

## City of Phoenix Development Assistance Application Questionnaire

APPLICANT NAME			
Applicant Name:			
AUTHORIZED REPRESENTATIVE CONTACT INFORMATION			
Authorized Representative Name:			
Title:			
Phone:		E-mail:	
Address:			
City:		State:	Zip Code:
PARCEL INFORMATION			
Parcel Address:			
Gross Acreage:		Assessor's Parcel Number(s):	
Are there any existing structures on the parcel?			
Are there any existing structures on the parcel that are eligible for historic designation?			
PROPOSED PROJECT INFORMATION			
Total Gross Square Footage (SF):			
1 Story Office SF:	Hotel/Motel SF:	Residential SF:	
2-7 Story Office SF:	Parking Garage/Desk SF:	Warehouse/Industrial SF:	
8+ Story Office SF:	Retail SF:	Other (Specify) SF:	
Number of Buildings:	Number of Hotel Rooms:	Number of Parking Spaces:	
Number of Rental Units:	Residential Density (units/acre):		
Affordable Units:	Workforce Units:	Market Rate Units:	
Estimated Value of Project: \$			
ESTIMATED PROJECT TIMELINE			
Target Construction Start Date:			
Target Construction Completion Date:			
CONTRACTING ENTITY INFORMATION			
Contracting Entity Name:			
Organization Type:			
Corporation?	Other Non-Profit?	Other?	
Government Entity?	Partnership?	Other Description:	
Non-Profit 501(c)(3)?	Sole Proprietorship?		
Provide a complete list of members, partners, or officers (collectively, "principals") of the Contracting Entity.			
LEGAL INFORMATION			
1. In the past 10 years, has the applicant, or any of its principals or its principals' affiliates filed a petition in bankruptcy court or had involuntary proceedings filed in bankruptcy court? If "Yes," provide date, case name, case number, venue of the proceeding, and the status of each proceeding. Yes ( ) No ( )			
2. Has the applicant or any of its principals or its principals' affiliates been declared to be in default under any obligation to or contract with the City? If "Yes," please provide details concerning the nature of the default, including the City contract number. Yes ( ) No ( )			
3. Has the applicant or any of its principals or its principals' affiliates currently involved in any litigation or claims against the City? If "Yes," provide details about such proceedings. Yes ( ) No ( )			
4. Has the applicant or any of its principals or its principals' affiliates' contracts been terminated prior to their expiration terms, voluntarily or involuntarily, within the last 10 years? If "Yes," provide name, location, and date of the contract(s). Yes ( ) No ( )			
5. Has the applicant, or any corporation or other entity that has, directly or indirectly, a controlling interest in the applicant, or any subsidiary of the applicant or other entity in which the applicant has a controlling interest			

or any of the applicant's principals, officers, or directors ever been barred from bidding on federal, state, or local government contracts? If "Yes," provide the current status of such suspension or debarment proceedings.  
 Yes ( ) No ( )

**ASSURANCES**

The undersigned applicant acknowledges and states under penalty of perjury, as follows:

1. The City is relying on applicant's submitted information and the representation that the applicant has the capability to successfully undertake and complete the responsibilities and obligations submitted in its application.
2. The City has the right to make any further inquiry it deems appropriate to substantiate or supplement information supplied by the applicant
3. Any materials submitted, including this form, are part of the public record and applicant consents to the release and reproduction of these materials.
4. Should this application be approved by the Development Assistance Review Panel, the contracting entity must be authorized to transact business in Arizona before any business terms will be presented to City Council for approval.
5. The City reserves the right to reject any application.
6. All costs incurred by the applicant in connection to the application shall be borne solely by the applicant.
7. Applicant is authorized to submit application on behalf of the parcel owner.
8. To the best of the applicant's knowledge, the information provided in its application is true and correct and neither the undersigned applicant nor any partner, corporate officer, or managing employee has ever been convicted of a felony or crime involving moral turpitude.

**APPLICANT SIGNATURE**

Signature:  
  
Title:

Date:

**\*\*\*STAFF USE ONLY\*\*\***

Application #:  
If complete, Review Panel date/time:

Date Received:  
If not complete, date rejected: