

Tax Increment Financing and Tax Incremental Districts in South Dakota Submission Form

This Request must be in writing and include the following:

- Resolution Creating TIF District
- A map of the proposed boundaries
- A proposed project plan outlining the purpose and intended public improvements of the district

Mail Requests to:

**SD Department of Revenue
Property and Special Taxes Division
445 E. Capitol Avenue, Pierre SD 57501**

Contact Information

1. Governing Body: _____
2. Contact (City Finance Officer/County Auditor):

3. Phone: _____
4. E-mail Address: _____
5. Developer Name:

Project Description

1. Name of TIF: _____
2. School District: _____
3. What was the date of the Planning Commission hearing? _____
4. Project Plan Creation Date: _____
5. Location (Boundaries, Legal Description):

6. Brief Description of Project (What is being Built?):

7. Brief Description of Project's Public Benefits:

8. Estimate of Jobs Created: _____
9. Total Anticipated Project Costs: \$ _____
10. Estimate of Maturity (Years to Dissolution): _____

I, the undersigned, declare that I am an authorized representative of the Tax Increment Financing District's Planning Commission. By signing I agree that I have read and understand the statutes and regulations regarding the creation and use of TIF districts and will therefore comply with all requirements made.

Printed: _____

Title: _____

Signature: _____

Date: _____

Upon receipt of the above information, the Department will begin the process of determining the base value of the proposed TIF district. Once the base value has been defined, communication regarding such information will be provided to the county and/or municipality governing the TIF.