

ITEM II

DRAFT MINUTES

DRAFT
MEETING MINUTES
NORTHWEST-PROGRESSO-FLAGLER HEIGHTS
REDEVELOPMENT ADVISORY BOARD
FORT LAUDERDALE
8TH FLOOR CONFERENCE ROOM, CITY HALL
OCTOBER 10, 2017 – 3 :00 P.M.

Cumulative Attendance

May 2017-April 2018

Members Present

	<u>Attendance</u>	<u>Present</u>	<u>Absent</u>
Ron Centamore, Chair	P	3	1
Leann Barber (arrived at 3:12 p.m.)	P	4	0
Brad Cohen	NP	2	2
Alan Gabriel	P	4	0
Rhoda Glasco Foderingham	P	4	0
John Hart	P	4	0
Mickey Hinton	NP	2	2
John Hooper	P	3	1
Dylan Lagi (arrived 3:20)	P	3	1
Steffen Lue (arrived at 3:12 p.m.)	P	4	0
Diane Randolph	P	1	0
Scott Strawbridge	P	4	0
Tina Teague	P	4	0
John Wilkes	NP	3	1

Staff

Vanessa Martin, CRA Business Manager
Lizeth DeTorres, Administrative Aide
D'Wayne Spence, NPF-CRA Manager
Christina Fanchi, PE, PTP Transportation Engineering Design Manager
Bob Wojcik, Planner II
Glendon Hall, Housing and Economic Development Manager
Jamie Oppерlee, Prototype-Inc.

I. Call to Order/Roll Call

NPF CRA Chair

Chair Centamore called the meeting to order at 3:06 p.m. and roll call was called.

II. Approval of Minutes

NPF CRA Chair

- July 18, 2017

Motion made by Mr. Gabriel, seconded by Mr. Hart, to approve. In a voice vote, the **motion** passed unanimously.

III. Introduction of NPF-CRA Manager

D'Wayne Spence
NPF-CRA Manager

Chair Centamore introduced Mr. D'Wayne Spence, who came from the Legal Department.

Mr. Spence is the new Northwest Progresso Flagler Village Area Manager. A little biography was provided and it was noted that Mr. Spence was a planner then an attorney in land use. Now that he

is with Planning and Administration, Mr. Spence is going to work with the NPF CRA. One of the rules and functions of interest is seeing the mission of the plan move forward. As an Advisory Board, the Board is advisors to the CRA Board of Commissioners, which is also the City Commission. Mr. Spence functions as the manager of the area and responds to and is responsible to the Executive Director, who is the City Manager, Lee Feldman. Mr. Spence's direction is to implement the plan and administrate to the staff and members associated with the direction of the plan. The Board's function is to review recommendations that are technical to staff and make suggestions to the CRA. There is also a role of making suggestions and recommendations as to how to move this plan forward in this area. The City Commission has outlined a couple of mandates. The Flagler Village area has the momentum in that the goals set for that area have been met; therefore, there is a direct request to start concentrating on Progresso in the northwest area with regards to incentive programs. The Flagler Village area is still a part of the CRA area and there are still some issues with some patches in the area. The direction from the Board of Commissioners is that the incentive programs be directed towards the northwest and the Progresso area. Mr. Spence read a couple of the objectives from the plan and noted that the goals in mind are preservation, rehabilitation, and redevelopment. Technical staff will be pushing for strategy keys that have been approved and that are viewed as directives in implementing the plan within the CRA. It is believed that a lot can be accomplished in the eight years left to work.

NOTE: Ms. Barber and Mr. Lue arrived at 3:12 p.m.

Chair Centamore welcomed Diane Randolph, new member.

Ms. Randolph works with Representative Barring Russell in District 95.

IV. Sistrunk Crosswalk Project

**Christina Fanchi, PE, PTP
Transportation Engineering
Design Manager**

Ms. Fanchi advised that attempts are being made to resurrect the Sistrunk Crosswalk project. The first order of business is to go back out to the public and determine where people need to cross and the conditions that exist today. Ms. Fanchi attended the Home Beautiful Homeowner's Association meeting last week and is planning to go to the Progresso Homeowner's Association meeting next Monday. She is reaching out to Durrs and Dorsey to get on their agendas for the next meeting and she reached out to the Merchant's Association today to see if a joint meeting could be done between the Midtown Council, the Chamber of Commerce, the Sistrunk Council, and the Negro Chamber. The crosswalk infrastructure could mean stripes and signs, flashing lights, or a signal. An analysis of what level of infrastructure will be done. Parking or trees may need to be shifted and all of that will come after it is decided where they need to go. Ms. Fanchi will be working with the Board to get out and get the public outreach needed to identify locations and where crosswalks can go. The Board will go out and count to see where pedestrians are crossing so the facility can be designed correctly.

Ms. Glasco questioned where the boundaries are located.

Ms. Fanchi stated that the boundaries are between the FEC tracks and NW 19th Avenue, which is the priority area.

Mr. Strawbridge questioned whether there would be consideration for providing ADA compliant landings for the trolley that circulates up and down.

Ms. Fanchi believed that should be discussion for the public outreach.

Mr. Strawbridge commented that new transit plan calls for ADA compliance of the Sun Trolley by 2028. If streetscape improvements are going to be done on Sistrunk Boulevard it would seem as though that is what the Board should work on.

Ms. Fanchi indicated that there is a ribbon cutting next week in the Central City Alliance area down to 13th Street.

V. Fiscal Year 2018 Incentive Budget Discussion

Vanessa Martin
Business Manager

Ms. Martin mentioned that 2017 went very well. Of the \$12.3 million they had last year, about \$10 million was spent, with spent meaning put on hold, reserved, or obligated. In fiscal year 2018, the projection to spend is approximately \$6.6 million in incentives. Moving forward with November, the breakdown will be seen of what is projected to be spent. Some of those numbers will come for approval recommendation. A basic snapshot of revenues are expenditures. Funds are available for incentives of \$5.9 million and there is overtime for Police Officers of \$103,000 to help ensure the public is safe within the northwest area.

Mr. Strawbridge commented that the budget breakdown for the beach compared to the northwest and noted that staffing for the beach has comparable revenues and staffing the northwest was nine. Mr. Strawbridge questioned if there is a reason so many more people are needed to administer the same amount of funds.

Ms. Martin believed, from her perspective of the northwest, there are three Administrative staff, which is herself and two others as a support group. They assist the beach and the northwest; costs are split. There are project managers who were hired to help ensure with the incentives and capital projects that are underway.

Mr. Strawbridge indicated that the beach required four full-time employees and the northwest required nine.

Ms. Martin stated that the beach sunsets in a couple of years and even trying to bring on new staff is difficult because who is going to take the risk of having a job for two years. The northwest sunsets in about nine years so that gives more leverage to hire people to get the work done within that timeframe.

Mr. Spence mentioned that is not a fair comparison. The beach projects are fully underway. The challenges west of the tracks is substantial work that needs to be done within the eight years left. There are different types of programs administrated and they do not have the same incentive programs as the CRA area.

VI. Communication to the CRA Board

NPF CRA Chair

None.

VII. Old/New Business

There was no new business.

With regard to old business, Ann Marie Sorrell, Manager of the Mosaic Group, provided an update. Since the last time she was here the lodge has been done and a new Historic Sistrunk website; HistoricSistrunk.com. or FortLauderdaleCRA.com website, has been launched, which means all

neighborhoods now have a functioning website. Information is needed from the neighborhoods to update the websites. Ms. Sorrel mentioned a few events as follows:

- Last weekend was START weekend. There was initially about 167 registrants. Months ago, there was discussion about having a startup initiative that targeted food, art, and retail type businesses. Winners would receive a \$5,000 grant or multiple \$5,000 grants.
- After meeting with the BEAM program, it was realized it was not a good fit from a flexibility and scheduling standpoint as well as their curriculum.
- The next meeting was with the Urban League of Broward County and Metro Broward. It was decided to do a partnership with the Urban League of Broward County to deplete the long-range Technical Assistant Training Institute, because Metro Broward was targeting the CRA to do the program versus the Urban League, who was not charging the CRA. It was a true partnership where the participants, as a part of their grant and programming, would be utilized and it was felt that was the best fit.
- The Urban League of Broward County was there for the START weekend and there were 89 registrations. There was about 60+ participants and a total of 26 pitches Friday night, which was the initial first round pitch. It was narrowed down to 13 businesses that would go onto Saturday to do Part 2, which was a longer ten-minute pitch in which participants had about six hours to come up with a watered-down version of a business plan. There was a panel of judges, which included Wells Fargo, Thomasina from the CRA, St. Thomas University and the Community Investment Alliance of South Florida, and Cornell Cruise on the Board.
- The first-place winner was RX Restorative Skin and Hair; hair products for those who lose their hair, and a \$5,000 grant was received.
- The second-place winner was Easy Peasy Vege Blends, which is more nutritional organic food retail, and a \$2,500 grant was received.
- The third-place winner was PSLR Construction, and a \$2,500 grant was received.
- All winners will go on to participate in the Institute and must complete the six-week Institute program in order to receive the grant funding. The grant funding must be spent on CRA approved expenses and the businesses must be located within the CRA.
- A piece of the Detroit's Motor City Match Program will be taken to match property owners with the three winners as well as inviting the other participants to participate in a six-week program as well. Hopefully that will attract three to five new businesses to the area. Participants can work with the property owner to apply for additional CRA incentives and funding to get their business going.
- The Sun Sentinel wants to do an exclusive story for the winners so that information will be sent out today along with photographs. Ads have been placed since June in Legacy Magazine, which was distributed over the past few months. Through the Sun Sentinel an advertorial was placed, which highlights some of the various projects the CRA has funded this year as well as where the opportunities are. The upcoming guide is distributed through the Alliance as well as through the South Florida Business Journal. Other than that, social media updates on hurricane, community, and new information have been done as well as any types of stories coming from the agency.

Ms. Barber questioned the budget for the small businesses.

Ms. Sorrell advised that a little over \$10,000 was spent putting the event together and then two \$2,500 grants and a \$5,000 grant, which is not an actual cash exchange. The grants are either for services the CRA hired or for the approval of vendors; the total was about \$21,000. Ms. Sorrell stated this is probably her second to last meeting with this Board because her contract officially ends on November 3, 2017 and she was informed that the contract will not be renewed. A final wrap up

and a close out report will be provided at the next CRA Advisory Board meeting. All the passwords and files will be turned over to Thomasina and the rest of the team.

VIII. Public Comment

None.

Chair Centamore advised that the City will be holding a meeting in the downstairs Chambers on the Comprehensive Plan on October 24, 2017, between 6:00 p.m. and 8:00 p.m. This plan was initiated by the Council Civic Associations and has been ongoing for approximately three years. The flyer is not yet available; however, it will be forwarded to staff upon receipt.

Mr. Gabriel questioned upcoming projects.

Mr. Hall mentioned two upcoming projects:

- Dale's Tires
- The Upgrade to the strip mall will tie into some of the development going through there as far as WaWa at Andrews Avenue and Sunrise Boulevard. Just west of WaWa is a new Dunkin' Donuts.
- Howard Upholstery has been in business for about 30 years and his son is going to take over the business. Three sets of plans have been done based on the footprint of the building, to expand the building, to help the operations, and to have more of a showroom.

Mr. Spence mentioned the Fast Casual Wing spot could be in the corridor as well.

Mr. Wojcik indicated that the RFP is moving forward.

Chair Centamore commented that the two mid-rise apartment buildings in Progresso on Andrews Avenue being designed has not yet come before the Board. Mr. Centamore stated that the WaWa shopping center complex says they are not going to ask for any funding, they are doing it on their own.

IX. Adjournment

There being no further business to come before the Board at this time, the meeting was adjourned at 3:37 p.m.

Any written public comments made 48 hours prior to the meeting regarding items discussed during the proceedings have been attached hereto.

[Minutes prepared by C. Guifarro, Prototype-Inc.]

ITEM IV
PROJECT FUNDING UPDATE

Northwest Progresso Flagler Heights Project Tracking						November 8, 2017										Color indicates process was completed FY 2018 FUNDS	
Community Redevelopment Agency (Beginning as of 10/1/2017)																Color indicates assistance will be paid in FY 2019/FY 2020	
Beginning Incentive Bal. FY 18						\$ 5,953,727		FY 2018								Color indicates PROPOSED FY 2018 Incentive Projects	
Less Obligated Projected Incentive Funds FY 18						\$ (5,255,500)											
Projected Remaining Funds as of 11.8.17						\$ 698,227											
Anticipated Date of Project Completion	BUSINESS INCENTIVES	Assignee	CAM #	CAM DATE	BASIS	% Done	FY 18 PROPOSED Incentive Projects	Advisory Board Recommended Funding	CRA Board Approved Funding	Total \$ Approved / Encumbered for Payment to Date	Total \$ Paid to Date	Appropriated Balance	FY 18 Obligated & Proposed Obligated Funds	Actual (Paid)		Proposed FY 18 Remaining Funds	
Property Tax Reimbursement CRA091805			Annual reduction based on approval									\$ -					
														\$ -			
Development Incentive CRA091804			Terms based on approval									\$ 4,000,000					
	YMCA - Year 2	G. Hall	17-0875	8/22/2017	Funding Assistance	0.0%			\$ 1,250,000				\$ 4,000,000	\$ 4,000,000	\$ -	\$ -	
	The SIX13 - Year 2	G. Hall	17-0633	6/6/2017	Funding Assistance	0.0%			\$ 2,000,000								
	Sistrunk Market Project	B. Wojcik	17-0940	1/1/2018	Forgivable Loan	0.0%		\$ 1,400,000									
	StartUps.Club	B. Wojcik	17-1140	10/3/2017		0.0%		\$ -	\$ 350,000								
	Howard's Upholstery	G. Hall				0.0%		\$ 350,000									
	Hoover Architectural Products	G. Hall				0.0%		\$ 1,000,000									
Streetscape Enhancement CRA091803			Up to 70% or 90%/\$500,000									\$ 453,727					
	Walker Elementary Safe Routes to School	B. Wojcik	17-0503	4/19/2017	School Project	0.0%			\$ 159,000				\$ 408,000			\$ 45,727	
	Dales Tires	G. Hall			Funding Assistance	0.0%	\$ 350,000										
	Urban North LLC	G. Hall			Funding Assistance	0.0%			\$ 8,000								
	15th Avenue Church of God	G. Hall			Funding Assistance	0.0%	\$ 50,000										
Property & Façade Improvement CRA091802			Up to 75% or 90%/\$500,000									\$ 777,500					
									\$ -				\$ 600,000			\$ 177,500	
	Solid Soccer LLC-MAS Café Project	B. Wojcik			Funding Assistance	0.0%	\$ 225,000										
	Gail Hyatt - Sistrunk Retail Center	B. Wojcik			Funding Assistance	0.0%	\$ 225,000										
	Builders Bargin	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	Dan Levy	B. Wojcik			Funding Assistance	0.0%	\$ 50,000										
	Rechter Holdings (835 LLC)	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	Rechter Holdings (837 LLC)	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	Bo Persaud	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	MAR Holdings LLC	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	Joelo Holdings	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	GFC Enterprises LLC	B. Wojcik			Funding Assistance	0.0%		\$ 50,000									
	Argyle Coffee	B. Wojcik			Funding Assistance	0.0%		\$ 37,000									
	New Hope Church	G. Hall			Funding Assistance	0.0%	\$ 50,000										
	European Auto Specialty	G. Hall			Funding Assistance	0.0%		\$ 50,000									
	The Light Center	G. Hall			Funding Assistance	0.0%	\$ 50,000										
Commercial Façade Improvement CRA091801			Up to 75% or 90%/\$125,000														\$ 722,500

