



Property Restoration Program

Qualification Packet – Developer

This Qualification Packet is for Developers interested in redeveloping one or more post-third properties located within The City of Ferguson. *If you are interested in owning and occupying a property through this program, please use the “Application Packet – Owner Occupant”.*

Please complete all the enclosed forms to be considered for the Ferguson Property Restoration Program. **All Developers must complete this packet and successfully qualify** for this program in order to apply for specific properties and redevelopment projects.

If you have any questions about the process or forms, please contact the Community Development Coordinator at (314) 521-7721 ex. 2149

Required Forms/Attachments

*All Qualification Packets must be complete, accurate, and include all required attachments in order to be eligible to apply for property acquisition through this Program. **Please submit the following documents:***

- Qualification Packet Application**
 - Attach State Business License*
 - Attach Financial Statements*
 - Attach photos and detailed budgets for any previous projects listed*

Process After Submitting Qualification Packet

Once Developer submits this packet, the following steps will take place:

1. Planning & Development Staff will review packet (within 2 weeks)
2. Developer is notified in writing if they qualify and may proceed
3. Once successfully qualified, Developer will submit an Application Packet to the Planning & Development Staff

Application Packets are available at City Hall or online.

Submit your Qualification Packet (and attachments) to the Planning & Development Department at City Hall – 110 Church St. Ferguson, MO or view email at plandev@fergusoncity.com.



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SECTION 1: PROPERTY INTEREST LIST

Please review the St. Louis County Post-third Sale Property list. List below the properties you are interested in redeveloping through this program, in order (1 = most desired; 10 = least desired).

1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

SECTION 2: GENERAL INFORMATION

1. Owner Name:		2. Business Name:	
3. Business Type: <i>(Corp/LLC/Sole Proprietor)</i>		4. State Formed:	5. Year Established:
6. Federal Tax ID (EIN):		7. Profit Status:	<input type="checkbox"/> For Profit <input type="checkbox"/> Not for Profit
8. If the company was formed in a state other than Missouri, is the company currently authorized to do business in Missouri? Please attach State Business License			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
8a. Describe the nature of your business:			
9. Business Address:			
10. Email Address:			
11. Website:		12. Phone:	

SECTION 3: CREDIT STATEMENT

1. Purchaser(s) Name:			
2. Spouse's Name:			
3. Present Address:			
4. Telephone Number:		5. Email Address:	
6. Number of years at current property:		7. Do you own current property? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Landlord Name:		9. Landlord's Phone:	
10. Your Employer:		11. Phone:	
12. Address:			
13. Position:		14. Number of Years:	
15. Gross Annual Income: <i>Attach W2 or 1040</i>			
16. Spouse's Employer:		17. Phone:	
18. Address:			
19. Position:		20. Num. of Years:	
21. Gross Annual Income: <i>Attach W2 or 1040</i>			
22. List All Real Estate Owned			

22a. Address:			
22b. Address:			
22c. Address:			
23. Please attach the most current audited or unaudited financial statement; including profit & loss and balance sheet for the last three (3) years.			
24. Please answer all questions yes or no – if you answer yes, provide explanation on an attached separate page along with any supporting documentation.			
24a. Do you or your spouse have any outstanding judgments against you (or your spouse)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
24b. Have you had property foreclosed on or given title or deed in lieu thereof, in the last 7 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
24c. Are you a legal U. S. Citizen or permanent resident alien?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
24d. Are you party to any lawsuits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
24e. Do you have any past due obligations owed to or insured by any agency of the federal government?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
24f. Do you owe any delinquent taxes or bills to the City of Ferguson?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
SECTION 4: REFERENCES			
1. Reference Name:		1a. Phone:	
1b. Address:		1c. Email Address:	
1. Reference Name:		1a. Phone:	
1b. Address:		1c. Email Address:	
1. Reference Name:		1a. Phone:	
1b. Address:		1c. Email Address:	
SECTION 5: PROJECT EXAMPLES			
<i>If you have undertaken any projects in the past, describe each project below, include whether it was new construction or rehab/redevelopment (please attach photos and budgets if possible).</i>			
1a. Address:			
1b. Date Started:		1c. Date Complete:	
		1d. Total SQFT	
1e. Starting Budget:		1f. Actual Cost:	
1g. Description/Comments:			
2a. Address:			
2b. Date Started:		2c. Date Complete:	
		2d. Total SQFT	
2e. Starting Budget:		2f. Actual Cost:	

2g. Description/Comments:					
3a. Address:					
3b. Date Started:		3c. Date Complete:		3d. Total SQFT	
3e. Starting Budget:				3f. Actual Cost:	
3g. Description/Comments:					

If you require more space, please attach additional pages.

I CERTIFY THAT THE INFORMATION PROVIDED HEREIN IS TRUE, AND THAT IN THE EVENT OF MISREPRESENTATION, ANY FUTURE AGREEMENT(S) BETWEEN THE CITY OF FERGUSON AND MYSELF OR MY BUSINESS IS (ARE) VOIDED.

Signature of Applicant:		Date:	
Print Name:		Cellular Phone:	

OFFICE USE			
Approval Signature:		Date:	
Print Name:	Bailey Mitchell	Title:	Community Development Coordinator
Approval Signature:		Date:	
Print Name:	Elliot Liebson	Title:	Planning & Development Director
Approval Signature:		Date:	
Print Name:	Eric Osterberg	Title:	City Manager