

PULASKI COUNTY P.A.C.E. FINANCING

I. APPLICANT INFORMATION

Full name: _____ Email: _____

Phone: _____ **I am a:**

Property Owner Property Manager Contractor/Service Provider Other _____

II. PROPERTY INFORMATION

a. Building Owner Corporate Identity (e.g. John Smith LLC):

b. Building Owner(s):

c. Ownership type:

- Corporation Limited Liability Company Individual(s)
 Partnership Trust Common Property (not in Trust)
 NPO Joint Tenants Other: _____

d. Property Physical Address:

Street Address: _____

City: _____ State: **Arkansas** Zip Code: _____

e. Property Type:

<input type="checkbox"/>	Office	<input type="checkbox"/>	Hotel	<input type="checkbox"/>	Municipal
<input type="checkbox"/>	Industrial	<input type="checkbox"/>	Non-Profit	<input type="checkbox"/>	Multi-Family
<input type="checkbox"/>	Warehouse	<input type="checkbox"/>	Education	<input type="checkbox"/>	Distributed generation
<input type="checkbox"/>	Hospital/Lab	<input type="checkbox"/>	Retail	<input type="checkbox"/>	Other: _____

f. Property Description:

For example: 30,000 ft² of retail store or 25 unit multi-family apartment complex.

III. FINANCIAL INFORMATION

a. Do you have a mortgage / lien on the property?

<input type="checkbox"/>	YES 1. Lender name: _____ 2. Closing date: _____ 3. Payments current: _____ 4. Principal outstanding: _____ 5. Current monthly payment: _____ 6. Interest rate: _____ <input type="checkbox"/> Fixed <input type="checkbox"/> Variable 7. Term of mortgage: _____ 8. Balloon date (if applicable): _____ 9. Amortization schedule (years) _____
<input type="checkbox"/>	NO

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b. Do you have any other debt on the property? (if so, please provide details):

c. What is the estimated property value?

Appraisal or Anticipated Value: _____ Year appraised/anticipated _____

d. Tenancy

Owner occupied Leased to single tenant Leased to multiple tenants

1. Number of tenants: _____ b. Vacancy rate: _____

e. Property Net Operating Income (Op. Revenue - Op. Exp.): _____

f. Is there any outstanding tax of financial liens or notices of default? _____

IV. PROJECT INFORMATION

a. What type of project do you plan on financing?

- Off-site renewable energy generation
- On-site renewable energy system
- Energy efficiency improvement/upgrade
- Weatherization
- Water saving
- Boiler upgrade / gas conversion
- Other _____

If available, please attach a table of measures with costs and savings.

b. Total Project cost: _____ Planned project date: _____

c. Is the property current on all property taxes and mortgages? _____

d. Is there any outstanding tax of financial liens or notices of delinquencies? _____

e. Utilities and Anticipated Savings:

	Annual Spend	Anticipated Annual Savings	Anticipated Annual Savings
Electricity	\$ _____	\$ _____	_____ kWh
Natural Gas	\$ _____	\$ _____	_____ Therms
Water	\$ _____	\$ _____	_____ Gallons

f. Who pays the utility bill(s): _____

g. Have you completed an energy audit? If yes, what level of audit? _____

Please attach all audits, feasibility studies and other project documents to this application.

Applicant (Printed Name): _____ Date: _____

Title: _____ Company: _____

(An electronic signature may be accepted with the authority as the original.)