	Craig Brody Warehouse	G. Hall	17-0937	9/6/2017	Funding Assistance	0.0%							\$ 247,500		\$ 475,000
	Aero Tech	B. Wojcik			Funding Assistance	0.0%	\$ 7,500								
	Rechter Holdings	B. Wojcik			Funding Assistance	0.0%	\$ 7,500								
	CHDS LLC (Smitty's)	B. Wojcik			Funding Assistance	0.0%	\$ 225,000								
	Scott Hoffman- Aero Tech Labs	B. Wojcik			Funding Assistance	0.0%	\$ 7,500								
*** BUSINESS INCENTIVES FUNDING TOTAL:												\$ 5,953,727	\$ 5,255,500	\$ -	\$ 698,227
Anticipated Date of Project Completion	RESIDENTIAL INCENTIVES	Assignee	CAM #	CAM DATE	BASIS	% Done		Advisory Board Recommended Funding	CRA Board Approved Funding	Total \$ Approved / Encumbered for Payment to Date	Total \$ Paid to Date	Appropriated Balance		Actual (Paid)	FY 18 Remaining Funds
	Residential Rehabilitation Program (Single-Family homes) CRA091806				Up to \$55,000/\$75,000							-			\$ -
									\$ -	\$ -	\$ -				\$ -
	Purchase Assistance Program (Single-Family homes) CRA091807				Up to \$45,000/Affordability need							-			\$ -
									\$ -	\$ -	\$ -				\$ -
*** RESIDENTIAL INCENTIVES FUNDING TOTAL:												\$ -		\$ -	\$ -
															*
NPF CRA INCENTIVE FUNDING TOTAL:												\$ 5,953,727		\$ -	\$ -

ITEM VI

CHDS LLC FUNDING REQUEST



CITY OF FORT LAUDERDALE

COMMUNITY REDEVELOPMENT AGENCY

MEMORANDUM

DATE: November 14, 2017

TO: NPF CRA Advisory Board Members

FROM: D'Wayne Spence, NPF CRA Manager 

SUBJECT: Funding Request: \$125,000 CRA Façade Program and \$225,000
CRA Property and Business Improvement Program - 1134 LLC
1134 Sistrunk Boulevard - Smitty's Wings on Sistrunk

FUNDING REQUEST

Applicant 1134 L.L.C. is seeking a \$125,000 forgivable loan from the Community Redevelopment Agency's ("CRA") Commercial Façade Improvement Program ("CFIP") and \$225,000 forgivable loan from the CRA's Property and Business Improvement Program ("PBIP") for Smitty's Wings on Sistrunk, a new restaurant proposed at 1134 Sistrunk Boulevard. A copy of the Location Map, Broward County Property Appraiser Information, Illustrations and Funding Application/Business Plan is attached as **Exhibits A through D**.

BACKGROUND

Sistrunk Boulevard between NW 24th Avenue and the FEC Railway is a designated focus area for both the CFIP and the PBIP incentive programs. Focus areas provided more generous funding options in order to encourage redevelopment of these areas. The CFIP incentive in this focus area provides a forgivable loan for 100% of eligible project costs, not to exceed \$75,000. Project cost above \$75,000 requires an owner cash investment of 5%. Maximum funding under the program is \$125,000. The PBIP has a special emphasis in creating dining destinations within the City by attracting new restaurants to the CRA. In the focus area, this program provides up to 90% of the eligible costs not to exceed \$225,000. The Applicant requests a total of \$350,000 in CRA funding from the two programs to be secured by a 7-year forgivable mortgage on the property with the property owner's consent. There is no mortgage on the property and the Applicant is providing a \$50,000 cash contribution. There is no other lender involvement.

CHDS LLC, whose president is LaDesorae Giles-Smith, purchased the one story, 2,500 square foot building and site at 1134 Sistrunk Boulevard in 2011 for \$45,000. The building is usable but will require total renovation for this project. The Broward County Property Appraiser estimates the Just/Market Value of the property to be \$158,140. Total project improvement cost is estimated at \$400,000. Construction will be bid and

managed by CRA staff. The project has been reviewed by City of Fort Lauderdale's Planning and Design Division of the Department of Sustainability.

\$338,355	construction rehabilitation
\$49,504	equipment and fixtures
\$12,141	contingencies
<u>\$400,000</u>	Total

Chris Smith and LaDesorae Giles-Smith are the managers of Applicant, 1134 L.L.C. The husband and wife team have other investments along Sistrunk Boulevard including Smith Plaza, a 5176 square foot retail center at 733 Sistrunk Boulevard, and an 1104 square foot office building at 2151 Sistrunk Boulevard. Chris Smith is an attorney and former elected official in Fort Lauderdale for 18 years serving eight years in the Florida Senate before being term limited in 2016. LaDesorae Giles-Smith serves as the first African American and first female Deputy City Manager in the City of Lauderdale. She also is the Vice President of the Dorsey Riverbend Homeowners Association. They reside six blocks from the location of the proposed restaurant.

The restaurant proposed for the site is Smitty's Wings on Sistrunk, an eat-in restaurant. The restaurant is proposed to have twelve tables with seating for fifty. Initially the only product sold at Smitty's will be chicken wings and fries. Wings will be sauced and tossed in your favorite wing flavor of ten flavor options and served with dips such as ranch, blue cheese and cheese sauces. Beverages sold will include fountain drinks, home-style lemonade, sweet tea, and beer and wine. Smitty's will host family oriented events to attract customers such as sports nights, birthday parties, and fund raising events. Frequent buyer cards will be employed to entice repeat customers. Smitty's will also sponsor a local little league football team to help publicize the restaurant within community events. Delivery service will also be provided.

Smitty's Wings will provide 5 to 7 new jobs with hiring preferences individuals living in the northwest community. The restaurant will be co-managed by the Smiths and their management team includes Daryl Harris who started Northing But Wings 13 years ago and has managed the restaurant ever since. He is also a business professor at Atlantic Vocational and Technical University. Mr. Harris will provide ongoing consulting services to the Smiths on the day-to-day operations of the restaurant. Smitty's estimates sales of \$239,200 the first year increasing by 10% annually.

The Sistrunk Enhancement Project, completed a few years ago, eliminated all of the parking for the site at 1134 Sistrunk, which then consisted of back out parking onto Sistrunk Boulevard. The property directly adjacent and to the west of Smitty's is proposed as a 24 spaces, non-metered public parking lot funded by the CRA. The new zoning along Sistrunk allows for the first 2,500 square foot of a commercial building to be parking exempt. The 2,500 square foot Smitty's Wings is parking exempt but can benefit from the proposed public parking lot to be constructed adjacent to their building.

CONSISTENCY WITH THE NPF CRA COMMUNITY REDEVELOPMENT PLAN

The NPF CRA Community Redevelopment Plan is designed, in part to stimulate private development of areas planned for commercial development. The project is consistent with the NPF CRA Community Redevelopment Plan which provides for direct physical improvements to enhance the overall environment, improve the quality of life and attracts sound business and commercial developments that provide employment and job opportunities.

RECOMMENDATION

Community Redevelopment Agency (CRA) staff recommends a funding assistance package from the Commercial Façade Improvement Program not to exceed \$125,000 and from the Property and Business Improvement Program not to exceed \$225,000.

Attachments:

Exhibit A: Location Map

Exhibit B: Broward County Property Appraiser Information

Exhibit C: Before and After Project Illustration and Plans

Exhibit D: CRA Funding Application/Business Plan

Author: Bob Wojcik, AICP

LOCATION MAP

Exhibit A



Smitty's Wings on Sistunk – 1134 Sistrunk Boulevard



MARTY KIAR
BR **WARD**
 COUNTY
 PROPERTY APPRAISER

Site Address	1134 NW 6 STREET, FORT LAUDERDALE FL 33311	ID #	5042 04 05 0320
Property Owner	CHDS LLC	Millage	0312
Mailing Address	1740 NW 3 COURT FORT LAUDERDALE FL 33311	Use	11
Abbreviated Legal Description	TUSKEGEE PARK 3-9 B LOT 8 LESS RD R/W BLK 3		

The just values displayed below were set in compliance with Sec. 193.011, Fla. Stat., and include a reduction for costs of sale and other adjustments required by Sec. 193.011(8).

Property Assessment Values					
Click here to see 2016 Exemptions and Taxable Values as reflected on the Nov. 1, 2016 tax bill.					
Year	Land	Building / Improvement	Just / Market Value	Assessed / SOH Value	Tax
2017	\$70,090	\$88,050	\$158,140	\$152,190	
2016	\$70,090	\$74,090	\$144,180	\$138,360	\$3,502.35
2015	\$70,090	\$55,700	\$125,790	\$125,790	\$3,157.75

2017 Exemptions and Taxable Values by Taxing Authority				
	County	School Board	Municipal	Independent
Just Value	\$158,140	\$158,140	\$158,140	\$158,140
Portability	0	0	0	0
Assessed/SOH	\$152,190	\$158,140	\$152,190	\$152,190
Homestead	0	0	0	0
Add. Homestead	0	0	0	0
Wid/Vet/Dis	0	0	0	0
Senior	0	0	0	0
Exempt Type	0	0	0	0
Taxable	\$152,190	\$158,140	\$152,190	\$152,190

Sales History				Land Calculations		
Date	Type	Price	Book/Page or CIN	Price	Factor	Type
4/22/2011	QCD-T	\$100	47869 / 576	\$11.00	6,372	SF
1/6/2011	WD-E	\$45,000	47637 / 247			
8/21/2009	PRD-T	\$100	46501 / 774			
7/1/1985	WD	\$2,000	12715 / 156			
1/1/1968	WD	\$5,000				
				Adj. Bldg. S.F. (Card, Sketch)		2537
				Eff./Act. Year Built: 1987/1986		

Special Assessments								
Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc
03							FL	
C								
2537							311.49	

