

**ALABAMA'S
COMMERCIAL REVITALIZATION DEDUCTION APPLICATION**

Application Number _____
(Provided by ADECA)

Please submit by December 10 of each year.

The project owner, when applying for a Commercial Revitalization Deduction, is asked to provide the following information and obtain the necessary signature(s) from the appropriate Chief Elected Official before submitting it to the Alabama Department of Economic and Community Affairs (ADECA). Any other necessary concurrence should also be secured in order to receive consideration for approval of your application by the Commercial Revitalization Committee and Agency.

Date Submitted for Review: _____

Renewal Community Name: _____

Name of Applicant: _____

Address: _____

City/Town: _____ Zip Code: _____

Telephone: _____ Contact Person: _____

FEIN or SS: _____ Title: _____

Address of Building Project: _____

City/Town/County: _____

Project Cost Estimate: _____ Construction Costs: _____

Date Site was acquired: _____ Site Preparation Costs: _____
(if applicable)

Cost of Acquisition: _____ Landscaping/Other: _____

Tax Year Ends: _____ Total Estimated Costs: _____

Number of full-time jobs to be created: _____ Average Hourly Wage: _____
as a result of this project.

Please provide a listing of employee benefits to be provided: _____

Use of building at project completion:
(Check appropriate use)

Manufacturing ()
Type: _____
Commercial ()
Type: _____
Retail/Wholesale ()
Type: _____
Other ()
Specify: _____

Please provide a description of your project _____

If you as the owner will not be the end user of the building project, please provide the name of the end user, if known, and it's planned use.

Please address any community partnerships, community based projects, or other community enhancement projects that may be undertaken in conjunction with your company/businesses location in the Renewal Community. (Schools, day care, health care, housing, etc.) _____

Date building was/will be placed into service: _____

Amount of commercial revitalization deduction requested: _____
(Based on 50% first year choice or full deduction over ten years)

Option you are Selecting: _____ **50% Deduction First Year**
_____ **Full 10 Year Depreciation**

***(Add additional sheets as necessary to explain any category listed above)**

