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Tax Increment Financing Plan Reporting Form

This form is used to report a TIF Plan modification to the OSA.

Important Information for Completing SAFES Forms

The OSA has become aware of an issue affecting some reporting forms that are downloaded from the State Auditor's Form Entry System (SAFES), which could include this form.

Please press the Ctrl, Alt, and F9 keys at the same time to ensure that all calculations on your form are correct. Pressing these keys at the same time forces the form to recalculate and will resolve the issue. Please do this when you first open the form and again just before submitting the form, at a minimum.

Please feel free to contact us at safes@osa.state.mn.us with any questions.

What the red messages indicate

The red messages in the right margin of the form indicate that data must be entered or corrected before the reporting form can be submitted. Once the data has been entered or corrected, the red message will no longer be displayed.

The table below accurately reflects the number of red messages currently on your form. As you complete the form, refer to this table to see the number of red messages remaining to be filled/corrected before you can submit the form.

| Red Messages Remaining | |
|------------------------|--|
| 10 | |
| 1 | |
| 11 | |
| | Red Messages Remaining 10 1 1 11 |

Detailed instructions for completing this form

Detailed instructions on how to complete this form are available by clicking the link below.

CLICK HERE for detailed reporting instructions

Statements of Position on TIF topics are available for reference

The Office of the State Auditor prepares Statements of Position to provide an educational resource to local governments, auditors and the public. Statements of Position are not legal advice and should not be relied upon in lieu of legal advice.

CLICK HERE for a list of all TIF Statements of Position

Saving your files

Use the SAVE AS command and choose the location to save your files on your computer. Otherwise, they will be saved to a temporary location, making them difficult to locate when you are ready to upload.

Do you have additional information?

A comment box is available at the end of the reporting form. Please use the comment box as needed to share information that may be pertinent to your reporting form. If your comment exceeds the space available on the reporting form, you may email the TIF Division to share the information.

Wobegone EDA - TIF 1-1 - TIF Plan Collection Form - Modified Plan

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Tax Increment Financing Plan Collection Form - Modified Plan

District Information

| 1 | TIF District Name: | TIF 1-1 | |
|----|---|-------------------------------|--------------------|
| 2 | Development Authority: | Wobegone EDA | |
| 3 | County Where TIF District is Located: | | 3a Multiple? No |
| 4 | County Identification Number, if any: | | |
| 5 | Municipality Approving TIF District: | | |
| 6 | City/Town Where TIF District Is Located: | | 6a Multiple? No |
| 7 | District Type: | Redevelopment | |
| 8 | If uncodified law, specify law: | | |
| 9 | For Economic Development districts only: (choose "N/A" for all ot a Is the Small City Exception being used? b Is the district used for a Workforce Housing Project? | ner districts) | .⊳ .> |
| 10 | Who drafted the modified TIF plan? | | |
| 11 | Other: | | |
| | | | |
| 12 | Is this TIF district in a fiscal disparities area? | | No |
| 40 | If yes, indicate whether the fiscal disparities deduction is | s calculated under option | |
| 13 | A (outside the district) or option B (inside the district). | | Not Applicable |
| | Original TIF Plan Information | | |
| 14 | TIF Plan Approval Date: | | !> |
| 15 | Certification Request Date: | | <mark>!></mark> |
| 16 | Certification Date: | | |
| | TIF Plan Modification Information | | |
| 17 | TIF Plan Modification Approval Date: | | !> |
| 18 | Did this modification include a TIF District geographic enlar | gement? | Select One |
| 19 | Geographic Enlargement Certification Request Date: | | |
| 20 | Geographic Enlargement Certification Date: | | |
| | Hazardous Substance Subdistrict Information | | |
| 21 | Did this modification create a hazardous substance subdist | rict? | Select One |
| 22 | Hazardous Substance Subdistrict Certification Request | Date: | |
| 23 | Hazardous Substance Subdistrict Certification Date: | | |
| | District Duration | | |
| 24 | Month and year of first receipt of tax increment (actual or an | nticipated): | 09/2018 |
| 25 | Has an election to delay the first receipt of tax increment | t been made for the district? | No |
| 26 | Required Decertification Date of the district is based on: | Statutory | Maximum Duration |
| 27 | Required Decertification Date: | | 12/31/2043 |

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TIF Plan Estimates

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| | Did this modification change the estimates listed below under Most Recent Estim | ates? | Select One | TIF Plan References In this column, identify |
|----|---|--------------------------|---------------|---|
| | | A | В | the first page or section of the TIF plan |
| | ESTIMATED TAX INCREMENT REVENUES | Most Recent Estimates | New Estimates | where the information is located. |
| | (from tax increment generated by the district) | | | |
| 1 | Tax increment revenues distributed from the county | \$0 | | |
| 2 | Interest and investment earnings | \$0 | | |
| 3 | Salas/Jaasa proceeds | \$0 | | |
| 4 | TIE credits | \$0 | | |
| 5 | Total Estimated Tax Increment Revenues | \$0 | \$0 | |
| | | | | <u> </u> |
| | ESTIMATED PROJECT/FINANCING COSTS | | | |
| | (to be paid or financed with tax increment) Project costs | | | |
| 6 | Land/building acquisition | \$0 | | |
| 7 | Site improvements/preparation costs | \$0 | | |
| 8 | Utilities | \$0 | | |
| 9 | Other public improvements | \$0 | | |
| 10 | Construction of affordable housing | \$0 | | |
| 11 | Small city authorized costs, if not already included above | \$0 | | |
| 12 | Administrative costs | \$0 | | |
| 13 | Estimated Tax Increment Project Costs | \$0 | \$0 | |
| | | | | |
| | Estimated financing costs | | | |
| 14 | Interest expense | \$0 | | |
| | Total Estimated Project/Financing Costs to be Paid From Tax | | <u> </u> | · |
| 15 | Increment | \$0 | \$0 | |
| - | | | | |
| | Estimated Financing | • | | |
| 16 | Total amount of bonds to be issued | \$0 | | |
| | | | | |
| 47 | Comments (1,000 character limit): | | | |
| 17 | | | | |
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