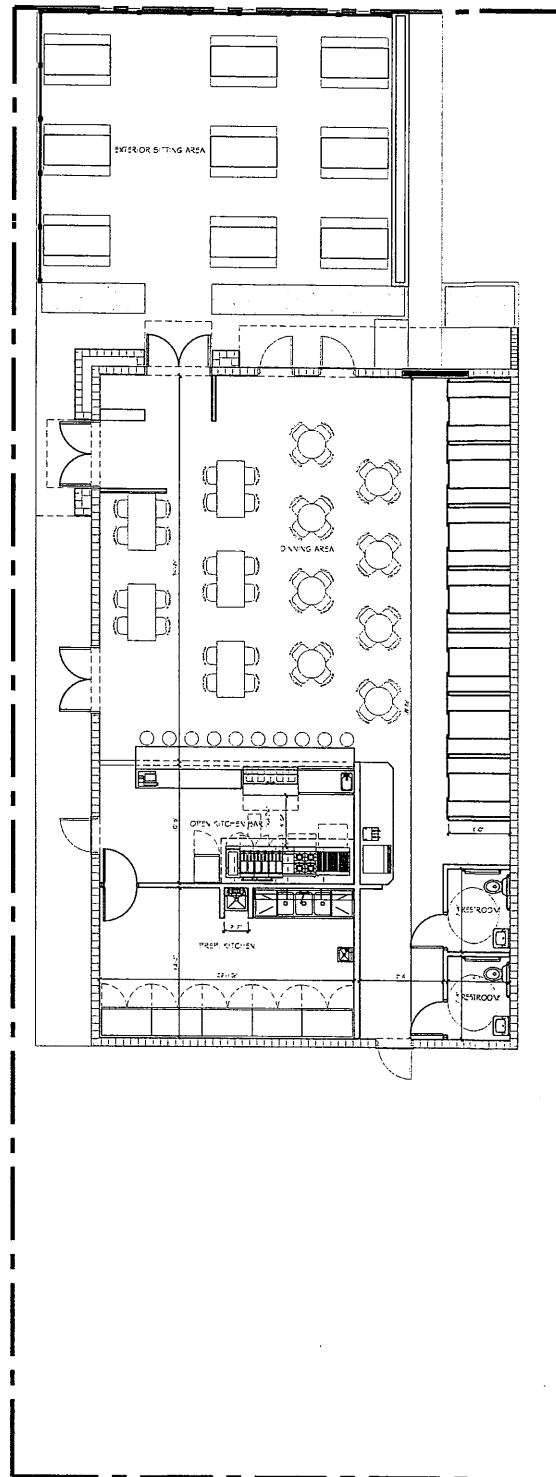
Current View

Exhibit C



After

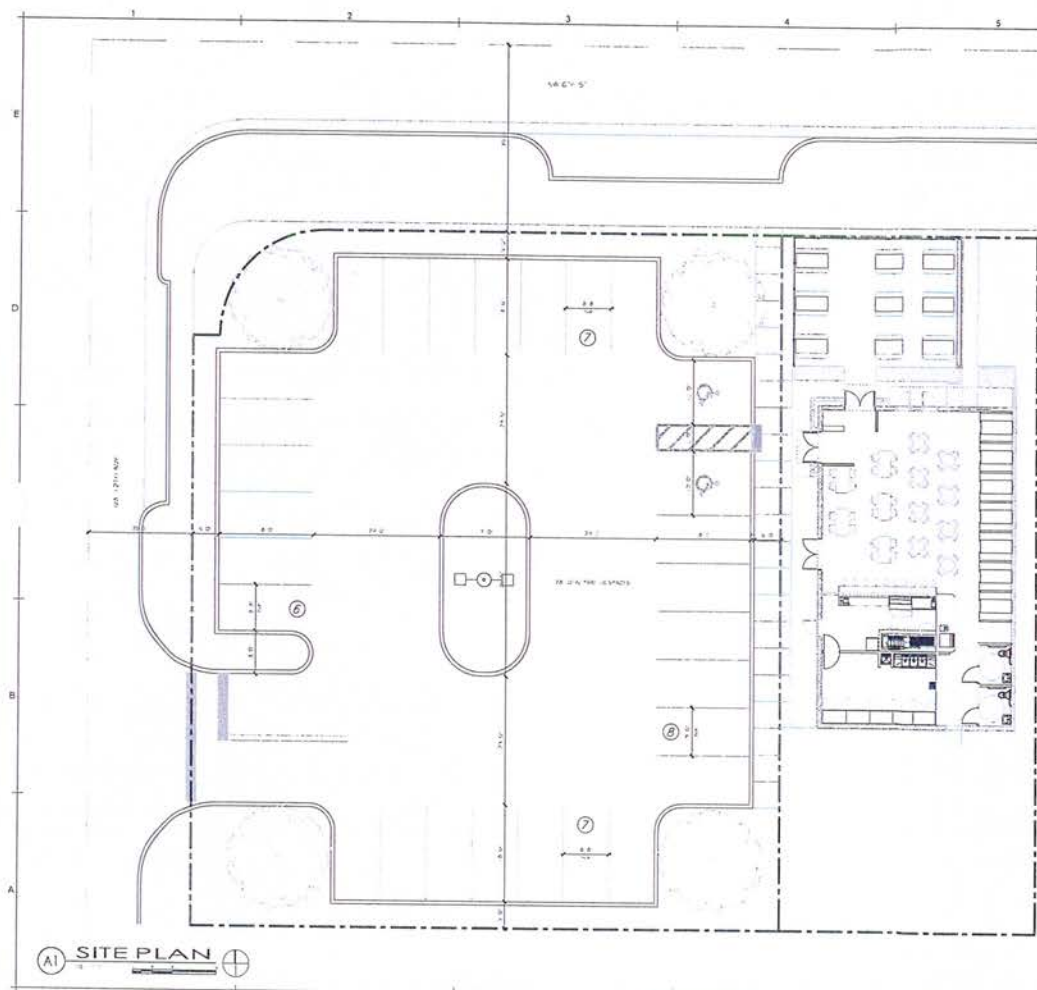




A1 FLOOR PLAN

3/32" = 1'-0"

0 8' 16' 24'



A1 SITE PLAN

A6 NOT USED

**BUILDING IMPROVEMENTS FOR
SMITTY'S WINGS**

PORT LAUDERDALE, FLORIDA

harrison gensler architecture & planning • interior design

10000 W. 11th Avenue, Suite 200 • Fort Lauderdale, FL 33324 • 954.574.1100

DATE	BY	CHKD BY	APP'D BY
03-01-2017	JPB	ESB	JPB
03-01-2017	JPB	ESB	JPB

SITE PLAN

DATE: 03-01-2017

AS-101

THE ARCHITECT HEREBY CERTIFIES, IN WITNESS WHEREOF, THE ARCHITECT HAS HEREIN SET HIS HAND AND SEAL, THIS 1ST DAY OF MARCH, 2017, AT PORT LAUDERDALE, FLORIDA.

BUSINESS PLAN



Smitty's
ON SISTRUNK

Submitted to
City of Fort Lauderdale CRA

<u>CRA Application</u>	1
<u>Business Plan</u>	2
<u>Owner's Equity</u>	3
<u>Construction Estimates</u>	4
<u>Property Information</u>	5
<u>Equipment Estimates</u>	6
<u>Corporation Documents</u>	7
<u>Jobs Information</u>	8

City of Fort Lauderdale

Northwest-Progresso-Flagler Heights
Community Redevelopment Agency
(NWPF CRA)



APPLICATION FOR CRA FUNDING ASSISTANCE

Name of Principal Owner in Charge Desorae Giles-Smith		Tel. No. 954 - 336 - 1551		E-Mail Address desoraegs@gmail.com	
Primary Contact for this CRA Request Desorae Giles-Smith		Tel. No. 954 - 336 - 1551		E-Mail Address desoraegs@gmail.com	
Name of Business 1134 L.L.C.		Tax I.D. No.		Company Website	
Business Address 1740 N.W. 3rd Court		Tel. No. 954 - 763 - 2887		Fax No.	
City Fort Lauderdale		State Florida		Zip Code 33311	
Commencement Date to Begin Project: <u>August 1, 2017</u>				JOB INFORMATION	
Completion Date for Project: <u>January 1, 2018</u>					
Check Appropriate Description ☐ Existing Business ☒ New Business		Project Type ☒ Expansion ☐ Relocation		Facility Description Existing Space <u>2500</u> sq. ft. New Space <u>0</u> sq. ft.	
NAICS Code / Industry Type 722511		Date of Incorporation Jan 25, 2017		State where the business was incorporated Florida	
Proposed Project Location/City Fort Lauderdale		Proposed Address 1134 N.W. 6th Street		Full Time Equivalent (FTE) Jobs to be created <u>6</u>	
Property Control Number(s) 5042 04 05 0320		Property Owner CHDS LLC		Existing Jobs <u>0</u>	
Owner Tel. No. (include Area Code) 954 - 336 - 1551		Is there a lien on the property? ☐ Yes ☒ No		Total FTE Jobs <u>6</u>	
TYPE OF BUSINESS					
Sole Proprietor _____					
Partnership _____					
Joint Venture _____					
Corporation _____					
Cooperative _____					
Limited Liability Company <u>X</u>					
Non-Profit Org. _____					
Other: _____					
Bank(s) Where Business Accounts for Projects Are Held					
1. Bank of America			2.		
Name of Participating Bank/Lender					
Amount \$	Contact Person	Tel. No. (include Area Code)		Fax No. (include Area Code)	
Name of Other Financial Source ICMA - RC					
Amount \$ 50,000.00	Contact Person Knicketta Vassell-Bullock	Tel. No. (include Area Code) 202-288-8748		Fax No. (include Area Code)	
Name of Other Financial Source					
Amount \$	Contact Person	Tel. No. (include Area Code)		Fax No. (include Area Code)	
Name of Other Financial Source					
Amount \$	Contact Person	Tel. No. (include Area Code)		Fax No. (include Area Code)	
Name of Other Financial Source					
Project Purpose and Economic Impact Using high quality standards to serve our customers and community with great, delicious, and comforting food in a respectable, open, diverse and welcoming atmosphere that generates substantial profits and growth for our business. This will provide only the 2nd waiter service restaurant in the Northwest section of the city. This will provide a renovated like new restaurant that will increase the value of surrounding properties and provide economic opportunity and employment opportunity for the community.					

NOTE 1: If the project receives funds via another City, County, Federal or State program which also requires job creation/retention, the jobs created/retained for those programs must be in addition to the jobs required under this program.

NOTE 2: If project includes the purchase of equipment using CRA funds, then there must not be another UCC filing for the equipment.

Management: Owners, partners, officers, all holders of outstanding stock — 100% of ownership must be shown (use separate sheet if necessary)

Name	Complete Address	% Owned	From	To
Desorae Giles Smith	1740 N.W. 3rd Court Ft. Lauderdale Fl 33311	%50	1/25/2017	present
Name	Complete Address	% Owned	From	To
Christopher Smith	1740 N.W. 3rd Court Ft Lauderdale Fl 33311	%50	1/25/2017	present
Name	Complete Address	% Owned	From	To
Name	Complete Address	% Owned	From	To
Name	Complete Address	% Owned	From	To

PROJECT/ACTIVITY COST SUMMARY	
1. Please state the overall project cost:	\$ \$400,000.
2. Please state the overall project costs related to the CRA's assisted activity?	\$ 350,000
3. Please indicate the sources and uses of funds for the project on the following table.	

Project Source(s) of Funding	Amount	Rate	Term
Bank Loan (specify)			
City funds			
CRA funds	\$350,000		
Company's current cash assets			
Owner equity (specify)	50,000		
Other (specify)			
Other (specify)			
Other (specify)			
Total Sources	\$400,000		
Select the Use(s) of Funds and the Amount Need for Each	Sources of Funds (Yes or No)	Amount	
Land Acquisition	No		
Real Property Acquisition	Yes	\$45,000 *on 1/2011	
Utility and road infrastructure improvements			
New construction of commercial and industrial buildings			
Rehabilitation of commercial and industrial buildings	Yes	\$338,355	
Purchase and installation of equipment and fixtures		\$49,504	
Sub-Total		\$387,859	
Other (specify) contingencies		\$12,141	
Other (specify)			
Total Uses		\$400,000	

NOTE 3: Other "uses" include Architectural/Engineering Fees, Application Fees, Permit Fees Impact Fees

BUSINESS INDEBTEDNESS: Furnish the following information on all outstanding installment debts, code and other liens, notes and mortgages payable that relate to this project. The present balances should agree with the latest balance sheet submitted (*use a separate sheet if necessary*).

To Whom Payable	Original Amount	Original Date	Present Balance	Rate of Interest	Maturity Date	Monthly Payment
Name: NONE	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$

THE FOLLOWING ITEMS MUST BE COMPLETED AND SUBMITTED WITH YOUR APPLICATION

1. A business plan which describes the company mission, market analysis, applicant capacity, economic analysis and project feasibility, a brief history and description of the company (*including the founding of the company*), overview of operations, product information, customer base, method and areas of distribution, primary competitors and suppliers within the County.
2. A list of general and limited partners, officers, directors and shareholders of the company. Please provide a resume for all the principals and key management.
3. Corporate income tax returns for the last three years (*personal returns may also be requested*).
4. Two separate lists that detail the existing jobs on your payroll and the new jobs to be created (*within the list please provide the job title of each position, a brief description of each position, annual salary for existing and new positions and the industry average salary for those positions*).
5. If machinery and equipment are being purchased with CRA funds, provide a list of all the items to be purchased, with quotes on vendor's letterhead. Include a statement from the manufacturer, attesting to the economic life of the equipment.
6. If business is a franchise, include a copy of the franchise agreement;
7. Bank Commitment Letter detailing the conditions of the loan approval.
8. Copy of IRS determination letter as a non-profit organization (*required for all non-profit organizations only*).
9. Signed copy of resolution or minutes from the meeting of the governing body authorizing submission of the application (*required for all non-profit organizations only*).
10. Articles of Incorporation or Division of Corporations information identifying authorized signatories
11. Copy of the Property Deed (*if the applicant is the owner*)
12. Copy of By-Laws (*required for all non-profit organizations only*).
13. Please sign and submit *Statement of Personal History and Credit Check Release* (as attached).

The following items are also needed, if your funding request is \$500,000 or more

14. CPA audited corporate financial statements for the last three years (*Profit and Loss Statement and a Balance Sheet*).
15. If the most recent business return and/or financial statement is more sixty (60) days old, please submit a current Interim Financial Statement.
16. Three year financial pro formas which include operating statements, balance sheets, funding sources, and use details.
17. Ten year revenue and expense projection for the project
18. Copy of sales/purchase agreement when purchasing land or a building (*or an executed lease if applicable*).

19. If project involves construction, please provide a minimum of two (2) detailed cost estimates prepared by Architect/Engineer and/or General Contractor, preliminary plans and specifications, Architectural Illustration and photos of existing conditions.
20. Provide details regarding any credit issues, bankruptcies and lawsuits by any principal, owning 20% or more of the business.
21. The names of all affiliates and/or subsidiary companies, and their previous three (3) years financial statements and Interim Financial Statements if the financial statements are more than sixty (60) days old.
22. Attach a street map showing the location of the proposed project, Property Folio number and Legal Description.
23. Letter from the Department of Sustainable Development (DSD) approving the proposed project with zoning and land use designations, and Plan Development Review number and comments.
24. Identification and qualifications of project development team (*i.e., attorney, engineer, architect, general contractor, etc.*).
25. Current Broward County Assessed Value, new capital investment dollars and total estimated new assessment when completed and placed into service.
26. Preliminary Project Schedule
27. Existing Leases, Lease commitments and tenant makeup (*if applicable*).
28. Copy of Environmental Report showing there are no Environmental issues (*if applicable*).
29. Copy of Appraisal Report (*if applicable*).

THE FOLLOWING ITEMS ARE REQUIRED AFTER CRA BOARD APPROVAL AND PRIOR TO EXECUTION OF AN AGREEMENT AND RELEASE OF FUNDS

30. Evidence that all funds are in-place to fully fund the project.
31. A copy of the City approved project plans, contract with General Contractor and permits (Prior to Release of Funds)
32. Scope of work and all project costs
33. Copies of Insurance Certificates (Builders Risk/All Risk Policy, Commercial General Liability, Workers Compensation with the City of Fort Lauderdale and the Fort Lauderdale CRA listed as Additional Insured.

APPLICANTS CERTIFICATION

By my signature, I certify that I have read and understand the application, criteria, loan fees and program requirements. I further certify that all the information I (we) supplied is correct and accurate. All of the owners of the company/organization (*regardless of ownership percentage*) are aware of this loan and are in full agreement with the business securing financing for this project. My (our) signature(s) represent my (our) agreement to comply with City of Fort Lauderdale Community Redevelopment Agency, as it relates to this CRA funding request.

Each Proprietor, General Partner, Limited Partner and Business Owner, owning 20% or more must sign below. For all Non-Profit Organizations, all guarantors must be approved by City of Fort Lauderdale Community Redevelopment Agency.

Business Name: 1434 L.L.C.

