

HISTORIC PRESERVATION AND CULTURAL AND ENTERTAINMENT DISTRICT CERTIFICATION AND RELEASE OF INFORMATION

Certification and Release of Information

Important: Please carefully read the following and provide the information requested.

List the name of the Applicant, all Related Persons, and all Related Entities. For purposes of the Program, a "Related Person" is any current or prospective officer, principal, director, member, shareholder, partner, or owner of the applicant. For purposes of the Program, a "Related Entity" is any entity owned or controlled in whole or in part by the applicant; any person or entity that owns or controls in whole or in part the applicant; or any entity owned or controlled in whole or in part by any current or prospective officer, principal, director, or owner of the applicant. Answer the following questions as they pertain to the Applicant, all Related Persons, and all Related Entities:

Applicant Legal Name: _____ Contact Name: _____

Street: _____ City: _____ ZIP: _____

RELATED PERSONS/ENTITIES

Legal Name: _____ Contact Name: _____

Street: _____ City: _____ ZIP: _____

Legal Name: _____ Contact Name: _____

Street: _____ City: _____ ZIP: _____

Legal Name: _____ Contact Name: _____

Street: _____ City: _____ ZIP: _____

Legal Name: _____ Contact Name: _____

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STATE HISTORIC PRESERVATION OFFICE OF IOWA

IOWA DEPARTMENT OF CULTURAL AFFAIRS

STATE HISTORIC PRESERVATION OFFICE HPCED CERTIFICATION AND RELEASE OF INFORMATION

600 East Locust Street | Des Moines, IA 50319
(515) 281-8742 | Fax: (515) 282-0502
www.iowahistory.org
Rev 2016-1

- Yes No 1. Has the Applicant or any Related Persons or Related Entities (as defined above) failed to file any local, state, or federal tax returns that are due?
- Yes No 2. Does the Applicant or any Related Person or Related Entity (as defined above) have any overdue local, state, or federal tax liability (including tax, interest, and/or penalty)?
- Yes No 3. Has the Applicant or any Related Persons or Related Entities (as defined above) defaulted on or received a notice of default for, breached, or otherwise failed to comply with any contract, grant award, or tax credit program with the State of Iowa or any agency or other entity of the State of Iowa?
- Yes No 4. Are there any pending administrative, civil, or criminal actions or investigations against or involving the Applicant or any Related Persons or Related Entities (as defined above)?
- Yes No 5. Are there any judgments, injunctions, or court or administrative orders against the Applicant or any Related Persons or Related Entities (as defined above)?
- Yes No 6. Has the Applicant or any Related Person or Related Entity (as defined above) been convicted of any crime or found to have committed wrongdoing, such as fraud, misrepresentation, deceit, consumer fraud, or false claims act violations?
- Yes No 7. In the last three years, has the Applicant or any Related Person or Related Entity (as defined above) been investigated, accused, or charged with any crime or any wrongdoing (including but not limited to administrative or civil investigations, accusations, or proceedings involving allegations of fraud, misrepresentation, deceit, consumer fraud, or false claims act violations)?
- Yes No 8. Have there been any current or past bankruptcies on the part of the Applicant or any Related Persons or Related Entities (as defined above)?
- Yes No 9. In the last three years have there been any investigations of potential violations of public health, safety (including workplace safety), wage and hour, or environmental laws by the Applicant or any Related Persons or Related Entities (as defined above)?
- Yes No 10. Have there been or are there currently any violations of antitrust laws by the Applicant or any Related Persons or Related Entities (as defined above)?

If you answered "yes" to any of the above questions, you must provide a detailed written explanation of all facts and circumstances related to your answer.

I hereby give permission to the Iowa Department of Cultural Affairs (DCA) or the DCA's designee to research the Applicant, contact the Applicant's financial institutions, insurance carriers, and perform other related activities necessary for reasonable evaluation of this application. I also hereby authorize the Iowa Department of Revenue to provide to DCA the Applicant's state tax information pertinent to this Application, including the Applicant's state income tax, sales and use tax, and state tax credits claimed.

I understand that DCA will reject the application if any of the following occurs or exists:

- The applicant fails to answer the questions or fails to provide all requested information and documents
- The applicant provides false or inaccurate information or documents to DCA
- The answer to Questions 1 or 2 above is "Yes."
- The Applicant, a Related Person, or a Related Entity are currently in default, have an uncured breach, or are otherwise not in compliance with any contract, grant award, or tax credit program with the State of Iowa, any agency of the State of Iowa, or any other entity or instrumentality of the State of Iowa.
- The Applicant, a Related Person, or a Related Entity has any past due amounts owed to the State of Iowa, any agency of the State of Iowa, any other entity or instrumentality of the State of Iowa, or any person or entity that is eligible to submit claims to the state offset system under Iowa Code section 8A.504.
- DCA determines, in its sole discretion, that registering the project, entering an agreement with DCA, or permitting the Applicant's tax credit claim would cause the Applicant or another person to default, breach, or otherwise not comply with any contract, grant award, or tax credit program with the State of Iowa, any agency of the State of Iowa, or any other entity or instrumentality of the State of Iowa.
- DCA determines, in its sole discretion, the applicant will not be able to provide representations, warranties, conditions, or other terms of an agreement that would be acceptable to the department.
- The information disclosed causes DCA, in its sole discretion, to decline to enter an agreement with the applicant.

I understand that all information submitted to DCA related to this application is subject to Iowa's Open Record Law (Iowa Code, Chapter 22) and the Department of Cultural Affairs' Public Records and Fair Information Practices (Iowa Administrative Code 221 chapter 2 (2014)).

I understand this application is not an award or promise of tax credits. I understand this application is subject to approval by DCA. Furthermore, I am aware that tax credits will not be disbursed until a contract has been executed by the principal officer of the Applicant and the Director of the Iowa Department of Cultural Affairs and all terms, conditions, and requirements of Iowa Code Chapter 404A, all applicable administrative rules, and the contract have been satisfied.

I hereby certify that all representations, warranties, or statements made or furnished in connection with this application are true and correct in all material respects. I further reaffirm that all information provided in the Part 2 applications remain true and correct in all material respects. If any answers to the questions above or any other information submitted in connection with this application changes, or if any of the explanations associated with any of the questions above or any other information submitted in connection with this application changes, I will update the information in writing within 10 business days of the change. I understand that DCA may terminate the application, registration, contract, or tax credit award due to any failure to answer the questions above accurately or any failure to update the answers to the questions above in the manner described in this certification. **I understand it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring assistance from a state agency or subdivision.**

Date

Applicant's signature (original copy required for SHPO file); please sign in blue ink; digital signatures are not acceptable)