Submit to: Office of Economic Development
Fresno City Hall – 2600 Fresno St. – Fresno, CA 93721
Phone: (559) 621-8000/FAX: (559) 457-1504

Industrial Development Impact Fee Elimination or Reduction "iDIFER" Application

Business Name: _____

Representative Name & Title: _____

Work Number: _____ Cell: _____ Email: _____

Are you a: [ ] Industrial business (fill out "Business Description and Information" and then sign on page 2)
[ ] Industrial developer (fill out any business info available in the "Business Description and Information" section as well as "Industrial Developer" section on second page)

Business Description and Information

NAICS Code: _____ Are you currently operating in the City of Fresno? [ ] Y [ ] N

If Yes, what is your current address: _____

Number of current employees in City of Fresno: __ FT __ PT

How many new or additional jobs do you expect to create as a result of the project: __ FT __ PT

Average starting hourly wage: ___ FT ___ PT Top local executive name & title: _____

Current year estimated gross receipts in City of Fresno $_____ Projected increase $_____

Do you export a product or service? [ ] Y [ ] N If yes, what product/service? _____

If you are currently operating in the City of Fresno, are you expanding at your current location?
[ ] Y [ ] N

If no, or not currently located in the City of Fresno, please give address or APN of new location: ____
_____

Anticipated start date of expansion: _____

When do you expect to be operating at the expanded/new location: _____

Please select one: [ ] I/We own this property
[ ] I/We have a long term lease (five years minimum) or signed letter of intent

Zoning: M-1 M-2 M-3 C-M
(circle one)

Current square footage occupied: _____sf Proposed increase in square footage: _____sf

Please describe nature of business (include information such as products manufactured, customer base, services offered, and any other pertinent information): _____
_____
_____
_____
_____
_____

Industrial Developer Information

(please skip this section if you are the business representative)

Address/APN: _____

Major Cross Streets: _____ Zoning: M-1 M-2 M-3 C-M Total Acreage: _____
(circle one)

Do you currently have a long term lease (five year minimum) or letter of intent with an industrial company looking to locate or expand at this location? [ ] Y [ ] N

If Yes, please provide company name(s): _____

_____

Is this information confidential at this time? [ ] Y [ ] N

Please describe location (include sf currently developed/occupied, planned development, # and type of companies currently located on parcel(s), # and types of jobs provided, sf available, and any other pertinent information: _____

_____

_____

_____

_____

_____

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_____

_____

I hereby certify under penalty of perjury, under the laws of the State of California, that the above information is correct and I am an authorized representative of this business. I understand this application is pending review by the City. I agree to conduct all phases of this business in conformance with all applicable laws, ordinances, and regulations established for such business/profession.

Signature _____ Date _____

Printed Name _____ Title _____

Thank you for your interest! The City of Fresno will review your application and contact you with any questions. Please call (559) 621-8355 with any inquiries.

City of Fresno (office use only)

NAICS Code: _____ APN: _____ Zoning: _____

Initial ED Staff Review: _____ Date: _____ Pass: Y/N Committee Review: _____ Date: _____ Pass: Y/N

CM Final Review: _____ Date: _____ Pass: Y/N Letter Sent: _____ Date: _____ Copy to: Planning: _____