By: _____

Signature and Title

Date

PRESIDENT

9/20/17

Guarantors:

Signature and Title

Date

Signature and Title

Date

Signature and Title

Date

Signature and Title

Date

Signature and Title

Date



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

PERSONAL HISTORY STATEMENT

PLEASE READ CAREFULLY - PRINT OR TYPE

Each Proprietor (if a Sole Proprietorship), General Partner (if Partnership), Limited Partner (if Partnership), Officer, Director and Business Owner (owning 20% or more of the business), must complete a Personal History Statement. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

Applicant/Business Name: 1134 L.L.C.	Participating Bank/Lender:
City: Ft Lauderdale State: FL Zip: 33311	City: State: Zip:

Personal Statement of (if you do not have a middle name, put NMN):

First Name: LaDesorae Middle: L Last: Giles-Smith
Social Security No.: 282-97-7249 Date of Birth: Aug 30, 1989 Place of Birth: Ft Lauderdale, FL

Present Address: 1740 N.W. 3rd Court City: Ft Lauderdale State: FL Zip: 33311 From: 2000 To: Present	Previous Address: (needed if in present address less than 5 years) City: State: Zip: From: To:
Loan Requested from CRA: \$ Loan Request from Bank(s): \$ Percentage of Company Ownership: 50 %	Are you a U.S. Citizen: ☒ YES ☐ NO If NO, are you a Lawful Permanent Resident Alien: ☐ YES ☐ NO Alien Registration Number:

IT IS IMPORTANT THAT THE NEXT THREE (3) QUESTIONS BE ANSWERED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU. HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED.

IF YOU ANSWER "YES" TO ANY OF THE QUESTIONS BELOW, PLEASE FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION.

1. Are you presently under indictment, on parole or probation? ☐ YES ☒ NO
(If YES, indicate the date parole or probation is to expire)
2. Have you ever been charged with and/or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted. ☐ YES ☒ NO
3. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? ☐ YES ☒ NO

I hereby authorize Palm Beach County to request criminal record information about me from the criminal justice agencies for the purpose of determining my eligibility.

Signature	Title President	Date 9/20/17
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*ORIGINAL SIGNATURES REQUIRED



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

CREDIT CHECK RELEASE FORM

I authorize the City of Fort Lauderdale Community Redevelopment Agency to obtain such information *(from any source necessary)*, as the City/CRA may require concerning statements made in the application for the CRA funding *(including but not limited to, obtaining a copy of my credit report, current loan status reports and financial information from the Participating Bank/Lender)*.

PLEASE NOTE: Each Proprietor *(if a Sole Proprietorship)*, General Partner *(if Partnership)*, Limited Partner *(if Partnership)*, Officer, Director and Business Owner *(owning 20% or more of the business)*, must complete this Credit Check Release Form. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

First Name: LaDesorae Middle: L Last: Giles - Smith

Social Security No.: 262 - 97 - 7249 Date of Birth: August 30, 1965

Driver's License (State and Number): G425 - 532 - 65 - 810 - 0

Home/Cellular Phone No: 954 - 338 - 1551 Office No.: 954 - 730 - 3004

Current Home Address *(PO Boxes not accepted)*: 1740 N.W. 3rd Court

City: Fort Lauderdale State: Florida Zip Code: 33311

Employer: City of Lauderhill

Employer Address: 551 West Oakland Park Blvd

City: Lauderhill State: Florida Zip Code: 33313

Company Phone No.: 954 - 739 - 0100 Other No.: 954 - 730 - 3000

Signature: 

Date: 9/20/17

*ORIGINAL SIGNATURES REQUIRED



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

APPLICATION REQUEST SUPPLEMENTAL INFORMATION

CRA Incentive Programs

Please select the incentive(s) you are applying for and insert the amount of funding assistance you are seeking:

☒ COMMERCIAL FAÇADE IMPROVEMENT PROGRAM	\$ <u>\$125,000.00</u>
☒ PROPERTY AND BUSINESS IMPROVEMENT PROGRAM	\$ <u>\$225,000.00</u>
☐ STREETScape ENHANCEMENT PROGRAM	\$ _____
☐ DEVELOPMENT INCENTIVE PROGRAM	\$ _____
☐ PROPERTY TAX REIMBURSEMENT PROGRAM	\$ _____

Please provide a supplement sheet responding to the following numbered questions:

1. Please describe your project.
2. What is the address, folio number and legal description of the property.
3. What is the existing and proposed use of the property? Please note that certain uses are not eligible for CRA assistance. This includes convenience stores, pawn shops, check cashing stores, tattoo parlors, massage parlors, liquor stores and other uses as may be determined by the CRA that are inconsistent with the CRA Community Redevelopment Plan. Please note that there will be restrictive covenants placed on the property for minimum of 5 years restricting use of the property to only those uses for which CRA funding was provided.
4. Are the proposed improvements to the property being made on behalf of a proposed tenant for the property. If so, please provide a copy of the lease agreement.
5. What is the zoning of the property?
6. Are you the property owner? Please provide a copy of the deed of the property. You must be the owner of the property to apply.
7. Is your project new construction or is it renovation?
8. What is the total capital investment of your project and what is your hard construction and soft cost? (While property acquisition cost is not an eligible CRA expense, it may be included in your total capital investment)
9. What is the current Broward County Assessed Value of the property?
10. Is there a mortgage on the property? Please provide OR Book and Page. Please note that CRA funding is in the form of a 0% interest forgivable loan, forgiven after 5 year of project completion secured by a first mortgage or subordinate mortgage on the property. Projects receiving over \$225,000 in CRA assistance

will be secured by a forgivable loan forgiven after 7 years to 10 years depending on the level of CRA funding. Other forms of security in lieu of a forgivable mortgage will be considered on a case by case basis.

11. Are there any other liens or pending liens on the property? Please provide OR Book and Page.
12. Are there any code violations on the property? Identify.
13. Is the property listed "For Sale." Please note that properties listed for sale may not apply for CRA program funding.
14. How many new permanent jobs will be created by the project? Please describe the jobs to be created and projected salaries.
15. What is the estimated construction commencement date of the project? Please note that no work is to commence on the project unless a Program Agreement is approved and fully executed between the CRA and the property owner and that work must commence within 90 days of CRA funding approval.
16. What is the estimated completion date of the project? Please note that all approved projects must be completed within a maximum of three (3) years.
17. Please provide proof of your matching funds (i.e. bank statement, line of credit, etc.) and identify other proposed forms of financing for your project.
18. Do you have general liability and fire and casualty insurance on the property? You will be required to demonstrate proof of insurance and may include bonding requirements as required by the City/CRA prior to commencement of work. The cost of insurance may be included as part of your total project cost funded by the program.
19. Have you previously received funding from the CRA? Explain.

If you are applying for funding from the Commercial Façade Improvement Program, Property & Business Improvement Program and/or Streetscape Enhancement Program, please also complete the following:

20. Do you have a detailed scope of work? If so, please include for CRA review and approval.
21. Do you have completed architectural drawings for the scope of work to be performed? Please include along with architectural illustration(s) of the proposed work, material specifications, color selections, etc. Please note that architectural cost may be included as part of your total project cost.
22. Have your project plans been submitted for City Development Review and/or permitting and if so what are the status of the plans and the plan review number? All work must be permitted and approved by the Building Official.
23. Do you have detailed, written contractor cost estimates? If so, please provide.
24. Have you selected a contractor from the attached City/CRA Approved Contractor List? Please note if your contractor is not on the City/CRA approved list, it may be possible to have your contractor become an approved CRA Contractor. He/She will need to complete the attached Contractor Application for consideration.
25. If you are applying for the Facade Program or Property and Business investment Program, and if you are not using a City /CRA Approved Contractor, you must secure two detailed licensed and insured contractor cost estimates and CRA funding is limited to 60% of the lowest cost estimate not to exceed \$50,000 which can only be funded on a reimbursement basis, rather than a direct payment to the contractor. In addition, all projects over \$50,000 may be assigned a CRA Construction Review Specialist who will determine the scope

List of all Jobs to be Created

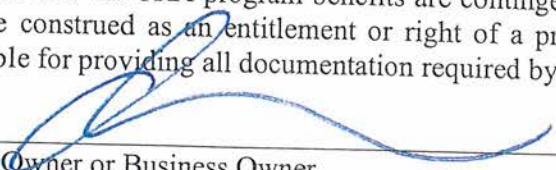
[illegible]

***USE ADDITIONAL SHEETS IF NECESSARY**

of work to be funded and will secure contractor pricing for the project, manage funding request and provide general project oversight.

26. For Streetscape Enhancement Program projects, see additional requirements for projects in excess of \$300,000 as required by Florida Statute 255.20.

I Desorae Giles - Smith attest that the information is correct to the best of my knowledge. I further understand that the CRA program benefits are contingent upon funding availability and CRA approval and are not to be construed as an entitlement or right of a property owner/applicant. I further understand that I am responsible for providing all documentation required by The CRA.



Property Owner or Business Owner

Signature of

Desorae Giles - Smith

Print Name

Supplemental Answers

1. Please describe your project.

This is a casual dining restaurant specializing in flavored chicken wings. The restaurant will offer waiter service, outside seating, carryout, and delivery.

2. What is the address, folio number and legal description of the property.

Address: 1134 NW. 6th St. Ft. Lauderdale FL 33311

Folio Number 5042 04 05 0320 Legal Description TUSKEGEE PARK 3-9 B LOT 8 LESS RD R/W BLK 3

3. What is the existing and proposed use of the property? Please note that certain uses are not eligible for CRA assistance. This includes convenience stores, pawn shops, check cashing stores, tattoo parlors, massage parlors, liquor stores and other uses as may be determined by the CRA that are inconsistent with the CRA Community Redevelopment Plan. Please note that there will be restrictive covenants placed on the property for minimum of 5 years restricting use of the property to only those uses for which CRA funding was provided.

The current zoning commercial, the building is currently being used as a temporary rental facility for functions. The proposed use is a restaurant.

4. Are the proposed improvements to the property being made on behalf of a proposed tenant for the property. If so, please provide a copy of the lease agreement.

No, the applicant is the building owner.

5. What is the zoning of the property?

The zoning of the property is NWRAC-Muw.

6. Are you the property owner? Please provide a copy of the deed of the property. You must be the owner of the property to apply.

Yes, the applicant is the building owner and the deed is Exhibit - Tab 3 of this application.

7. Is your project new construction or is it renovation?

This is a renovation.

8. What is the total capital investment of your project and what is your hard construction and soft cost? (While property acquisition cost is not an eligible CRA expense, it may be included in your total capital investment)

The total investment is \$427,785.12.

9. What is the current Broward County Assessed Value of the property?

The current assessed value of the property is \$ 152,190.

10. Is there a mortgage on the property? Please provide OR Book and Page. Please note that CRA funding is in the form of a 0% interest forgivable loan, forgiven after 5 year of project completion secured by a first mortgage or subordinate mortgage on the property. Projects receiving over \$225,000 in CRA assistance 9 CRA INCENTIVE APPLICATION (Revision Date: August 19, 2016) will be secured by a forgivable loan forgiven after 7 years to 10 years depending on the level of CRA

funding. Other forms of security in lieu of a forgivable mortgage will be considered on a case by case basis.

There is no mortgage on the property.

11. Are there any other liens or pending liens on the property? Please provide OR Book and Page.

There are no liens on the property.

12. Are there any code violations on the property? Identify.

There are no code violations on the property.

13. Is the property listed "For Sale." Please note that properties listed for sale may not apply for CRA program funding.

The property is not for sale.

14. How many new permanent jobs will be created by the project? Please describe the jobs to be created and projected salaries.

There are three immediate full-time positions created upon opening. The positions will be for a manager, and waiter, and cook. The salaries are as follows the manager \$20,800, the waiter \$11,024, and the cook \$17,472. In addition, it is anticipated that there will be four additional part-time employees including one part-time waitress. These part time positions will convert into full-time positions as needed. It is anticipated that the full-time positions will be needed within the first year of opening.

15. What is the estimated construction commencement date of the project? Please note that no work is to commence on the project unless a Program Agreement is approved and fully executed between the CRA and the property owner and that work must commence within 90 days of CRA funding approval.

The anticipated Construction start date is January 3, 2018.

16. What is the estimated completion date of the project? Please note that all approved projects must be completed within a maximum of three (3) years.

The anticipated completion date is May/June 2018.

17. Please provide proof of your matching funds (i.e. bank statement, line of credit, etc.) and identify other proposed forms of financing for your project.

Please see Exhibit Tab 11.

18. Do you have general liability and fire and casualty insurance on the property? You will be required to demonstrate proof of insurance and may include bonding requirements as required by the City/CRA prior to commencement of work. The cost of insurance may be included as part of your total project cost funded by the program.

Yes, a copy of policy is attached

19. Have you previously received funding from the CRA? Explain.

This ownership group has received CRA funding for two previous projects. The first project is located at 733 Northwest 6th Street is still operating with four rental bays and that are all rented. The four businesses are LJ's Barber Shop, Henry's Grills, Church, and the Bonded Rental Agency. At one time, the bay currently rented by Henry's Grill was the presidential campaign office of President Barack Obama and was visited by President Obama by then Presidential Candidate Obama – see Exhibit Tab 13. This small strip mall was dilapidated and overrun with vagrants and drugs. We purchased the property and with the CRAs assistance completely rehabilitated the strip mall in 2006. We used a local contractor and sub-contractors from the Northwest Section. Please see the photos attached in Exhibit Tab 13 All requirements were completed and the strip mall is thriving today. It currently provides nine (9) full-time positions from all of the businesses located in the plaza.

We also received funding for a property that we purchased located at 2151 Northwest 6th Street. This property was a run-down home that we turned into a commercial office space. It currently serves as the Senate Office of Perry Thurston, the first State of Florida Senate office ever in the Northwest Section - see Exhibit Tab 14. It currently provides three (3) full-time positions on the corridor.

We have a proven track record with completing projects and using CRA resources to wisely improve the corridor and provide for thriving businesses. We plan for the same success with Smitty's.

20. Do you have a detailed scope of work? If so, please include for CRA review and approval.
Please see Exhibit Tab 4.

21. Do you have completed architectural drawings for the scope of work to be performed? Please include along with architectural illustration(s) of the proposed work, material specifications, color selections, etc. Please note that architectural cost may be included as part of your total project cost.
Please see attached site plan and rendering Exhibit Tab 4.

22. Have your project plans been submitted for City Development Review and/or permitting and if so what are the status of the plans and the plan review number? All work must be permitted and approved by the Building Official.

Yes, the site plan and renderings was reviewed did receive pre-DRC review, and were approved by the city staff.

23. Do you have detailed, written contractor cost estimates? If so, please provide.

Yes, please see attached Exhibit Tab 4.

24. Have you selected a contractor from the attached City/CRA Approved Contractor List? Please note if your contractor is not on the City/CRA approved list, it may be possible to have your contractor become an approved CRA Contractor. He/She will need to complete the attached Contractor Application for consideration.

No, we have not selected a contractor.

25. If you are applying for the Facade Program or Property and Business investment Program, and if you are not using a City /CRA Approved Contractor, you must secure two detailed licensed and

insured contractor cost estimates and CRA funding is limited to 60% of the lowest cost estimate not to exceed \$50,000 which can only be funded on a reimbursement basis, rather than a direct payment to the contractor. In addition, all projects over \$50,000 may be assigned a CRA Construction Review Specialist who will determine the scope 10 CRA INCENTIVE APPLICATION (Revision Date: August 19, 2016) of work to be funded and will secure contractor pricing for the project, manage funding request and provide general project oversight.

This is Not Applicable; we plan to use an approved contractor.

26. For Streetscape Enhancement Program projects, see additional requirements for projects in excess of \$300,000 as required by Florida Statute 255.20.

This is Not Applicable.

Executive Summary

Smitty's wings will be poised to capitalize on the tremendous growth within the Northwest section of City of Fort Lauderdale. The Flagler Village community has expanded tremendously with apartments and art-based small businesses. There is currently a development plan for the corner of Sistrunk Boulevard and NW. 7th Ave. which would bring a projected 1000 new millennials into the Sistrunk Corridor. Along with the addition of the new Bright Line passenger train rail station being built a few blocks south of Sistrunk Boulevard creates numerous opportunities for a unique casual dining service/take-out restaurant on the Sistrunk Corridor. The addition of millennials which are growing in the community is a natural consumer market for a wing restaurant. According to the Washington-based National Chicken Council millennials hold the chicken wing consumption crown with winged eaters age 18 to 24 consuming approximately 61% more wings than any other group.

Smitty's will be an excellent vehicle for job growth in the Northwest community. We will provide a minimum of 7 jobs with hiring preferences to those who live in the Northwest community.

The owners are Christopher and Desorae Smith. The Smiths are 19 year residents of Fort Lauderdale and the Sistrunk area. They reside 6 blocks from the location of the restaurant. Christopher Smith has served as an attorney and elected official in the Fort Lauderdale community for 18 years. Desorae Giles-Smith has worked in public administration for over 25 years

Mission Statement

Using high quality standards to serve our customers, employees and community with great, delicious, and comforting food in a respectable, open, diverse and welcoming atmosphere that generates substantial profits and growth for our employees, community, and business.

The Company

Company Goals and Objectives

Smitty's intends to open within the next nine months. The company anticipated monthly sales of \$19,933.00 a month for the first 8 months increasing to \$23,053.00 a month for the remainder of the year. The company estimates annual sales of \$239,200.00 a year with an annual growth of 10%.

Company Ownership Structure

Smitty's shall operate as a Limited Liability Corporation. All of the partners are equally responsible for the business's debts and liabilities. In addition, all partners are allowed to be involved in the management of the company. Each partner has equal rights to control and manage the business. Therefore, unanimous consent of the partners is required for all major actions undertaken. The partners will consist of Desorae Giles-Smith and Christopher Smith.

Company Management Structure

Smitty's will enter into a management consulting agreement with former the proprietor of Nothing But Wings, Darryl Harris. Mr. Harris along with two partners started Nothing But Wings and currently he works as the business professor at Atlantic Vocational and Technical University. Under this agreement, the proprietors will consult on the day to day operations of Smitty's with Mr. Harris. Smitty's will be co-managed by the Partners noted above.

Organizational Timeline

A renovation plan for the chosen location will be completed by December 2017. Funding needs to be in place by October of 2017. Renovations will began January 2018 and will be completed by June 2018. Smitty's will open for business on July 1, 2018

Company Assets

Smitty's has purchased its building with a value of \$200,000.

Management and Ownership Background

Christopher L. Smith Esq.

The owners are Christopher and Desorae Smith. The Smiths are 19 year residents Fort Lauderdale and the Sistrunk area. They reside 6 blocks from the location of the restaurant.

Christopher Smith has served as an attorney and elected official in the Fort Lauderdale community for 18 years. He served eight years in Florida House of Representatives and eight years in the Florida Senate before being term limited in 2016. He holds a bachelor's degree in Political Science from Johnson C. Smith University and a Juris Doctorate from Florida State University College of Law. In his over 20 years of practicing law, he has focused on corporate and employment law. He has served as Corporate Counsel for many large corporations such as Alamo Rent-A-Car, FP&L and Hilton Hotels as well as numerous small startup businesses in the South Florida area.

Desorae Giles-Smith

Desorae Giles-Smith was born and raised in Fort Lauderdale. She graduated with honors from Blanche Ely High School and from the University of Florida with a Bachelor's Degree from the College of Journalism. She earned her Master's Degree from Florida Atlantic University. She has worked in public administration for over 20 years. She began working for the City of Lauderhill after graduating from the University of Florida. She started as an Administrative Aide in the Mayor's Office. She has worked in many positions of increasing responsibility at the City such as Administrative Manager, Human Resources and Risk Management Director, and Assistant City Manager. She was again promoted and currently serves as the first African American and first female Deputy City Manager in the City of Lauderhill. She is member or has been a member of many organizations such as the International Personnel Management Association, Society for Human Resources Management, Jack and Jill Board and Delta Sigma Theta Sorority. She served as President of the Lauderhill Boys and Girls Club and the Sistrunk Historical and Nature Preservation Society. She currently serves as vice president of the Dorsey Riverbend HOA.

Daryl Harris, Consultant

Daryl Harris started Nothing But Wings 13 years ago and has managed the restaurant since. Mr. Allen has worked for Broward County School Board for over 20 years and currently he works as the business professor at Atlantic Vocational and Technical University. Under this agreement the proprietors will consult on a day-to-day operations of Smitty's with Mr. Harris. Smitty's will be co-managed by the partners as noted above

The Product

- A traditional favorite, our Regular Wing has the bone in surrounded by lots of flavorful meat.
- The wings are never breaded, just fried, sauced and tossed in your favorite wing flavor. Available in family packs, party platters or combo meals.
- Wings are available in orders from 6 to 100 wings. Prices range from 60 (based solely on sales forecasts) cents to 75 cents a wing.
- Wings can be mix and matched with up to 10 popular flavors to choose from.
- Menu caters to the need of one person or party of 10 or more. Catering Orders are done with prior notice and given at a very competitive pricing.
- Fries are made to order to ensure freshness.
- Dips, which go perfectly with wings, include ranch, blue cheese, and cheese sauce, which are also prepared on a daily basis to ensure freshness.
- All Coke products are available as refreshments in the new Coke Freestyle Dispenser. Beer and Wine will also be available to for adult guests over age 21.
- Homestyle lemonade and sweet tea will also be served.

The Product

Initially the only food products sold at Smitty's will be chicken wings and fries, and an additional side items. Smitty's will focus on high quality ingredients to distinguish itself from typical fast food outlets. Beverages sold will be fountain drinks, beer and wine.

Product Patents

Smitty's holds the rights to use the name "Smitty's Wings".

Future Products

Menus will also be expanded periodically to take advantage of current trends.

Marketing Plan

The Target Market

The target market will be residents of Northwest Fort Lauderdale, Central Broward and downtown Fort Lauderdale.

Location Analysis

In the past ten years, the Sistrunk section of Fort Lauderdale has grown tremendously. The business community combined with the increased residential apartments is a perfect support base for Smitty's. There is also a fire station, post office, small hospital, police department 4 small commercial complexes and the city's building department within a 3 mile radius. In this area we have 20 schools. Smitty's will provide support for local area school groups and sports teams, as well as local church groups. We will be involved through providing sponsorships, discounts, and donations. In close proximity to the area are campuses for Broward Community College (BCC), Florida Atlantic University (FAU) and Florida International University (FIU), as well as, the Broward Center for the Performing Arts, the Parker Playhouse, the Museum of Discovery and Science and the Las Olas Shopping District. Currently, there is one restaurant with sit-down service on Sistrunk Boulevard and 5 take-out establishments. None of these restaurants or shops carries the menu which provides a variety of wings.

Established Customers

Although Smitty's does not have an existing customer base, market analysis of the location and target market indicates that Smitty's should enjoy strong sales.

Pricing

Smitty's will set its pricing to be competitive within the market. With anticipated staffing requirements, inventory and rental costs, Smitty's will require average monthly sales of \$18,000 to break even.

Advertising

Smitty's will start our marketing during the construction phase. Our main factor in success is simply that a person can enjoy a good wings, fast service, and friendly familiar faces.

We will all be involved in Sales and Marketing. We will gather information about

the neighborhoods, use our POS System to track top sellers and gather a customer base for marketing offers.

Gift Certificate Program

Phone book advertisement

Coupons

Door hangers

Sporting events for schools and group events

Eye catching signage

Excellent service and high quality food

Word of mouth

Additionally, family-oriented events will be hosted by Smitty's to attract customers such as sports nights, birthday parties, and fundraising events.

Frequent buyer cards will be employed to entice repeat customers. Smitty's will also sponsor a local Little League football team to publicize the restaurant within the community events.

In addition, we used delivery services such as labor 8, to assist and getting additional orders.

Market Analysis

Chicken wing consumption amongst all groups have grown in the past years according to the CHD Expert's Easy2FIND, the top five chicken wing chains in the United States in terms of number of units and market share are Wingstop (44%), Pizza Hut's WingStreet (25%), Hurricane Grill & Wings (6%), Wow Café & Wingery (4%), and Wing Zone (4%). None of the aforementioned establishments are within a 10 mile radius of the Sistrunk Corridor. The most recent wing based restaurants in the vicinity closed down in 2016, Nothing But Wings, which was located on 12th street and Northwest 31st Ave., moved to the Lauderhill Mall and Wilton Wings on NE 3rd Ave and 13th street closed down. Smitty's is poised to take the mantle.

Competitor Analysis

The Competitors

There are several restaurants in the immediate area serving a variety of specialty items. There is one soul food restaurant with waiter-sit down service, four shops selling takeout soul food, one national chain hamburger restaurant and one national chain chicken restaurant. The national chain hamburger restaurant holds 35 percent of the dine-out market and the national chicken chain restaurant holds approximately 20 percent of the market.

Wing Restaurant's

Wings Plus Fort Lauderdale located at 87 W. Prospect Rd., Oakland Park, FL 33309. It is located approximately 4.2 miles from Smitty's. It is a sit down and take-out restaurant that doesn't deliver. Wings plus enjoys a thriving business including lunch crowd because of it's high capacity for dine in. Its lunch crowd includes a working class crowd with employees from the downtown Fort Lauderdale area

Wilton Wings located at 1428 N.E. 4th Ave., Fort Lauderdale, FL 33304 located approximately 2 miles from Smitty's. It is also a dine in and take-out restaurant which does not deliver. This restaurant has gone through numerous ownership changes within the past 5 years and has twice been shut down by the health department.

Wings & More located at 2525 Davie Blvd., Fort Lauderdale, FL 33312 is located 3 miles from Smitty's. This is a dine in and take-out restaurant which does not deliver.

Nothing But Wings located and the Lauderhill mall. It is approximately 4 miles from Smitty's. It is a predominantly take-out establishment with a small dine in area without delivery service.

Other Restaurants In The Sistrunk Corridor

Dine In Capacity

Betty's located at 601 NW. 22nd Rd. is the historic Soul Food Restaurant on the corridor that provides breakfast, lunch and dinner. Betty's focuses on Soul Food and has a small wing selection.

Skinner's Grill located at 1536 NW 6th Street. Although Skinner's is a take-out restaurant has very limited seating, capacity of about 10 people for counter service.

Sea City Fish And Chicken located at 1447 NW 6th St, opened one year ago. It provides breakfast, lunch and dinner.

Take-Out Restaurants.

All of the aforementioned restaurants have wings on their menu but neither are particularly known to do high volume and wing sells.

Ivory's Take-Out located at 2270 NW. 6 Street

BG's Take-Out located at 2014 NW. 6 Street

Jimmy John's located at 729 NW. 6 Street

Operations

Daily Operations

Smitty's will open for lunch and dinner seven days per week.

Operational Facilities

Smitty's has selected a facility that provides 1,500 square foot customer space with 75 feet of store front and a 500 square foot storeroom. The restaurant will have twelve tables with seating for 50.

Staffing

Smitty's will initially employ one full-time supervisor and two full-time cooks. Those employees will be residents of the City of Fort Lauderdale and the 33311 zip code. Additionally Smitty's will employ two waitresses and four more cooks, one full-time and three-part time, transitioning them to full-time as needed.

Suppliers

Smitty's is working to establish strong ties with local suppliers while also ensuring that a positive relationship exists with alternate suppliers in order to minimize potential shortages.

Small Business Cash Flow Projection

Starting date	Mar-19
Cash balance alert minimum	1,000

	Beginning	Mar-19	4/1/2019	5/1/2019	6/1/2019	7/1/2019	8/1/2019	9/1/2019	10/1/2019	11/1/2019	12/1/2019	1/1/2020	2/1/2020	Total
Cash on hand	5,000	\$ 5,000	\$ 7,064	\$ 9,128	\$ 11,192	\$ 14,256	\$ 17,319	\$ 20,383	\$ 23,447	\$ 26,511	\$ 32,446	\$ 38,380	\$ 44,315	
CASH RECEIPTS														
Cash sales		\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 23,053	\$ 23,053	\$ 23,053	\$ 23,053	239,200
Returns and allowances														0
Collections on accounts rec														0
Interest, other income														0
Loan proceeds														0
Owner contributions														0
TOTAL CASH RECEIPTS		\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 18,373	\$ 23,053	\$ 23,053	\$ 23,053	\$ 23,053	239,200
Total cash available	5,000	\$ 23,373	\$ 25,437	\$ 27,501	\$ 29,565	\$ 32,629	\$ 35,693	\$ 38,757	\$ 41,821	\$ 49,564	\$ 55,499	\$ 61,434	\$ 67,368	
CASH PAID OUT														
Advertising		\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	9,000
Commissions and fees														0
Employees Salaries		\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	\$ 5,100	61,200
Employee benefit programs		\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	\$ 806	9,675
Insurance (other than health)														0
Interest expense		\$ 6,063	\$ 6,063	\$ 6,063	\$ 6,063	\$ 6,063	\$ 6,063	\$ 6,063	\$ 6,063	\$ 7,608	\$ 7,608	\$ 7,608	\$ 7,608	78,936
Materials and supplies (in COGS)														0
Meals and entertainment														0
Mortgage interest														0
Office expense		\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	\$ 50	600
Other interest expense														0
Pension and profit-sharing plan														0
Rent or lease														0
Rent or lease: equipment		\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	\$ 150	1,800
Repairs and maintenance														0
Supplies (not in COGS)		\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	\$ 100	1,200
Taxes and licenses		\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,040	\$ 1,305	\$ 1,305	\$ 1,305	\$ 1,305	13,540
Travel														0
Utilities		\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500	18,000
Wages (less emp. credits)														0
Taxes - FEDERAL														0
SUBTOTAL		\$ 16,309	\$ 16,309	\$ 16,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 17,119	\$ 17,119	\$ 17,119	\$ 17,119	193,951
Loan principal payment														0
Capital purchases		\$ -												0
Other startup costs		\$ -												0
To reserve and/or escrow														0
Owners' withdrawal														0
TOTAL CASH PAID OUT		\$ 16,309	\$ 16,309	\$ 16,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 15,309	\$ 17,119	\$ 17,119	\$ 17,119	\$ 17,119	193,951
Cash on hand (end of month)	5,000	\$ 7,064	\$ 9,128	\$ 11,192	\$ 14,256	\$ 17,319	\$ 20,383	\$ 23,447	\$ 26,511	\$ 32,446	\$ 38,380	\$ 44,315	\$ 50,249	

Sales and Pricing Forecast

Pricing 5% increase 5% increase

Item	Year 1	Year 2	Year 3
Wings (10 Piece)	\$ 8.50	\$ 8.93	\$ 9.37
Lunch Special	\$ 6.00	\$ 6.30	\$ 6.62
Chicken Tenders	\$ 5.75	\$ 6.04	\$ 6.34
Fried Okra	\$ 1.75	\$ 1.84	\$ 1.93
Corn Nuggets	\$ 2.50	\$ 2.63	\$ 2.76
Seasoned Fries	\$ 1.75	\$ 1.84	\$ 1.93
Onion Rings	\$ 1.75	\$ 1.84	\$ 1.93
Garlic Bread	\$ 1.75	\$ 1.84	\$ 1.93
Fried Mushrooms	\$ 2.50	\$ 2.63	\$ 2.76
Fried Mozzarella	\$ 3.50	\$ 3.68	\$ 3.86
Red Velvet Cupcakes	\$ 2.00	\$ 2.10	\$ 2.21
Sweet Potato Pie	\$ 1.50	\$ 1.58	\$ 1.65
Homemade Lemonade	\$ 2.00	\$ 2.10	\$ 2.21
Homemade Iced Tea	\$ 2.00	\$ 2.10	\$ 2.21
Slushies	\$ 2.00	\$ 2.10	\$ 2.21

Units 5% increase 5% increase

Year 1	Year 2	Year 3
8970	9418.5	9889.425
5980	6279	6592.95
5980	6279	6592.95
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
2990	3139.5	3296.475
5980	6279	6592.95
5980	6279	6592.95
5980	6279	6592.95

Unit Sales 5% increase 5% increase

Year 1	Year 2	Year 3
\$ 76,245.00	\$ 84,060.11	\$ 92,676.27
\$ 35,880.00	\$ 39,557.70	\$ 43,612.36
\$ 34,385.00	\$ 37,909.46	\$ 41,795.18
\$ 5,232.50	\$ 5,768.83	\$ 6,360.14
\$ 7,475.00	\$ 8,241.19	\$ 9,085.91
\$ 5,232.50	\$ 5,768.83	\$ 6,360.14
\$ 5,232.50	\$ 5,768.83	\$ 6,360.14
\$ 7,475.00	\$ 8,241.19	\$ 9,085.91
\$ 10,465.00	\$ 11,537.66	\$ 12,720.27
\$ 5,980.00	\$ 6,592.95	\$ 7,268.73
\$ 4,485.00	\$ 4,944.71	\$ 5,451.55
\$ 11,960.00	\$ 13,185.90	\$ 14,537.45
\$ 11,960.00	\$ 13,185.90	\$ 14,537.45
\$ 11,960.00	\$ 13,185.90	\$ 14,537.45
\$ 239,200.00	\$ 263,718.00	\$ 290,749.10

Units 5% increase 5% increase

Year 1	Year 2	Year 3
7800	8190	8599.5
5200	5460	5733
5200	5460	5733
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
2600	2730	2866.5
5200	5460	5733
5200	5460	5733
5200	5460	5733

Unit Cost

Item	Year 1	Year 2	Year 3
Wings (10 Piece)	\$ 2.81	\$ 2.95	\$ 3.09
Lunch Special	\$ 1.98	\$ 2.08	\$ 2.18
Chicken Tenders	\$ 1.90	\$ 1.99	\$ 2.09
Fried Okra	\$ 0.58	\$ 0.61	\$ 0.64
Corn Nuggets	\$ 0.83	\$ 0.87	\$ 0.91
Seasoned Fries	\$ 0.58	\$ 0.61	\$ 0.64
Onion Rings	\$ 0.58	\$ 0.61	\$ 0.64
Garlic Bread	\$ 0.58	\$ 0.61	\$ 0.64
Fried Mushrooms	\$ 0.83	\$ 0.87	\$ 0.91
Fried Mozzarella	\$ 1.16	\$ 1.21	\$ 1.27
Red Velvet Cupcakes	\$ 0.66	\$ 0.69	\$ 0.73
Sweet Potato Pie	\$ 0.50	\$ 0.52	\$ 0.55
Homemade Lemonade	\$ 0.66	\$ 0.69	\$ 0.73
Homemade Iced Tea	\$ 0.66	\$ 0.69	\$ 0.73
Slushies	\$ 0.66	\$ 0.69	\$ 0.73

Gross M \$ 170,560.00 \$ 188,042.40 \$ 207,316.75



WITHDRAWAL FORM FOR CURRENT EMPLOYEES

Please follow the steps shown below to ensure we are able to process your request in a timely manner. This form is used to request a one-time payment from your Governmental 401 Plan or 457 Deferred Compensation Plan account while you are still employed by the plan sponsor. For all other withdrawal requests (e.g., withdrawals following retirement/separation from service), please log in to Account Access at www.icmarc.org/login or contact ICMA-RC for the appropriate forms.

Withdrawals while you are still employed are not available in all plans. Please check with your employer or ICMA-RC to confirm eligibility.

1. **Complete the *Withdrawal Form for Current Employees*.** If you have more than one account, submit a separate withdrawal form for each account.
2. **Make sure your employer signs the form before you send it to ICMA-RC.** The signature is needed for ICMA-RC to send your payment, and your request may be delayed if the form is missing the employer signature.

3. **Fax or mail the completed form to ICMA-RC.**

Fax: ICMA-RC
ATTN: Workflow Management Team
202-682-6439

Mail: ICMA-RC
ATTN: Workflow Management Team
P.O. Box 96220
Washington, DC 20090-6220

Please keep a copy of the completed form for your records.

TIME FRAME FOR PAYMENTS

Following the receipt of your properly completed withdrawal form, payments will be distributed as soon as possible (typically within three business days). Please submit your request at least a few days in advance of your desired payment date.

At ICMA-RC, we take security of our participants retirement assets seriously. We have stringent security measures in place and we continuously apply enhancements to safe guard your assets.

Additional precautions are taken when processing withdrawal requests. Adding new or, changing existing information on file with ICMA-RC will result in verification of the entry which may delay your withdrawal.

EMAIL CONFIRMATIONS

ICMA-RC is now sending many confirmation notices via email, including confirmations related to your withdrawal requests. Please be sure to provide your email address in section 1 of the form.

Thank you for saving your retirement assets with ICMA-RC. In certain situations, you may be eligible to withdraw money from your account while you are still employed by the plan sponsor. However, you are generally not required to take withdrawals until after you attain age 70½. You can continue to receive tax advantages and ICMA-RC services throughout your working and retirement years.

MAKING A SMART WITHDRAWAL DECISION

ICMA-RC helps you maintain retirement security throughout your working and retirement years. As you approach retirement, you have important decisions to make about your retirement savings, including the money in your employer-sponsored retirement plan account with ICMA-RC. Please take time to carefully review your options.

Withdrawing in Retirement

If you have retired, or will retire soon, congratulations! We hope this is a very positive event and that your retirement savings help you realize your retirement dreams. You need to think about when and how to withdraw your assets. **Consider working with your ICMA-RC representative to develop a withdrawal strategy** that addresses:

- any **potential gap** between all your sources of income, such as employer-sponsored retirement plans, pensions, Social Security, and annuity products (including lifetime income funds), and ongoing expenses; and
- **how much you should withdraw** from your investments to maintain your desired standard of living but not outlive your money.

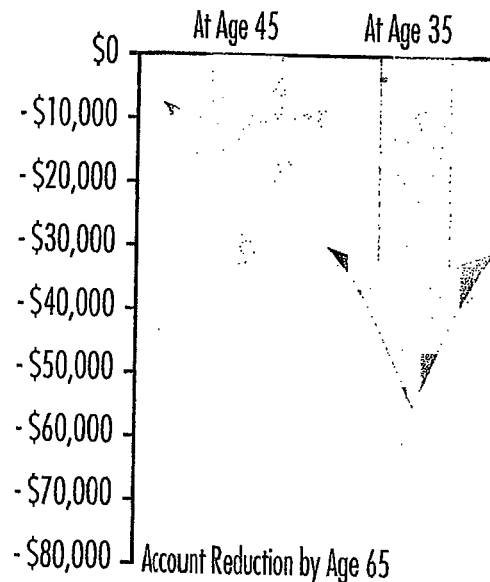
Considering a Withdrawal Before Retirement?

Withdrawing from your retirement funds should generally be a last resort. The economic costs of withdrawal are likely to be much greater than the benefit of receiving the money earlier.

Why? You pay taxes much sooner than necessary and you lose out on the potential for that money to grow in a tax-advantaged account for your future retirement needs.

Assuming a 6 percent return, a 45-year-old employee who withdraws \$10,000 could reduce his or her account balance by over \$30,000 at age 65; a 35-year old worker could see a reduction of nearly \$60,000.

Impact to Future Account Balance — After a \$10,000 Withdrawal



If, however, you have no other options, consider only withdrawing what you absolutely need. That way you'll have more to build on for the future.

Making a Decision

Your ICMA-RC Retirement Plans Specialist or **CERTIFIED FINANCIAL PLANNER™** can help you sort through your options and learn about investment and withdrawal strategies that maximize your chances of meeting your retirement goals. Visit www.icmarc.org/retiree for additional guidance.



WITHDRAWAL FORM FOR CURRENT EMPLOYEES

1. Submit this form to request a withdrawal from your Governmental 401 Plan or 457 Deferred Compensation Plan account while you are still employed. These withdrawals are not available in all plans. Please check with your employer or ICMA-RC to confirm eligibility.
2. Return the completed form to ICMA-RC. Missing or incomplete information will result in delays.

1 PARTICIPANT INFORMATION (COMPLETE ALL FIELDS IN THIS SECTION)

Employer Plan Number: _____ Employer Plan Name: _____

Social Security Number: _____

Date of Birth: (MM/DD/YYYY) _____

Preferred Phone Number: _____

Email Address: _____

Full Name of Participant: _____

Last _____

First _____

M.I. _____

Mailing Address: _____

City _____

State: _____

Zip Code: _____

2 REQUEST TYPE (SELECT ONE OPTION ONLY)

Age Eligible — Select option A or B below, as applicable, if you have attained the age at which you are eligible to withdraw funds from the plan while you are still employed.

A. ☐ 70½ (401 and 457 plans)

B. ☐ 59½ or Normal Retirement Age (401 plans only)

☐ **After-Tax Contribution Account** — Select this option to withdraw after-tax contributions from your account. (401 plans only)

☐ **Rollover Account** — Select this option if you rolled-over assets from a previous employer's retirement plan or IRA to your account and wish to withdraw those assets. (401 and 457 plans)

3 PAYMENT AMOUNT

A check for the amount specified, reduced by applicable tax withholding, will be sent to your current mailing address.

Payment Amount: \$ _____ OR ☐ 100%

Taxable amounts will be reported on a Form 1099-R, which will be sent to you in January following the year of a distribution.

4 PARTICIPANT SIGNATURE

I acknowledge I have received and read the *Special Tax Notice Regarding Plan Payments* and I direct ICMA-RC to process the payment request indicated above. As required by law, and under the penalty of perjury, I certify that the Social Security Number (Taxpayer Identification Number) I provided is correct.

Signature: _____

Date: ____/____/____

5 EMPLOYER SIGNATURE

Obtain an employer signature prior to submitting this form to ICMA-RC. An authorized signature is required before ICMA-RC can send the requested payment.

Authorized Employer Official's Signature: _____

Date: ____/____/____

Name and Title of Authorized Official (Please Print): _____

ADDITIONAL INFORMATION

Beneficiary Designations

ICMA-RC recommends that you confirm that we have current beneficiary information. Please review and update your beneficiary information as appropriate by accessing your account online at www.icmarc.org/login.

Federal Tax Withholding

The Internal Revenue Code requires a mandatory 20% federal income tax withholding be applied to any withdrawal that qualifies as an eligible rollover distribution, unless the payment is transferred directly to an eligible plan. **Note: With the exception of withdrawals from an after-tax contribution account, one-time payments requested on the attached form are subject to the mandatory 20% federal income tax withholding.**

Non U.S. Citizens: Generally, individuals who are not U.S. citizens and residing outside of the United States are subject to 30% federal tax withholding. A reduced rate, including exemption, may apply if there is a tax treaty between your country of residence and the United States.

State Tax Withholding

Several states have mandatory tax withholding requirements. ICMA-RC automatically withholds taxes for states which require withholding from retirement plan withdrawals and will honor requests for withholding in other states. Income taxation of payments from retirement plans varies from state-to-state. You should seek state tax advice from the appropriate state department of revenue if you have questions regarding state tax withholding requirements.

You may request federal and state tax withholding percentages that differ from those described above by completing the Tax Withholding Change Form. This form is available online at www.icmarc.org/forms or by contacting ICMA-RC.

Tax Reporting

Taxable amounts will be reported on a Form 1099-R, which will be sent to you in January following the year of a distribution.

Withdrawal Penalties: 457 plan contributions and associated earnings that remain in the plan until paid are not subject to an early withdrawal penalty tax. However, assets rolled-in to a 457 plan and assets distributed from a 401 plan may be subject to a 10% early withdrawal penalty tax if withdrawn prior to age 59½, unless an exception to the penalty applies. Exceptions to the penalty are listed in the Special Tax Notice Regarding Plan Payments. ICMA-RC does not withhold any portion of your payment to cover potential tax penalties. The calculation and payment of any such penalty is your responsibility and will be carried out when you file your tax return.

VT Retirement Income Advantage Fund

If your plan offers the VT Retirement Income Advantage Fund (the Fund), any assets you have invested in the Fund will be excluded from your withdrawal request. If you would like to initiate withdrawals from the Fund, please contact ICMA-RC for the appropriate withdrawal forms.

You can transfer assets from the Fund to other investment options available in your plan if you would like to have them distributed with your withdrawal request. However, you should be aware that withdrawals from the Fund prior to Lock-In proportionately reduce guaranteed values.

After Lock-In, Excess Withdrawals will proportionately reduce and potentially terminate available guarantees. For additional information, please review the *VT Retirement Income Advantage Fund Important Considerations* document.

VantageBroker

If your plan offers VantageBroker, any assets you have invested in VantageBroker will be excluded from your withdrawal request. In order to withdraw funds from your brokerage account, you must first transfer the assets back to your core account at ICMA-RC. You can liquidate assets in your brokerage account and transfer the assets back to your core account online. Settlement of the sale of investments held in your brokerage account may take up to three business days.



Special Tax Notice Regarding Plan Payments

This notice applies to distributions from 401(a), 401(k), and 457(b) plans with ICMA-RC, including distributions from Roth and non-Roth accounts in the plans (e.g., pre-tax, after-tax).

ROLLOVER OPTIONS AVAILABLE

You are receiving this notice because all or a portion of a payment from your account is eligible to be rolled over to an IRA or an employer plan. This notice is intended to help you decide whether to do such a rollover. Please review and consider the information in the notice before you begin withdrawing funds from your account with ICMA-RC.

Rules that apply to most payments from a plan are described in the "General Information About Rollovers" section. Special rules that only apply in certain circumstances are described in the "Special Rules and Options" section.

GENERAL INFORMATION ABOUT ROLLOVERS

What is a rollover?

A rollover is a payment from your employer sponsored retirement plan that is transferred to another eligible employer plan (a tax-qualified plan, section 403(b) plan, or governmental section 457(b) plan) or IRA (an individual retirement account or individual retirement annuity). Assets that are rolled over to another eligible plan or Traditional IRA are not taxed until they are later withdrawn from the receiving plan.

How can a rollover affect my taxes?

- **Pre-Tax Assets** — You will be taxed on a payment from the Plan if you do not roll it over. If you are under age 59½ and do not do a rollover, you will also have to pay a 10% additional income tax on early distributions (unless an exception applies). However, if you do a rollover, you will not have to pay tax until you receive payments later and the 10% additional income tax will not apply if those payments are made after you are age 59½ (or if an exception applies).
- **Roth Assets** — After-tax contributions included in a payment from a designated Roth account are not taxed, but earnings might be taxed. The tax treatment of earnings included in the payment depends on whether the payment is a qualified distribution. If a payment is only part of your designated Roth account, the payment will include an allocable portion of the earnings in your designated Roth account.

If the payment from the Plan is not a qualified distribution and you do not do a rollover to a Roth IRA or a designated Roth account in an employer plan, you will be taxed on the earnings in the payment. If you are under age 59½, a 10% additional income tax on early distributions will also apply to the earnings (unless an exception applies). However, if you do a rollover, you will not have to pay taxes currently on the earnings and you will not have to pay taxes later on payments that are qualified distributions.

If the payment from the Plan is a qualified distribution, you will not be taxed on any part of the payment even if you do not do a rollover. If you do a rollover, you will not be taxed on the amount you roll over and any earnings on the amount you roll over will not be taxed if paid later in a qualified distribution.

A qualified distribution from a designated Roth account in the Plan is a payment made after you are age 59½ (or after your death or disability) and after you have had a designated Roth account in the Plan for at least 5 years. In applying the 5-year rule, you count from January 1 of the year your first contribution was made to the designated Roth account. However, if you did a direct rollover to a designated Roth account in the Plan from a designated Roth account in another employer plan, your participation will count from January 1

of the year your first contribution was made to the designated Roth account in the Plan or, if earlier, to the designated Roth account in the other employer plan.

Where may I roll over the payment?

- **Pre-Tax Assets** — You may roll over the payment to either an IRA (an individual retirement account or individual retirement annuity) or an employer plan (a tax-qualified plan, section 403(b) plan, or governmental section 457(b) plan) that will accept the rollover. The rules of the IRA or employer plan that holds the rollover will determine your investment options, fees, and rights to payment from the IRA or employer plan (for example, no spousal consent rules apply to IRAs and IRAs may not provide loans). Further, the amount rolled over will become subject to the tax rules that apply to the IRA or employer plan.
- **Roth Assets** — You may roll over the payment to either a Roth IRA (a Roth individual retirement account or Roth individual retirement annuity) or a designated Roth account in an employer plan that will accept the rollover (e.g., 457(b), 401(k), and 403(b) plans that allow Roth contributions). The rules of the Roth IRA or employer plan that holds the rollover will determine your investment options, fees, and rights to payment from the Roth IRA or employer plan (for example, no spousal consent rules apply to Roth IRAs and Roth IRAs may not provide loans). Further, the amount rolled over will become subject to the tax rules that apply to the Roth IRA or the designated Roth account in the employer plan. In general, these tax rules are similar to those described elsewhere in this notice, but differences include:
 - If you do a rollover to a Roth IRA, all of your Roth IRAs will be considered for purposes of determining whether you have satisfied the 5-year rule (counting from January 1 of the year for which your first contribution was made to any of your Roth IRAs).
 - If you do a rollover to a Roth IRA, you will not be required to take a distribution from the Roth IRA during your lifetime and you must keep track of the aggregate amount of the after-tax contributions in all of your Roth IRAs (in order to determine your taxable income for later Roth IRA payments that are not qualified distributions).
 - Eligible rollover distributions from a Roth IRA can only be rolled over to another Roth IRA.

How do I do a rollover?

There are two ways to do a rollover. You can do either a direct rollover or a 60-day rollover.

If you do a **direct rollover**, the Plan will make the payment directly to your IRA or an employer plan. You should contact the IRA sponsor or

the administrator of the employer plan for information on how to do a direct rollover.

If you do not do a direct rollover,

■ **Pre-Tax Assets** — You may still do a rollover by making a deposit into an IRA or eligible employer plan that will accept it. You will have 60 days after you receive the payment to make the deposit. If you do not do a direct rollover, the Plan is required to withhold 20% of the payment for federal income taxes (up to the amount of cash and property actually received). This means that, in order to roll over the entire payment in a 60-day rollover, you must use other funds to make up for the 20% withheld. If you do not roll over the entire amount of the payment, the portion not rolled over will be taxed and will be subject to the 10% additional income tax on early distributions if you are under age 59½ (unless an exception applies).

■ **Roth Assets** — You may still do a rollover by making a deposit within 60 days into a Roth IRA, whether the payment is a qualified or nonqualified distribution. In addition, you can do a rollover by making a deposit within 60 days into a designated Roth account in an employer plan if the payment is a nonqualified distribution and the rollover does not exceed the amount of the earnings in the payments. You cannot do a 60-day rollover to an employer plan of any part of a qualified distribution. If you receive a distribution that is a nonqualified distribution and you do not roll over an amount at least equal to the earnings allocable to the distribution, you will be taxed on the amount of those earnings not rolled over, including the 10% additional income tax on early distributions if you are under age 59½ (unless an exception applies).

If you do a direct rollover of only a portion of the amount paid from the Plan and a portion is paid to you at the same time, the portion directly rolled over consists first of earnings.

If you do not do a direct rollover and the payment is not a qualified distribution, the Plan is required to withhold 20% of the earnings for federal income taxes (up to the amount of cash and property actually received). This means that, in order to roll over the entire payment in a 60-day rollover to a Roth IRA, you must use other funds to make up for the 20% withheld.

How much may I roll over?

If you wish to do a rollover, you may roll over all or part of the amount eligible for rollover. Any payment from the Plan is eligible for rollover, except:

- Certain payments spread over a period of at least 10 years or over your life or life expectancy (or the lives or joint life expectancy of you and your beneficiary)
- Required minimum distributions after age 70½ (or after death)
- Hardship distributions
- Corrective distributions of contributions that exceed tax law limitations
- Loans treated as deemed distributions (for example, loans in default due to missed payments before your employment ends)
- Cost of life insurance paid by the Plan
- Payments of certain automatic enrollment contributions requested to be withdrawn within 90 days of the first contribution

ICMA-RC can tell you what portion of a payment is eligible for rollover.

If I don't do a rollover, will I have to pay the 10% additional income tax on early distributions?

If you are under age 59½, you will have to pay the 10% additional income tax on early distributions for any payment from the Plan (including amounts withheld for income tax) that you do not roll over,

unless one of the exceptions listed below applies. This tax is in addition to the regular income tax on the payment not rolled over.

The 10% additional income tax does not apply to the following payments from the Plan:

- Payments made after you separate from service if you will be at least age 55 in the year of the separation
- Payments that start after you separate from service if paid at least annually in equal or close to equal amounts over your life or life expectancy (or the lives or joint life expectancy of you and your beneficiary)
- Payments made due to disability
- Payments after your death
- Corrective distributions of contributions that exceed tax law limitations
- Cost of life insurance paid by the Plan
- Payments made directly to the government to satisfy a federal tax levy
- Payments made under a qualified domestic relations order (QDRO)
- Payments up to the amount of your deductible medical expenses
- Certain payments made while you are on active duty if you were a member of a reserve component called to duty after September 11, 2001 for more than 179 days (401(k) plans only)
- Payments of certain automatic enrollment contributions requested to be withdrawn within 90 days of the first contribution.

If I do a rollover to an IRA (including a Roth IRA), will the 10% additional income tax apply to early distributions from the IRA?

If you receive a payment from an IRA when you are under age 59½, you will have to pay the 10% additional income tax on early distributions from the IRA, unless an exception applies or the payment is a qualified distribution of Roth assets. In general, the exceptions to the 10% additional income tax for early distributions from an IRA are the same as the exceptions listed above for early distributions from a plan. However, there are a few differences for payments from an IRA, including:

- There is no exception for payments after separation from service that are made after age 55.
- The exception for qualified domestic relations orders (QDROs) does not apply (although a special rule applies under which, as part of a divorce or separation agreement, a tax-free transfer may be made directly to an IRA of a spouse or former spouse).
- The exception for payments made at least annually in equal or close to equal amounts over a specified period applies without regard to whether you have had a separation from service.
- There are additional exceptions for (1) payments for qualified higher education expenses, (2) payments up to \$10,000 used in a qualified first-time home purchase, and (3) payments for health insurance premiums after you have received unemployment compensation for 12 consecutive weeks (or would have been eligible to receive unemployment compensation but for self-employed status).

If your payment is from a governmental section 457(b) plan

If the Plan is a governmental section 457(b) plan, the same rules described elsewhere in this notice generally apply, allowing you to roll over the payment to an IRA or an employer plan that accepts rollovers. One difference is that, if you do not do a rollover, you will not have to pay the 10% additional income tax on early distributions from the Plan even if you are under age 59½ (unless the payment is from a separate account holding rollover contributions that were made to the Plan from a tax-qualified plan, a section 403(b) plan, or an IRA). However, if you

do a rollover to an IRA or to an employer plan that is not a governmental section 457(b) plan, a later distribution made before age 59½ will be subject to the 10% additional income tax on early distributions (unless an exception applies). Other differences are that you cannot do a rollover if the payment is due to an "unforeseeable emergency" and the special rules under "If you were born on or before January 1, 1936" do not apply.

Will I owe State income taxes?

This notice does not describe any State or local income tax rules (including withholding rules).

SPECIAL RULES AND OPTIONS

If your payment includes non-Roth after-tax contributions

After-tax contributions included in a payment are not taxed. If a payment is only part of your benefit, an allocable portion of your after-tax contributions is included in the payment, so you cannot take a payment of only after-tax contributions. However, if you have pre-1987 after-tax contributions maintained in a separate account, a special rule may apply to determine whether the after-tax contributions are included in a payment. In addition, special rules apply when you do a rollover, as described below.

You may roll over to an IRA a payment that includes after-tax contributions through either a direct rollover or a 60-day rollover. You must keep track of the aggregate amount of the after-tax contributions in all of your IRAs (in order to determine your taxable income for later payments from the IRAs). If you do a direct rollover of only a portion of the amount paid from the Plan and at the same time the rest is paid to you, the portion directly rolled over consists first of the amount that would be taxable if not rolled over. For example, assume you are receiving a distribution of \$12,000, of which \$2,000 is after-tax contributions. In this case, if you directly roll over \$10,000 to an IRA that is not a Roth IRA, no amount is taxable because the \$2,000 amount not directly rolled over is treated as being after-tax contributions. If you do a direct rollover of the entire amount paid from the Plan to two or more destinations at the same time, you can choose which destination receives the after-tax contributions.

If you do a 60-day rollover to an IRA of only a portion of a payment made to you, the after-tax contributions are treated as rolled over last. For example, assume you are receiving a distribution of \$12,000, of which \$2,000 is after-tax contributions, and no part of the distribution is directly rolled over. In this case, if you roll over \$10,000 to an IRA that is not a Roth IRA in a 60-day rollover, no amount is taxable because the \$2,000 amount not rolled over is treated as being after-tax contributions.

You may roll over to an employer plan all of a payment that includes after-tax contributions, but only through a direct rollover (and only if the receiving plan separately accounts for after-tax contributions and is not a governmental section 457(b) plan). You can do a 60-day rollover to an employer plan of part of a payment that includes after-tax contributions, but only up to the amount of the payment that would be taxable if not rolled over.

