

**SOUTH BILLINGS BOULEVARD TAX INCREMENT FINANCING ASSISTANCE
APPLICATION**

Project Name: Wendy's Date Submitted: _____

APPLICANT INFORMATION

1. Name: WENDBILL, LLC / MIKE TRACY
2. Address: 2110 OVERLAND AVE STE 109
3. Telephone Number: 406-252-5125, CELL 406-690-4141

PROJECT INFORMATION

1. Building Address: 4610 KING AVE EAST BILLINGS, MT 59106
2. Legal Description: MILLEN CROSSING SUB 2ND FIL (09), S16, T01S, R26E, BLK1, LOT3A, AND
3. Ownership: WENDBILL LLC
4. Address: 2110 OVERLAND AVE STE 109
5. If property is not owned by the Applicant, list leasehold interests (Attach evidentiary materials.)

Lessor's Name: _____

Lessor's Address: _____

6. Existing/Proposed Businesses: WENDY'S RESTAURANT
7. Business Description: QUICK SERVICE RESTAURANT
8. Employment: Existing FTE jobs _____
9. New Permanent FTE jobs created by project _____ Construction FTE jobs _____
10. Architectural Firm: SCUTZ FOSS ARCHITECTS

Address: 3030 4TH AVE N BILLINGS, MT 59101

Representative: KYLE GILLETTE

8. Description of Project: (Attach narrative explanation.)
9. Rehabilitation/construction plans: (Attach schematics, site and landscaping plans.)
10. Project Schedule: (Attach time line or schedule through completion.)

CRITERIA FOR REVIEW

Materials contained in TIF Assistance applications are used to assess the merits of projects in relation to the goals and objectives of the South Billings Urban Renewal Master Plan and in relation to other District development and urban renewal projects. Projects will be evaluated based on the following criteria.

1. **Relevance to the South Billings Urban Renewal Master Plan** – This document is available on SBURA's website (www.southbillings.org).
2. **Economic Stimulus** – The amount of economic activity to be generated by the project.
3. **Tax Generation** – The increase in taxable value due to new construction/rehabilitation as estimated by the County Assessor's office.
4. **Employment Generation** – Total employment generated by the project assessed in terms of new permanent and part-time jobs, and construction jobs.
5. **Elimination of Blight** – The project's direct and indirect impact on the physical and fiscal condition within the District.
6. **Special or Unique Opportunities** – The extent to which the project represents a unique opportunity, meets a special need, or addresses community goals. The provision of public space or workforce housing are examples of special and unique opportunities.
7. **Impact Assessment** – The extent of both positive and negative environmental impacts, appropriateness of the project design, and impact on existing businesses or residents.
8. **Financial Assistance** – Other forms of financing available to the Applicant i.e. lender participation and state and federal grant monies,
9. **Project Feasibility** – Demonstration of market demand for the project
10. **Developer's Ability to Perform** – Applicant's capability to undertake the relative complexities of the project based on past performance on similar or comparable projects.

11. **Timely Completion** – The feasibility of completing the project according to the Applicant’s project schedule.

PROJECT COSTS

Land and Site Improvements (Itemized)

1. Equity in Land and Buildings	\$ <u>850,000</u>
2.	\$ _____
3.	\$ _____
4.	\$ _____
Subtotal	\$ <u>850,000</u>

Construction/Rehabilitation Costs (or attach separate statement)

1.	\$ _____
2.	\$ _____
3.	\$ _____
4.	\$ _____
5.	\$ _____
6.	\$ _____
7.	\$ _____
8.	\$ _____
Subtotal	\$ _____

*PLEASE SEE
ATTACHED
G.C. BID DOCUMENT*

Fees

1. Architectural design/Supervision	\$ <u>76,500</u>
2. Permits _____	\$ _____

3. Other fees _____ \$ _____
 Subtotal \$ _____
 Total Project Development Costs \$ _____

PROJECT FINANCING

Please complete Sources of Funds detail and summarize below.

