 285C.400–285C.420

• Complete this form and submit to the local enterprise zone manager and the county assessor **before** breaking ground or beginning work at the site.

Eligible location (see #3 on the back)

Rural enterprise zone	County
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Applicant

Name of business firm		Phone ()	
Mailing address	City	State	ZIP code
Location of property (street address if different from above)	City	State	ZIP code
Map and tax lot number of site	Contact person	Title	

Defining the facility

Description of proposed operations and facility: (attach additional pages)

Facility property or improvements to be purchased, constructed, or installed:

Type of property		Square footage/acreage/ number of units or items	Estimated cost
Real property	Buildings, structures and land		\$
	Additions/modifications to existing buildings and structures		\$
	Machinery and equipment attached to the building		\$
Personal property	Machinery and equipment that is readily movable		\$
	Other tangible personal property		\$
Total estimated cost of new investment			\$
Assessed value of all property currently at the site of the proposed facility/investment (not subject to the exemption)		To be acquired by applicant	\$
		Applicant already owns/leases	\$

Construction, hiring, and commencing operations:

- Construction is expected to begin..... _____
- Hiring is expected to begin (month/year) _____
- Facility is expected to be first placed in service/operations beginning (month/year) _____
- Final construction of facility property is expected to be completed (month/year) _____
- Hiring is expected to be completed (month/year) _____
- Estimated total of full-time employees to be hired by the firm for new facility..... _____

Existing employment

Annual average number of employees working at the facility _____ . (This can serve as base number subject to adjustments and stipulation in written agreement with the zone sponsor— see second commitment check box below).

Commitments by applicant/business firm

All must be checked below to be certified:

- By the end of the calendar year in which the facility is placed in service, the total cost of property and improvements (including what is newly acquired but not exemptible) will equal or exceed: (a) an amount equal to 1% or 0.5% of the value of all nonexempt taxable property in the county, up to but not more than \$25 or \$12.5 million, or (b) \$200 million—relative to the facility location and corresponding minimum for new hiring. See OAR 123-690-4000.
- Within the applicable time frame (usually by the third year after the year in which operation of the facility begins), at least 10, 35, 50, or 75 new employees (whichever applies), who each work more than 32 hours per week (not equivalents), will have been hired and will then be maintained by the firm to work at the facility (temporary and seasonal workers don't qualify) in addition to the base number of existing full-time firm employees (if any) as stipulated in written agreement with the zone sponsor. See OAR 123-690-4200.
- Not later than the fifth year after the year in which operation of the facility begins and for the remainder of the exemption period, the average of annualized compensation (with benefits) for all employees at the facility will be equal to or greater than 130% or 150% of the county average annual wage as most recently available and final from the Employment Department at the time that this requirement is initially met, and from that point forward, the average wage of all facility employees in each year of exemption will also equal or exceed the most recently available county average wage at that time. See OAR 123-690-4600 and 123-690-5000.
- All additional requirements or conditions contained in the written agreement with the zone sponsor will be satisfied. See OAR 123-690-2000.
- Information and appropriate verification, including, but not limited to, actual levels of investment cost, employment, payroll, etc., that pertain to the above commitments will be presented in writing to the local zone manager and county assessor, when each is initially satisfied, on or before the mandatory time as noted above or as contained in applicable law and rules, or otherwise upon request by state or local officials. See OAR 123-690-5200.

Declaration

I declare under penalties of false swearing [ORS 305.990(4)] that I have examined this document and attachments, and to the best of my knowledge they are true, correct, and complete. If any information changes I will notify the enterprise zone manager and the county assessor and submit appropriate written amendments. I understand that my business firm will receive the property tax exemption for property in the enterprise zone, only if the relevant requirements are satisfied and maintained, and if my firm complies with all local, state, and federal laws that are applicable to my business.

Signature of authorized representative of business firm

Date

X

Regular property tax returns must still be filed.

Approval

To be filled in by the local zone manager and the county assessor after the above commitments are completed.

1	The board of county commissioners adopted a resolution approving the property tax exemption for the facility. (Attach a copy of the resolution and indicate the date of adoption in the box to the right.)	Date
	The city council adopted a resolution approving the property tax exemption for the facility, if it is located within corporate limits. (Attach a copy of the resolution and indicate the date of adoption in the box to the right.)	Date
2	The business firm has entered into a common written agreement with all of the city, port, or county governments that sponsor the enterprise zone, including co-sponsors in addition to those adopting resolutions in #1 above. (Attach a copy of the agreement and indicate the date the agreement was concluded in the box to the right.)	Date
3	At the time the written agreement in #2 above was executed, the facility was located in an existing rural enterprise zone and in a county with chronically low income or unemployment or that meets definition of a qualified rural county. (Attach confirmation from Oregon Business Development Department and indicate the date of the letter in the box to the right.)	Date
Signature of local enterprise zone manager		Date
X		
Signature of county assessor		Date
X		
Zone manager/County assessor: After signing, send copies of this form and all attachments to: (1) Business firm; (2) Oregon Department of Revenue; (3) Oregon Business Development Department		