



I. Overview

Date Submitted: ____/____/____

This Project Profile Assessment (PPA) is required with all requests for incentive funding through the Downtown Investment Authority (DIA) regardless of the program request being made or current status. It is important that you complete the PPA as accurately and completely as possible (as applicable); however, changes will be permitted as the request is being processed. Please type responses or print legibly for clarity.

II. Business Project Name

Name as Registered: _____

Entity to be formed: _____

Doing Business As: _____

III. Applicant Information

Primary Point of Contact _____

Contact Method: Cell Phone _____ Other Phone: _____

E-mail _____

Mailing Address _____

Second Point of Contact _____

Contact Method: Cell Phone _____ Other Phone: _____

E-mail _____

Mailing Address _____

Authorized Agent #1 _____

Relationship/Role _____

Contact Method: Cell Phone _____ Other Phone: _____

E-mail _____

Mailing Address _____

Authorized Agent #2 _____

Relationship/Role _____

Contact Method: Cell Phone _____ Other Phone: _____

E-mail _____

Mailing Address _____

IV. Business Activity (Complete each section as relevant if mixed use)

For all new businesses, a business plan that details the target market niche, product offerings, management team info, relevant experience, and similar factors will be required to complete the application review. This requirement does not apply to existing businesses unless substantive changes are anticipated as part of the request being made.

___ **Multifamily Housing** (Select one or both as may be applicable) For Rent ___ For Sale ___

1. Property type: Apartment ____, Townhome ____, Condominium ____
2. Number of floors with leasable/occupiable units: _____
3. Number of occupiable living units: Studio ____, 1 BR ____, 2 BR ____, 3 BR ____, Other ____
4. Private amenities: _____

5. Public Amenities: _____

___ **Retail / Restaurant / Bar or Entertainment Venue**

1. Principal nature of the business: _____
2. Number of employees anticipated: Full-time _____ Part-time _____
3. Proposed Hours of Operation:

	Mo	Tu	We	Th	Fr	Sa	Su
Open:	_____	_____	_____	_____	_____	_____	_____
Close:	_____	_____	_____	_____	_____	_____	_____

___ **Office / Commercial Space**

1. Principal nature of the business: _____
2. Number of employees: Full-time _____ Part-time _____

___ **Hotel/Hospitality**

1. Principal nature of the business: _____
2. Number of employees anticipated: Full-time _____ Part-time _____
3. Private amenities: _____

4. Public Amenities: _____

____ **Other Business**

1. Principal nature of the business: _____
2. Number of employees anticipated: Full-time _____ Part-time _____
3. Additional Info: _____

V. Project Information (Real Estate Location and Info)

Property Location: _____

____ **Leased Space (As applicable, provide a copy of the lease if available)**

1. Square footage: _____, Number of floors: _____, Sidewalk/outdoor space (sq ft): _____
2. Status of the lease:
 In negotiation _____, Under contract _____, Start Date ____/____/____ End Date ____/____/____
3. Landlord/Owner: _____

____ **Owned Space (Complete for property currently owned or to be acquired)**

1. Project requirement (Y/N): Demo of a building _____ Rehab of a building _____ New Construction _____
2. Status of the property: In negotiation _____ Under contract _____ Owned by Applicant _____
3. Building use: Single-user Comm'l _____ Multi-tenant Comm'l _____ Multifamily _____ Mixed-use _____
4. Building Info: (* NSF – Net Square Footage)

Total square footage:	_____	Leasable space NSF	_____
Number of floors:	_____	Year Built	_____
Residential NSF	_____	Current Vacancy %	_____
Retail NSF	_____	Current Vacancy %	_____
Office NSF	_____	Current Vacancy %	_____
Private Amenity NSF	_____	Structured Parking (# of Spaces):	_____
Public Amenity NSF	_____	Surface parking (# of Spaces):	_____
Other NSF	_____		
5. Historic Status (Y/N if known):
 - a. Contributing Structure in the Downtown National Historic District: _____
 - b. Listed on the National Registry of Historic Places: _____

- c. Designated as a local Historic landmark or that process is underway through the COJ Planning and Development Department Historic Preservation Commission: _____
- 5. Duval County Property Appraiser RE #: _____
- 6. Duval County Property Appraiser: Value: _____ As of Date ____/____/____
- 7. Appraised value (Provide a copy of any appraisals completed within the past year):
 - a. As Is: Value: _____ As of Date ____/____/____
 - b. Upon Completion: Value: _____ As of Date ____/____/____
 - c. As Stabilized: Value: _____ As of Date ____/____/____
- 8. Acquisition price: \$ _____ Date of Acquisition ____/____/____

VI. Applicable DIA Incentive Program Name (See program guidelines for additional information)

Additional information on each of the following incentives programs and their related requirements can be found at <https://dia.coj.net> Please review that information thoroughly prior to submitting the PPA or scheduling a meeting with DIA staff to discuss the proposed project.

_____	Multi-family REV Grant	\$ _____
_____	Small Scale Residential Grant	\$ _____
_____	Affordable Housing Support Loan	\$ _____
_____	Commercial Revitalization Program	\$ _____
_____	Retail Enhancement Programs	\$ _____
	a) _____ Basic Retail Enhancement Grant	\$ _____
	b) _____ Core Area Retail Enhancement Grant	\$ _____
	c) _____ Targeted Food and Beverage Grant (FAB-REP)	\$ _____
	d) _____ Sidewalk Enhancement Grant	\$ _____
	i. _____ In combination with FAB-REP	\$ _____
	ii. _____ Stand-alone	\$ _____
	e) _____ Waterfront Restaurant Grant	\$ _____
_____	Boutique Hotel Rev Grant	\$ _____
_____	Downtown Preservation & Revitalization Program	\$ _____
_____	Historic Preservation Trust Fund	\$ _____
_____	Façade Grant Program	\$ _____
_____	Mobility Fee Credit Incentive	\$ _____
_____	Parking Screening/Landscape Grant	\$ _____
_____	Stormwater Quality Credits	\$ _____
_____	Land Contribution	\$ _____



_____	Downtown Economic Development Grant	\$ _____
_____	Other	\$ _____
_____	Other	\$ _____

VII. DIA Goals Met and Reasoning (See the DIA BID Strategy for Strategic Objectives and Benchmarks)

_____ Goal 1: Increase commercial office utilization, occupancy, and job growth to reinforce Downtown as the region’s epicenter for business.

_____ Goal 2: Increase rental and owner-occupied housing Downtown targeting diverse populations identified as seeking a more urban lifestyle

_____ Goal 3: Increase and diversify the number and type of retail, food and beverage, and entertainment establishments within Downtown

_____ Goal 4: Increase the vibrancy of Downtown for residents and visitors through arts, culture, history, sports, theater, events, parks, and attractions

_____ Goal 5: Improve the safety, accessibility and wellness of Downtown Jacksonville and cleanliness and maintenance of public spaces for residents, workers, and visitors.

_____ Goal 6: Improve the walkability/bike-ability of Downtown and pedestrian and bicycle connectivity between Downtown and adjacent neighborhoods and the St. Johns River.

_____ Goal 7: Capitalize on the aesthetic beauty of the St. John’s River, value its health and respect its natural force, and maximize interactive and recreational opportunities for residents and visitors to create waterfront experiences unique to Downtown Jacksonville.

_____ Goal 8: Simplify and increase the efficiency of the approval process for downtown development and improve departmental and agency coordination.

VI. Additional Information to be Provided

1. *For all new businesses being established, please provide the following as available:*
 - a. *A business plan that details the target market niche, product offerings, management team info, relevant experience, and similar factors will be required to complete the application review. This requirement does not apply to existing businesses unless substantive changes are anticipated as part of the request being made.*
 - b. *Sources and Uses of Capital (Development Budget) – During Construction and Following Completion and with identification of lenders and term sheets or LOIs where available.*
 - c. *Construction Budget – Should reconcile to the Development Budget as well.*
 - d. *Operating Pro Forma – Preferably ten years, three years at minimum.*
 - e. *Copy of any lease agreements being negotiated or already executed.*
 - f. *Copy of any appraisal of the property completed within the past year.*
 - g. *Copy of any market study for the project completed within the past year.*
2. *Program specific application as necessary.*



For Official Use Only:
Application#: _____ Date Received: _____ Date Found Complete: _____

RETAIL ENHANCEMENT PROGRAM
TARGETED RETAIL ACTIVATION: FOOD AND BEVERAGE ESTABLISHMENTS
"FAB-REP" GRANT APPLICATION

Upon completion, please submit application to DIAprograms@coj.net

Note: DIA "Grants" are structured as forgivable loans with related performance requirements and rights and remedies in the event of default. Upon approval, applicants will be required to enter into a loan agreement that details these requirements and may be supported by personal guarantees from the business and property owners.

PART 1: To be completed by both Business Owner and Property Owner

I. CO-APPLICANT INFORMATION:

A. Business Owner Applicant

- 1. Business Operating Name (d/b/a): _____
2. Nature of Business: _____
3. Property Address: _____
4. Business Telephone: _____ Website URL: _____
5. Business Legal Name: _____
6. Business Mailing Address: _____
7. Form of Ownership (sole proprietorship, partnership, LLC, S-Corp.): _____
8. State of Business Formation: _____
9. Employer Tax ID: _____ Business Tax Receipt #: _____
10. Contact Person (Name/Title): _____
11. Contact Mailing Address: _____
12. Contact Telephone: _____ Contact E-Mail: _____

B. Property Owner Applicant

- 1. Property Owner Operating Name (d/b/a): _____
2. Property Owner Mailing Address: _____
3. Business Telephone: _____ Website URL: _____
4. Business Legal Name: _____
5. Form of Ownership (sole proprietorship, partnership, LLC, S-Corp.): _____
6. State of Business Formation: _____
7. Employer Tax ID: _____ Business Tax Receipt #: _____
8. Contact Person (Name/Title): _____
9. Contact Mailing Address: _____
10. Contact Telephone: _____ Contact E-Mail: _____
11. Number of Years of Property Ownership (At this site or location): _____

II. PROPERTY INFORMATION:

- A. The District the Property is located within: Hogan x Laura Elbow
- B. The Property has Historic Landmark status: Yes No Unsure
- C. The Property is a Contributing structure: Yes No Unsure
- D. Year the Property was constructed (if known): _____
- E. Provide information on any DIA incentives or funding the subject property has received in the past or where an application is contemplated or currently under consideration. *Note: Costs submitted for consideration in this application may not also be submitted or paid previously under any another incentive or funding provided by COJ or DIA.*

III. ESTABLISHMENT INFORMATION:

For purposes of this Application, "Establishment" refers to the business seeking the FAB-REP Grant. Information requested below shall also be included in greater depth and detail in the Business Plan submitted with this Application as outlined in Part 2.

- A. Identify the proposed nature of the Establishment (fine-dining, pizza parlor, coffee shop, etc.): _____
- B. Identify the "Establishment Type" (Types 1, 2, or 3, per the FAB-REP Guidelines) and Applicant's reasoning for such classification: _____
- C. Kitchen Type (Limited, Full, or N/A): _____
- D. Menu Type (Limited, Full, or N/A): _____
- E. Food Type (Prepared Onsite, Offsite, Snacks, or None): _____
- F. Service Type (Counter, Table, or Other Self-Serve): _____
- G. Provide the total square footage to be utilized by the Establishment: _____
- H. Specify the square footage and use of each floor as included in this Application: _____
- I. If Establishment will use Supplemental Space (per the Guidelines) such as a rooftop, balcony, other outdoor space, or event space, describe the public access to, and street visibility of, such space: _____
- J. If the Establishment intends to not occupy a street level space, describe the public access to, and street visibility of, such second story or other space: _____

- K. Per the Guidelines, Operating Periods must include the following:
 Applicant shall commit that that the Establishment will be open at least 5 days per week during *either* of the following operating periods:
- (1) Breakfast: opening no later than 7:00 a.m.
 - (2) Dinner/Evening Hours: staying open at least until 9:00 p.m., including either Friday or Saturday evening

Indicate below the Opening/Closing Times that meet the requirement outlined above:

	Open for Breakfast (Y/N)	Opening Time	Open for Dinner/Evening (Y/N)	Closing Time
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

IV. ESTABLISHMENT LEASE INFORMATION:

- A. Lease term (number of years, 5-year minimum): _____
- B. Lease term start date: _____
- C. Lease build-out period (number of months): _____
- D. Rent payment start date: _____
- E. Base rent amount only (per month): _____
- F. Rent increase structure (% and timing): _____
- G. Percentage rent (Floor and percentage) (per month): _____
- H. Common Area Maintenance (CAM) (per month): _____
- I. Other charges: _____
- J. Renewal Options: _____