Developer Equity

Cash Invested \$ 2,500,000
 Land & Buildings \$ _____
 Other (Specify) _____ \$ _____
 _____ \$ _____
 Subtotal \$ _____

Lender Commitments (Attach evidence i.e. Letters of Credit or other documentation.)

Lender Payment/Period	Loan Amount	Interest	Term	
_____	\$ _____	_____ %	_____ yrs	\$ _____/Month
_____	\$ _____	_____ %	_____ yrs	\$ _____/Month
Total Loan Amount				\$ _____

DEVELOPER STATEMENT OF QUALIFICATIONS AND FINANCIAL RESPONSIBILITY

Applicant

1. Name: _____

Address: _____

2. If the applicant is not an individual doing business under his/her own name, the applicant has the status indicated below and is organized or operating under the laws of MONTANA.

3. The applicant is:

_____ A corporation.

_____ A nonprofit or charitable institution or corporation

_____ A partnership known as LLC

_____ Other (explain): _____

Date of organization: _____

4. Names, address, title of position (if any), and nature and extent of the interest of the officers and principal members, principal shareholders, investors, or partners of the applicant.

Name and Address

Nature and Extent of Interest

MIKE TRACY

DIRECTOR OF REST DEVELOPMENT

LESLI JOHNSON

DIRECTOR OF OPERATIONS

Financial Condition

1. Provide a current financial statement for each private entity involved in the project. Documentation of financial capacity may include net worth statements, balance sheets, or profit and loss statements.

2. Has the applicant or any individual or entity affiliated with the development of this project been adjudged bankrupt, either voluntary or involuntary, within the past ten years?

No Yes _____ If yes, give date, place, and under what name:

3. Has the applicant or any individual or entity affiliated with the development of this project been indicted for or convicted of any felony within the past ten years:

No Yes _____ If yes, give date, charge, place, court and action taken for each case.

CONSTRUCTION CONTRACTOR

1. Identify the construction contractor or builder who will undertake this project.

Name: WUANG CONSTRUCTION

Address: 7310 Englewood Dr.

2. Has such contractor or builder ever failed to qualify as a responsible bidder, refused to enter into a contract after an award has been made, or failed to complete a construction or development contract within the last ten years?

No Yes _____ If yes, explain.

CERTIFICATION

I (we), MIKE TRAY (please print),
certify that the statements and estimates within this Application as well as any and all
documentation submitted as attachments to this Application or under separate cover are true
and correct to the best of my (our) knowledge and belief.

Signature *Mike Tray* Signature _____

Title *Director of Restaurant Development* Title _____

Address *2110 O'NEAL RD STE 109* Address _____
BILLINGS, MT 59102 _____

Date *3-1-2022* Date _____

CUCANCIC CONSTRUCTION, INC.

P.O. BOX 80307

BILLINGS, MT 59108-0307

Phone (406) 294-2440 Fax (406) 294-2444

PROJECT:

PROJECT NUMBER:
DATE OF ESTIMATE:
ESTIMATOR:

OWNER:
ARCHITECT:
PROJECT MGR:

