



**CITY OF EL PASO
BROWNFIELDS REDEVELOPMENT PROGRAM
APPLICATION FOR ASSISTANCE**

For Internal Use Only
Date Application Received:
Project Number:

1. Applicant

<input type="checkbox"/> Current Site Owner		<input type="checkbox"/> Other Applicant	
Contact Person:		Organization:	
Mailing Address:		Phone:	
City:	State:	ZIP Code:	
E-mail:			
Internet address:		501(c)(3) Number (if applicable):	
Interest in property:			
Brownfield Programs you are interested in applying for: <input type="checkbox"/> Phase I Assessment <input type="checkbox"/> Phase II Assessment <input type="checkbox"/> Other			

2. General Information

Property/Site Name:			
Street address:			
City:	State:	ZIP Code:	El Paso County Appraisal District ID Number:
Property Size (acres):			

3. Property Use & Ownership

Current property owner:		Previous property owner (most recent):	
Phone:		Phone:	
Mailing Address:		Mailing Address:	
City:	State:	ZIP Code:	City: State: ZIP Code:
Current property use: <i>(Use percentage if site is divided into different use categories.)</i>		Previous property use: <i>(Use percentage if site is divided into different use categories.)</i>	
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<input type="checkbox"/> Undeveloped <input type="checkbox"/> Other	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<input type="checkbox"/> Undeveloped <input type="checkbox"/> Other
If industrial or commercial or mixed, describe type of business(es):			
Is a real estate transaction pending for this site? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when is the planned closing date?			

4. Property Condition

Is the property vacant? <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of years vacant:
Condition of property (Attach Photos):	

5. Environmental Condition / Contamination Concerns

Hazardous Substances <input type="checkbox"/>	Petroleum <input type="checkbox"/>
List hazardous substances previously used or stored on-site:	Tank Location: <i>(Where on the property is/were the underground storage tank(s)?)</i>
Location of former material storage areas:	<input type="checkbox"/> Center of property?
List hazardous substance disposal activities:	<input type="checkbox"/> Main entrance to the property?
Date of known or suspected release of hazardous substance:	<input type="checkbox"/> Maps (may be hand drawn)
	<input type="checkbox"/> Other, please describe:
	Number of tanks: Tank(s) Size:
	<input type="checkbox"/> Empty
	<input type="checkbox"/> Liquid Level <i>(please note in inches)</i>
	Tank (s) Content: <input type="checkbox"/> Current
	<input type="checkbox"/> Previous
Contamination Concerns:	
Have contaminants been detected on property or adjacent property? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please Describe:	

Is there a water well on the property or adjacent property? Yes No

Briefly describe how the clean up and redevelopment of this property will protect human health and the environment:

6. Applicability of Other Regulatory Programs

Has any portion of the site been subject to Texas Commission on Environmental Quality (TCEQ) permit or administrative order? Yes No

Has a state or federal Notice of Violation or any other notice of enforcement action been issued relating to contamination at the site? Yes No

Has there been any prior contact with any state or federal environmental regulatory programs or agencies relating to environmental issues at this site? Yes No

If yes, to any of the above questions, please describe all prior contact with any state or federal environmental regulatory program or agency which relate to each of these questions. Please include copies and dates of any of the above. Attach additional sheets as necessary.

Is a request for reimbursement pre-approval currently under review by the TCEQ's Petroleum Storage Tank (PST) Program or has your site/facility received funding from TCEQ's PST Program? Yes No

If yes, then please describe the site's status in the PST Program:

Has there been any contact with a state lead cleanup assistance program? Yes No

Please provide any and all state and federal identification numbers related to the property in question, including any solid waste registration, leaking petroleum storage tank, Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS), Resource Conservation and Recovery Information System (RCRIS), Underground Injection Control (UIC), etc. registration numbers which have been assigned.

7. Redevelopment Plan

Will redevelopment contribute to other revitalization plans in the surrounding area? Yes No

Give a brief description of your proposed end use plan for the site or provide a copy of your redevelopment plan. Attach additional sheets if necessary.

8. Property Tax Information

Assessed Property Value and date of determination: _____ 200__ Property Taxes:

Are property taxes paid up-to-date on this property? Yes No (Please attach tax receipt, if available)

Tax Incentives Are you interested in signing an agreement with Texas Commission on Environmental Quality to receive a tax incentive after obtaining a VCP Certification of Completion, as allowed under Section 312.2111 of the Texas Tax Code? Yes No

9. Environmental Assessment

Has an environmental site assessment been conducted on the property? Yes No If yes, please provide a copy of the report.

Please include the following. Attach additional sheets as necessary.

- 1. a legal description of the site, including a site map;
- 2. the physical characteristics of the site;
- 3. the operational history of the site, to the extent the history is known by the applicant;
- 4. information that the applicant is aware of concerning the nature and extent of any contamination and/or release at the site and in areas adjacent to the site; and
- 5. relevant information the applicant is aware of concerning the potential for human and environmental exposure to contamination at or leaking from the site.

10. Correctness of Information

The undersigned affirm that the information contained in this application is true and accurate to the best of their knowledge.

Applicant Signature

By: _____ Name: _____

(Signature) (Print or type)

Date: _____ Title: _____

Company: _____ Phone:(_____)

Send Application to: City of El Paso, Environmental Services
Attn: Brownfields Coordinator
7969 San Paulo • El Paso, TX 79907
Or Contact: John Garza
Email: garzajd@elpasotexas.gov
Phone 915-621-6835 • Fax 915-621-6711