V. SIDEWALK ENHANCEMENT GRANT (if applicable):

- A. Does the Applicant seek a Sidewalk Enhancement Grant as part of this Application? _____
- B. Does the business have a Sidewalk Café permit currently? _____
- C. Describe your plan for Sidewalk Enhancement. Include anticipated Furniture, Fixtures, and Equipment to be acquired, how these fit into the Business Plan as submitted, and any other activities planned for the sidewalk in front of your Establishment:

- D. Describe what measures will be undertaken by the Business Owner to preserve and protect Furniture, Fixtures, and Equipment acquired with grant funds from damage, theft, or other loss beyond normal wear and tear.

VI. IMPROVEMENT COSTS AND REQUESTED FUNDING:

A. FAB-REP GRANT (Excluding Sidewalk Enhancement, See "B" Below)

1. Estimated total cost of Eligible Improvements: \$_____ 100 %
2. Business Owner contribution (amount and % of total): \$_____ %
3. Property Owner contribution (amount and % of total): \$_____ %
4. FAB-REP Request from VII. Below (amount and % of total): \$_____ %
5. If Property Owner is not contributing directly to the cost of Improvements, describe rent concession or other benefit provided to Business Owner that is at least equal to Property Owner's required minimum contribution of 25%: _____

B. SIDEWALK ENHANCEMENT GRANT (IF APPLICABLE):

1. Estimated total cost of Eligible Improvements: \$_____ 100 %

VII. TOTAL AMOUNT REQUESTED FROM DIA:

1. Base FAB-REP Grant Amount:

Square Footage _____ X Applicable Rate Per SF _____ \$_____

- a. Type 1: \$65/Sq. Ft; Max is the lesser of 50% of eligible costs or \$400K
- b. Type 2: \$50/Sq. Ft; Max is the lesser of 50% of eligible costs or \$200K
- c. Type 3: \$40/Sq. Ft; Max is the lesser of 50% of eligible costs or \$100K

2. Historic Boost (if applicable):

- a. _____ Local Historic Landmark: add \$20/Sq. Ft. to the Applicable Rate above.
- b. _____ Contributing Structure: add \$10/Sq. Ft to the Applicable Rate above.

3. Supplemental Space Amount:

Square Footage _____ X Applicable Rate Per SF _____ \$_____

Applicable rate will vary, but generally not more than 50% of the Applicable Base Rate.

4. Sidewalk Enhancement Grant (if applicable):

a. Eligible Costs X 80% (Not to exceed \$15,000) \$_____

5. TOTAL DIA CONTRIBUTION AMOUNT REQUESTED: \$_____

Part2: Required Documentation to be Provided

1. A detailed Business Plan is highly integral to this application and at minimum should include:
 - a. A description of the business concept and target market
 - b. A description of how the improvements align with the DIA's goal of street and sidewalk activation and place making
 - c. A plan identifying how the Applicant intends to protect the sidewalk improvements, including all equipment and fixtures for the 5-year compliance period (if applicable)
 - d. A summary of the management team's relevant skills and experience
 - e. An advertising/marketing plan
 - f. Products and brands proposed for sale
 - g. Target hours of operation
 - h. The number of permanent positions to be created (expressed as FTE or Full Time Equivalentents)
 - i. Design for the storefront and interior
 - j. A three-year projected operating pro-forma and cash flow analysis
 - k. Information on the sources of cash/capital
 - l. Most recent one-year corporate tax returns from the Business (as may be available) and most recent three year's personal tax returns for the Business Owner (exceptions will be considered for start-ups to accept three years of personal tax returns).
2. A construction budget identifying all project costs, including sources and uses, as follows:
 - a. Detail all work to be performed to the property, including ineligible improvements, in a form that reconciles with information provided in the application.
 - b. Detail all improvement tenant improvement costs related to the retail food and beverage establishment seeking the grant.
 - c. Break out or otherwise identify costs specific to any outdoor uses, non-ground floor, balcony, roof-top, or non-street facing spaces otherwise referred to as Supplemental Spaces.
 - d. **NOTE 1:** Costs associated with preparation or packaging of food or beverages to be consumed or distributed off-site are considered indirect improvements and not eligible for grant funds and must be identified as such in the construction budget.
 - e. **NOTE 2:** FAB-REP grant funds may not be used for any portion of costs of improvements submitted as part of an application or already approved for funding through any other incentive or funding from COJ or DIA. Such costs must be separately identifiable in the construction budget presented at the time of application.

