

CITY OF SAN ANTONIO TAX INCREMENT REINVESTMENT ZONE Project Status Report

Pursuant to the Development Agreement, the DEVELOPER has agreed to provide periodic reports of construction to the CITY upon reasonable request. The City requests that the Developer submit a TIRZ project status report every quarter every year until the project is complete, due by:

January 15th, for the first quarter, April 15th, for the second quarter, July 15th, for the third quarter and October 15th, for the fourth quarter

At the completion of the project, the DEVELOPER shall submit a comprehensive final report.

Each quarterly report must include the following information:

- ➤ The number of Private Improvements completed (single-family and/or multi-family and commercial when applicable) and year in which they were completed
- ➤ The Public Improvements completed and costs incurred to date by year in which improvements were completed
- ➤ Indicate whether the construction is on track with the approved Final Project and Finance Plan
- ➤ If the project timeline has slipped, the Developer is to submit an updated project timeline
- ➤ The sale prices of the single-family homes completed (Please obtain and provide sales data for original sales price of every home sold.)
- ➤ Photos of: housing and commercial developments; before, during and after construction

In addition, for the City to monitor compliance with insurance requirements of the Development Agreement, the Developer must submit annually the Certificate of Insurance reflecting proof that:

- ➤ the City and its officers, employees and elected representatives are additional insureds as respects the operations and activities of, or on behalf of, the named insured contracting with the City, with the exception of the workers' compensation policy;
- ➤ the endorsement that the "other insurance" clause shall not apply to the City of San Antonio where the City of San Antonio is an additional insured shown on the policy;
- ➤ the Workers' Compensation and employers' liability policy provides a waiver of subrogation in favor of the City of San Antonio; and
- ➤ Notification to the City of any cancellation, non-renewal or material change in coverage was given not less than thirty (30) days prior to the change or ten (10) days prior to the cancellation due to non-payment of premiums, accompanied by a replacement Certificate of Insurance.

Attached is a form you may use to fulfill this reporting requirement.

TIRZ Project Progress Report (Construction)					
Name of Project:	TIRZ #:				
Progress Report #:	TIRZ Term:				
	From: To:				
Period Covered by this Report:					
From: To:					

The number of Private Improvements (single-family and/or multi-family and commercial if applicable) completed and year in which they were done

			Private Improvements								
Phases (year)			Single-Family Units		Multi-family Units			mercial Square Feet	Other Improvements (example: day care centers)		
	start date	end date	Proposed	Completed	Proposed	Completed	Proposed	Completed	Proposed	Completed	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10							<u> </u>	_			

The Public Improvements completed and costs incurred to date by year (phase) in which improvements occurred

			Public Improvements										
Phases (year)			Sidewalks and Approaches	Streets	Drainage	Water	Sewer	Electrical (Line Extension)	Gas	Street Lights	Traffic Signal Light	Landscaping	Other
	start date	end date	Linear Feet	Li.Ft.	Li.Ft.	Li.Ft.	Li.Ft.	Li.Ft.	Li.Ft.	Number	Number/Locati on	Li.Ft.	
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
TOTALS													

[➤] Is Construction on track with the approved Final Project and Finance Plan? If not, please submit an updated timeline with the actual construction and the projected buildout.

K:\TIF UNIT\Procedural Manual\Project Status Report - final 051305.doc

		Original Pr	oject Plan	Actual/Projected				
Year	Single-Family		Other	Single -Family	Multi -Family	Other		

Certification:	Signature of Certifying Individual:	Date:
I certify that to the best of my knowledge and belief,		
the data above is correct and that all outlays were	Type or printed Name and Title:	Telephone #:
made in accordance with the terms of the	Type of printed Name and Title.	Telephone #.
Development Agreement.		