



Tax Increment Finance (TIF) Registry

New Tax Increment Reinvestment Zone

Economic Development
and Analysis
Form 50-807

FOR COMPTROLLER USE ONLY

Log year

TIF ID#

Date rec'd

Complete Back-up Incomplete

No Back-up No Form Submitted

PLEASE PRINT OR TYPE, DO NOT WRITE IN SHADED AREAS.

Please fill out the complete form and attach other documentation (See *Instructions on page 2.*)

STEP 1: Contact Information

Designating City or County _____

Contact Person _____

Title _____

Current Mailing Address (number and street) _____

City _____

County _____

ZIP Code _____

Phone (area code and number) _____

Fax Number _____

E-mail Address _____

STEP 2: Tax Increment Reinvestment Zone Information

1. Name of the tax increment reinvestment zone: _____

2. Included documentation attached to this form (check all that apply):

Creation Documentation Project Plan Financing Plan Guidelines and Criteria

3. The zone's effective creation date: _____

4. The zone's termination date: _____

5. Size of the zone in acres (please provide a description of the zone boundaries in attached documentation): . . . _____

6. Type(s) of property that are currently in this zone (check all that apply):

Industrial/Commercial Residential

7. Types of improvement projects planned (check all that apply):

Public Projects

Public Buildings and Facilities Roadwork

Water/Sewer and Drainage Parks Other Infrastructure: _____

Other Projects

Facade Renovation Parking Historical Preservation

Transit Affordable Housing Economic Development Other: _____

8. Tax increment base (*in dollars*):

9. Participating taxing units and agreed upon tax increments:

Taxing Unit	Tax Increment

STEP 3: Signature of Person Completing Form

sign here ➔

Authorized Signature

Title

Date

Instructions

State Law (Section Sec. 311.019, Tax Code) requires the **municipality or county that designates a reinvestment zone** or approves a project plan or reinvestment zone financing plan to deliver to the Comptroller **before April 1 of the year following the year in which the zone is designated** a report of the project plan and the reinvestment zone financing plan to be included in the central registry. This form and a copy of the plans designating the zone must be submitted to the Texas Comptroller of Public Accounts at the address below:

Comptroller of Public Accounts
Economic Development & Analysis Division
Post Office Box 13528
Austin, Texas 78711-3528

For assistance or to request additional forms, call toll free, 1-800-531-5441 ext. 3-4679. You may also obtain additional forms on the Texas Ahead webpage at www.TexasAhead.org/tax_programs/increment_finance. From a Telecommunication Device for the Deaf (TDD), call 1-800-248-4099 or 512/463-4621.

Step 1: Contact Information

This information provides the Comptroller information on the entity initiating the tax increment reinvestment zone and a contact person. If you did not designate a new tax increment reinvestment zone in your taxing area, you do NOT need to submit this form.

Step 2: Tax Increment Reinvestment Zone Information

Please include the reinvestment zone name listed in the ordinance or resolution creating the zone. Indicate the documentation included with the form. If the documentation is not complete, please attach a copy of the form to the missing documentation and submit it when the documentation is available. Include the zone's effective date, termination date, size in acreage, and types of property within the zone. If the listed types of improvement do not fit the project plan, check other and include the type of improvement. Include the tax increment base and list all the parties participating in the tax increment reinvestment zone and their degree of participation.

Step 3: Signature of Person Completing Form

The person signing the report should be the same person listed in Step 1 as the contact person.