- f. **NOTE 3:** See the REP and FAB-REP guidelines for additional information on costs generally considered eligible or ineligible.
3. A copy of the property tax bill or deed to confirm ownership of the property.
 4. A legally valid and binding lease for a period of at least five years with use restricted to an allowable retail use. If the tenant is paying for the improvements, the lease must provide for a minimum of free rent, discounted rent, or equivalent thereof in lieu of the property owner having to share the cost of the improvements. *(Note: A fully negotiated unsigned lease may be provided, if co-applicants are finalizing negotiations subject to funding requirements.)*
 5. Architectural renderings, scaled elevation drawings, and floor plan layout depicting the size and dimensions of the exterior and interior of the property, and location of the improvements and modifications.
 6. A legally binding agreement with a licensed and qualified contractor. *(Note: A fully negotiated unsigned construction contract, subject only to execution may be provided, if the parties are finalizing negotiations subject to meeting funding requirements.)*
 7. Information on any previous grants, loans, or incentive awards received previously by either co-applicant or closely related entity.
 8. Copies of any franchise or licensing agreements integral to operation of the establishment.
 9. Executed applicable authorization affidavit(s), for example: Agent Authorization for LLC, General Partnership, Corporation, or General Partnership, and Property Ownership Affidavit.

***Please note, if Applicants submit unexecuted but pending agreements (such as a lease agreement that is conditional upon grant funding), they shall submit all fully executed agreements as soon as practical. Further, Applicants shall notify the DIA staff of all substantial changes made to such agreements after submission. The DIA reserves the right to reverse a grant award if substantial changes are made to agreements after a grant is awarded. ***

THIS APPLICATION MUST BE SUBMITTED TO THE DOWNTOWN INVESTMENT AUTHORITY AND APPROVED BY THE DOWNTOWN INVESTMENT AUTHORITY BOARD PRIOR TO THE COMMENCEMENT OF ANY WORK SOUGHT TO BE REIMBURSED UNDER THE PROGRAM.

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CO-APPLICANT ATTESTATION

The Co-applicants, as Business Owner, _____, and Property Owner, _____, attest severally that the information he or she submits as part of this application package, as well as any subsequent information he or she submits for review by the Downtown Investment Authority (“DIA”) Staff, Retail Enhancement and Property Disposition Review Committee, or the DIA Board, is true and correct, and that all information and documentation submitted, including this application and attachments, is deemed public record under the Florida Public Records Law, Ch. 119 of the Florida Statutes. Falsification or omission of information will result in rejection of the application and potential criminal penalties. The DIA reserves the right to request any additional information needed to process this Application.

If the Applicants are awarded funding from the Downtown Jacksonville Retail Enhancement Program-Targeted Retail Activation: Food and Beverage Establishments (“FAB-REP Program”), the Applicants agree that they will enter into a Forgivable Loan Agreement jointly with the DIA with terms relating to, but not limited to, the DIA’s payment of program funds only upon completion of the project as approved and satisfactory review of evidence of costs incurred and paid in accordance with the construction budget as submitted at the time of application, and the DIA’s right to review and audit any and all records related to the Agreement. In case of a default in terms of the Agreement, the Co-applicant(s) may be jointly and severally responsible for repayment of funds awarded and disbursed.

By signing below, the Co-applicants acknowledge that they have read and agree to the FAB-REP Program and Retail Enhancement Program Guidelines.

By signing below, each Co-applicant authorizes the DIA to submit a credit verification request and criminal background checks from local, state, and federal agencies. Please note that the review of this application will incorporate that information as may be relevant.

Legal Business Name of Business Owner Applicant: _____

Business Owner Signature: _____ Date: _____

Business Owner Signer Name: _____ Title: _____

Legal Business Name of Property Owner Applicant: _____

Property Owner Signature: _____ Date: _____

Property Owner Signer Name: _____ Title: _____