



**PROJECT CLAIM FORM**

**INSTRUCTIONS:** This Regional Cities of Northern Indiana Project Claim Form ("Claim Form") shall be completed and submitted to the Northern Indiana RDA ("Grantee") by any project administrator ("Subrecipient") to request a disbursement from the Indiana regional city fund in relation to the IEDC's Regional Cities Initiative ("RCI Fund"). Please complete this Claim Form in its entirety. Sections that are not applicable should be noted as such. Additional documents may be attached to this Claim Form as necessary. This Claim Form must be submitted to the RDA at [info@michianaregion.com](mailto:info@michianaregion.com), unless otherwise indicated by the RDA. The RDA will review this Claim Form and may request additional information. The RDA will submit approved Project Claim Forms to the IEDC for their review and evaluation. The RDA and IEDC reserve the right to deny disbursement or condition their approval of RCI Funds on conditions as they deem appropriate. Written notice of approval, conditional approval, or denial shall be sent to the Project Administrator indicated below.

**SUBMISSION STATUS** (please check one)

- New Claim Form   
 Amended Claim Form

**PROJECT ADMINISTRATOR INFORMATION:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Region Name: North Central Indiana

Position within Region: \_\_\_\_\_  
(citizen, elected official, etc.)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County:  Elkhart County  
 Marshall County  
 St. Joseph County

Primary Telephone Number: \_\_\_\_\_

Additional Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PROJECT CLAIM FORM**

**PROJECT INFORMATION:**

Project Name(s):

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Project Address(es):

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Brief Description of the Project:

Specify Project's Connection to RCNI Regional Development Plan:

Specify any Deviations from Project, as approved in Regional Development Plan:

*Please provide extensive detail on any changes to budget, scope, project partners or project experience.*

Is this a "bricks & mortar" project rather than programmatic in nature?

Yes

No

Does this project include the use of funds for broadband activities?

Yes

No

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**EXPECTED PROJECT TIMELINE**

Commencement Date: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Will this project be completed by  
March 31, 2020?

Yes

No

Description of Project Schedule:

*Please provide additional information about the project timeline, including key dates. Attach additional pages or forms as necessary.*

**PROJECT IMPACT:**

Regional Scope of Project:

*Describe the project's ability to impact/enhance the regional economy and/or quality of life (beyond the community the project is physically located in).*

Impact on Talent Attraction:

*Describe the project's ability to impact/enhance the regional economy and/or quality of life (beyond the community the project is physically located in).*

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**FINANCIAL INFORMATION**

**Total Expected Project Budget:** \_\_\_\_\_

Itemized Breakdown of Project Budget:

*Please account for a four percent Administration Withholding Amount, which may be assessed by the RDA (max \$300,000)*

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**Firm Public and Non-Public\* Financial Commitments, Including:**

**Target is Non-Public Support (60%), State Support (max 20%), other public support (20%)**

**Non Public Support**

(in kind contributions, private debt, private equity, philanthropic or private foundation dollars)

Type: \_\_\_\_\_

Amount (\$): \_\_\_\_\_

Percentage: \_\_\_\_\_

Distribution Schedule: \_\_\_\_\_

Status:

Firm

Pending

Details:

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Is the Non-Public Support at least 60%?

Yes

No

**State Public Support**

(i.e. IRC Fund, state incentives, state grants)

Type: \_\_\_\_\_

Amount (\$): \_\_\_\_\_

Percentage: \_\_\_\_\_

Distribution Schedule: \_\_\_\_\_

Status:

Firm

Pending

Details:

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Is the State Public Support equal or less than 20%?

Yes

No

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**FINANCIAL INFORMATION CONT**

**Other Public Support**

(local revenue source permitted by law, distributions, incentive payments, local major moves money, money received by local communities through a local casino development agreement, municipal bonds, federal grants)

Type: \_\_\_\_\_

Amount (\$): \_\_\_\_\_

Percentage: \_\_\_\_\_

Distribution Schedule: \_\_\_\_\_

Status:

Firm

Pending

Details:

Is the Other Public Support 20% or less and at least matches the State Support Amount?

Yes

No

**Total Disbursement Amount**

**Requested from RCI Fund:**

\$ \_\_\_\_\_

**SUPPLEMENTAL DOCUMENTATION**

*Please check the corresponding boxes and attach copies of the following documents to this Claim Form, wherein*

- Letters of intent from financial institutions
- Local financial commitment letters
- Contracts with private and public entities
- Memorandums of Understanding with private and public entities
- Ordinances/resolutions
- Cost estimates from qualified sources
- Architecture/engineering drawings
- Development agreements
- Developer qualifications
- Environmental and permitting documents
- Proof of ownership documents
- Tenant/end user commitments

Other relevant Project documentation:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**PROJECT CLAIM FORM**

**REPRESENTATION AND AFFIRMATION**

The undersigned represents that he or she is duly authorized to submit this Claim Form on behalf of the Project. Additionally, he or she affirms that the information and supplemental documentation contained in this Claim

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name, Title or Position

**FOR INTERNAL USE ONLY**

Did the Project receive a positive ROI in the IEDC analysis  Yes  No

Percentage Score from Steering Committee Analysis \_\_\_\_\_ % Percent  
\_\_\_\_\_ XXX Score out of 100