	LABOR		MATERIAL	EQUIPMENT	SUBCONTRACTS	TOTAL
	HOURS	TOTAL				
DIVISION 1 GENERAL REQUIREMENTS	860	\$60,200	\$9,150	\$15,000	\$0	\$84,350
DIVISION 2 SITEWORK	0	\$0	\$0	\$0	\$469,130	\$469,130
DIVISION 3 CONCRETE	0	\$0	\$20,000	\$1,500	\$31,039	\$52,539
DIVISION 4 MASONRY	0	\$0	\$0	\$0	\$0	\$0
DIVISION 5 METALS	16	\$1,120	\$0	\$0	\$16,657	\$17,777
DIVISION 6 CARPENTRY	0	\$0	\$0	\$48,478	\$76,000	\$124,478
DIVISION 7 MOISTURE-THERMAL	0	\$0	\$0	\$0	\$90,864	\$90,864
DIVISION 8 DOORS & WINDOWS & GLASS	8	\$560	\$3,500	\$0	\$75,000	\$79,060
DIVISION 9 FINISHES	0	\$0	\$0	\$0	\$81,842	\$81,842
DIVISION 10 SPECIALTIES	8	\$560	\$0	\$0	\$6,729	\$7,289
DIVISION 11 EQUIPMENT	0	\$0	\$0	\$0	\$0	\$0
DIVISION 12 FURNISHINGS	0	\$0	\$0	\$0	\$0	\$0
DIVISION 13 SPECIAL CONSTRUCTION	0	\$0	\$0	\$0	\$0	\$0
DIVISION 14 ELEVATOR ALLOWANCE	0	\$0	\$0	\$0	\$0	\$0
DIVISION 15 MECHANICAL	0	\$0	\$0	\$0	\$204,372	\$204,372
DIVISION 16 ELECTRICAL	0	\$0	\$0	\$0	\$140,400	\$140,400
SUBTOTAL, COST	892	\$62,440	\$32,650	\$64,978	\$1,192,033	\$1,352,101

MARKUP 8.0% \$108,168

SUBTOTAL \$1,460,269

BUILDING PERMIT	\$11,000
PLAN REVIEW FEES	\$0
LIABILITY INSURANCE	\$13,402
BUILDERS RISK INSURANCE	\$0
CONTRACT BOND	\$0
ALLOWANCES	\$0
SYSTEM DEV FEES	\$0
TOTAL MISC	\$24,402

\$24,402

TOTAL ESTIMATE \$1,484,670

CLARIFICATIONS TO OUR BID:

#DIV/0!

Daytime work hours

No overtime

No asbestos removal or monitoring

No winter protection

ALTERNATE #1	\$0
ALTERNATE #2	\$0
ALTERNATE #3	\$0
ALTERNATE #4	\$0
ALTERNATE #5	\$0
ALTERNATE #6	\$0

TOTAL COMBINED BID \$1,484,670

Addition of Bond



5445 Rustic Ave
 Billings, MT 59106
 406-656-1932

Proposal

Proposal Date:	3/14/2022
Proposal #:	2021-119
Project:	Wendy's

Proposal For:
Cucancic Construction, Inc PO Box 80307 Billings, MT 59108-0307

Description	Est. Hours/Qty.	Rate	Total
Rock Mulch: 1" Crushed Granite Rock	20	75.00	1,500.00
Bark Mulch: Hardwood Natural	41	115.00	4,715.00
Boulder: 3' Granite	3	0.00	0.00
Sod	10,851	0.65	7,053.15

All material is guaranteed to be as specified. All work to be completed according to standard practices.

Total	\$77,889.95
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PAYMENT TERMS: The contractor requires a down payment of 50%, with the balance due upon completion.

Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will increase the amount of the estimate. All agreements contingent upon strikes, accidents, or delay beyond our control. The contractor is not responsible for physical damage beyond his control or damage caused by an Act of God. Owners are required to carry all fire, hail-windstorm, and other necessary insurance.

ACCEPTANCE OF PROPOSAL: The above prices, specifications, and conditions are satisfactory and are hereby accepted. You are authorized to perform the specified work. payment will be made as outlined above.

SIGNATURE _____

Shawn LaBaugh

From: Jeremiah McGee <jeremiahm@k2civilinc.com>
Sent: Thursday, March 17, 2022 10:59 AM
To: Shawn LaBaugh
Subject: Wendy's Southgate Proposal
Attachments: Wendys Southgate Proposal.pdf

Shawn,

Please find attached our proposal for the Wendy's project.

I have listed the concrete item breakout pricing below:

- Curb & Gutter: \$34,925.00
 - Sidewalks: \$40,336.00
 - Drive Approach: \$1,650.00
- } 876,911

If you have any questions feel free to let me know.

Thanks,

Jeremiah McGee
Project Manager
K2 Civil, Inc.
6611 Trade Center Ave
Billings, Montana 59101
Office: 406.325.6001
Mobile: 406.670.5091
jeremiahm@k2civilinc.com