If you miss the 60-day rollover deadline

Generally, the 60-day rollover deadline cannot be extended. However, the IRS has the limited authority to waive the deadline under certain extraordinary circumstances, such as when external events prevented you from completing the rollover by the 60-day rollover deadline. To apply for a waiver, you must file a private letter ruling request with the IRS. Private letter ruling requests require the payment of a nonrefundable user fee. For more information, see IRS Publication 590-A, *Contributions to Individual Retirement Arrangements (IRAs)*.

If you have an outstanding loan that is being offset

If you have an outstanding loan from the Plan, your Plan benefit may be offset by the amount of the loan, typically when your employment ends. The loan offset amount is treated as a distribution to you at the time of the offset and will be taxed (including the 10% additional income tax on early distributions, unless an exception applied) unless you do a 60-day rollover in the amount of the loan offset to an IRA or employer plan. In the case of a disqualified distribution of Roth assets, the preceding sentence applies to the earnings.

If you were born on or before January 1, 1936

If you were born on or before January 1, 1936 and receive a lump sum distribution that you do not roll over, special rules for calculating the amount of the tax on the payment (for Roth assets, on any earnings taxed) might apply to you. For more information, see IRS Publication 575, *Pension and Annuity Income*.

If you are an eligible retired public safety officer and your payment is used to pay for health coverage or qualified long-term care insurance

If the Plan is a governmental plan, you retired as a public safety officer, and your retirement was by reason of disability or was after normal retirement age, you can exclude from your taxable income plan payments paid directly as premiums to an accident or health plan (or a qualified long-term care insurance contract) that your employer maintains for you, your spouse, or your dependents, up to a maximum of \$3,000 annually. For this purpose, a public safety officer is a law enforcement officer, firefighter, chaplain, or member of a rescue squad or ambulance crew.

If you roll over your payment of non-Roth assets to a Roth IRA

If you roll over a payment from the Plan to a Roth IRA, a special rule applies under which the amount of the payment rolled over (reduced by any after-tax amounts) will be taxed. However, the 10% additional income tax on early distributions will not apply (unless you take the amount rolled over out of the Roth IRA within 5 years, counting from January 1 of the year of the rollover).

If you roll over the payment to a Roth IRA, later payments from the Roth IRA that are qualified distributions will not be taxed (including earnings after the rollover). A qualified distribution from a Roth IRA is a payment made after you are age 59½ (or after your death or disability, or as a qualified first-time homebuyer distribution of up to \$10,000) and after you have had a Roth IRA for at least 5 years. In applying this 5-year rule, you count from January 1 of the year for which your first contribution was made to a Roth IRA. Payments from the Roth IRA that are not qualified distributions will be taxed to the extent of earnings after the rollover, including the 10% additional income tax on early distributions (unless an exception applied). You do not have to take required minimum distributions from a Roth IRA during your lifetime. For more information, see IRS Publication 590-A, *Contributions to Individual Retirement Arrangements (IRAs)*, and IRS Publication 590-B, *Distributions from Individual Retirement Arrangements (IRAs)*.

If you do a rollover from non-Roth assets to a designated Roth account in the same Plan (in-plan Roth conversion)

If you roll over a payment from the Plan to a designated Roth account in the Plan, the amount of the payment rolled over (reduced by any after-tax amounts directly rolled over) will be taxed. However, the 10% additional tax on early distributions will not apply (unless you take the amount rolled over out of the designated Roth account within the 5 year period that begins on January 1 of the year of the rollover).

If you roll over the payment to a designated Roth account in the Plan, later payments from the designated Roth account that are qualified distributions will not be taxed (including earnings after the rollover). A qualified distribution from a designated Roth account is a payment made

both after you are age 59½ (or after your death or disability) and after you have had a designated Roth account in the Plan for at least 5 years. In applying this 5-year rule, you count from January 1 of the year your first contribution was made to the designated Roth account. However, if you made a direct rollover to a designated Roth account in the Plan from a designated Roth account in a plan of another employer, the 5-year period begins on January 1 of the year you made the first contribution to the designated Roth account in the Plan or, if earlier, to the designated Roth account in the plan of the other employer. Payments from the designated Roth account that are not qualified distributions will be taxed to the extent of earnings after the rollover, including the 10% additional income tax on early distributions (unless an exception applies).

If you are not a plan participant

Payments after death of the participant. If you receive a distribution after the participant's death that you do not roll over, the distribution will generally be taxed in the same manner described elsewhere in this notice. However, the 10% additional income tax on early distributions and the special rules for public safety officers do not apply, and the special rule described under the section "If you were born on or before January 1, 1936" applies only if the participant was born on or before January 1, 1936.

- **If you are a surviving spouse.** If you receive a payment from the Plan as the surviving spouse of a deceased participant, you have the same rollover options that the participant would have had, as described elsewhere in this notice. In addition, if you choose to do a rollover to an IRA, you may treat the IRA as your own or as an inherited IRA.

Pre-Tax Assets. An IRA you treat as your own is treated like any other IRA of yours, so that payments made to you before you are age 59½ will be subject to the 10% additional income tax on early distributions (unless an exception applies) and required minimum distributions from your IRA do not have to start until after you are age 70½.

If you treat the IRA as an inherited IRA, payments from the IRA will not be subject to the 10% additional income tax on early distributions. However, if the participant had started taking required minimum distributions, you will have to receive required minimum distributions from the inherited IRA. If the participant had not started taking required minimum distributions from the Plan, you will not have to start receiving required minimum distributions from the inherited IRA until the year the participant would have been age 70½.

Roth Assets. A Roth IRA you treat as your own is treated like any other Roth IRA of yours, so that you will not have to receive any required minimum distributions during your lifetime and earnings paid to you in a nonqualified distribution before you are age 59½ will be subject to the 10% additional income tax on early distributions (unless an exception applies).

If you treat the Roth IRA as an inherited Roth IRA, payments from the Roth IRA will not be subject to the 10% additional income tax on early distributions. An inherited Roth IRA is subject to required minimum distributions. If the participant had started taking required minimum distributions from the Plan, you will have to receive required minimum distributions from the inherited Roth IRA. If the participant had not started taking required minimum distributions, you will not have to start receiving required minimum distributions from the inherited Roth IRA until the year the participant would have been age 70½.

- **If you are a surviving beneficiary other than a spouse.** If you receive a payment from the Plan because of the participant's death and you are a designated beneficiary other than a surviving spouse, the only rollover option you have is to do a direct rollover to an inherited IRA. Payments from the inherited IRA will not be subject to the 10% additional income tax on early distributions. You will have to receive required minimum distributions from the inherited IRA.

Payments under a qualified domestic relations order. If you are the spouse or former spouse of the participant who receives a payment from the Plan under a qualified domestic relations order (QDRO), you generally have the same options the participant would have (for example, you may roll over the payment to your own IRA or an eligible employer plan that will accept it). Payments under the QDRO will not be subject to the 10% additional income tax on early distributions.

If you are a nonresident alien

If you are a nonresident alien and you do not do a direct rollover to a U.S. IRA or U.S. employer plan, instead of withholding 20%, the Plan is generally required to withhold 30% of the payment for federal income taxes. If the amount withheld exceeds the amount of tax you owe (as may happen if you do a 60-day rollover), you may request an income tax refund by filing Form 1040-NR and attaching your Form 1042-S. See Form W-8BEN for claiming that you are entitled to a reduced rate of withholding under an income tax treaty. For more information, see also IRS Publication 519, *U.S. Tax Guide for Aliens*, and IRS Publication 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

Other special rules

If a payment is one in a series of payments for less than 10 years, your choice whether to make a direct rollover will apply to all later payments in the series (unless you make a different choice for later payments).

If your payments for the year (treating Roth and non-Roth assets separately) are less than \$200, the Plan is not required to allow you to do a direct rollover and is not required to withhold for federal income taxes. However, you can do a 60-day rollover.

Unless you elect otherwise, a mandatory cashout of more than \$1,000 if a payment is one in a series of payments for less than 10 years, your choice whether to make a direct rollover will apply to all later payments in the series (unless you make a different choice for later payments).

If your payments for the year (treating Roth and non-Roth assets separately) are less than \$200, the Plan is not required to allow you to do a direct rollover and is not required to withhold for federal income taxes. However, you can do a 60-day rollover.

Unless you elect otherwise, a mandatory cashout of more than \$1,000 (treating Roth and non-Roth assets separately) will be directly rolled over to an IRA chosen by the Plan administrator or the payor. A mandatory cashout is a payment from a plan to a participant made before age 62 (or normal retirement age, if later) and without consent, where the participant's benefit does not exceed \$5,000 (not including any amounts held under the plan as a result of a prior rollover made to the plan).

You may have special rollover rights if you recently served in the U.S. Armed Forces. For more information, see IRS Publication 3, *Armed Forces' Tax Guide*.

FOR MORE INFORMATION

You may wish to consult with the Plan administrator or payor, or a professional tax adviser, before taking a payment from the Plan. Also, you can find more detailed information on the federal tax treatment of payments from employer plans in: IRS Publication 575, *Pension and Annuity Income*; IRS Publication 590-A, *Contributions to Individual Retirement Arrangements (IRAs)*; IRS Publication 590-B, *Distributions from Individual Retirement Arrangements (IRAs)*; and IRS Publication 571, *Tax-Sheltered Annuity Plan (403(b) Plans)*. These publications are available from a local IRS office, on the web at www.irs.gov, or by calling 1-800-TAX-FORM.

Construction Estimates

Inner Urban	City of Fort Lauderdale	Chester group
Interior Average \$151,333		
	Demolition \$10,000	Demolition \$14,000
	Doors Floors \$8000	Plumbing \$8000
	Floors \$32,000	Electrical \$24,000
	Drywall \$7000	Hvac \$28,000
	Plumbing \$4000	Doors \$8000
	Electrical \$19,000	Floor \$34,000
	HVAC \$24,000	Drywall \$8000
	Painting \$12,000	Floor Tiles \$8000
	Floor Tiles \$7000	Cabinets \$18,000
	Cabinets \$8500	
\$172,500	\$131,500	\$150,000
Exterior Average \$85,333		
Wall \$46000	Roof \$15,000	Roof \$18,000
Entry \$20,000	Store Front \$26,000	Store Front \$29,000
	Stucco \$6000	Stucco \$7000
	Paint \$12,000	Paint \$22,000
	Pavers \$27,000	Pavers \$28,000
\$66,000	\$86,000	\$104,000
	\$18,000	\$12,000
Architect Average \$15,000		
	\$56,000	\$55,860
Contractor Fees Average \$55,930		
TOTAL	\$307,596	10% Contingency \$338,355



1441 NW 137 Street, Miami, FL 33167
(786) 586-3941 TEL/ (404) 549-4384 FAX
State Certified General Contractor CGC1504933

Adding Value Through Quality & Performance—Block by Block
www.thechestergroup.com

September 5, 2017

City of Fort Lauderdale
Housing and Community Development Division
Department of Sustainable Development
700 NW 19th Avenue
Fort Lauderdale, FL 33311

RE: Demo and Rehabilitation of 1134 NW 6th Street, Fort Lauderdale, FL

The Chester Group proposes to provide all material, labor, equipment and supervision required to accomplish the work as described herein.

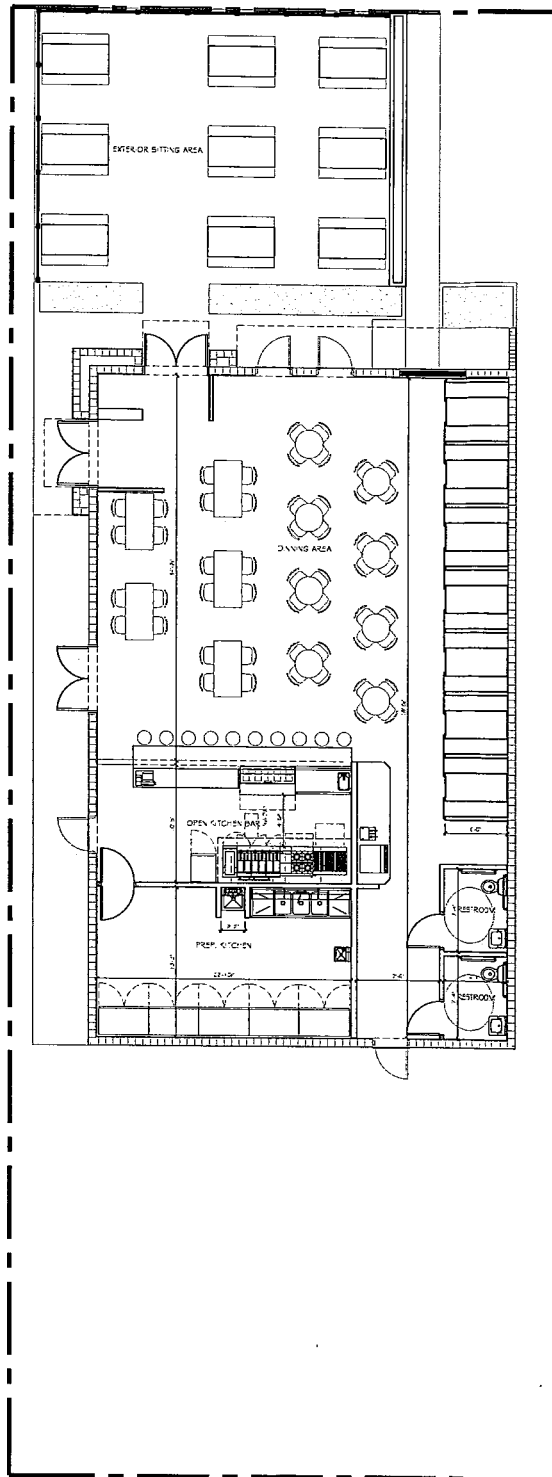
This scope of work is to be accomplished at 1134 NW 6th Street, Fort Lauderdale, FL

Please see Exhibit "A"

Total Cost: \$321,860.00

Upon your review, feel free to contact me with any questions you may have.

Wallace Chester
President





Fort Lauderdale, Florida

Construction Estimate

Client:

Construction Items

Quantity/Sq. Ft.

Dollar Amount

	Demolition						\$10,000.00
	Roof						\$15,000.00
	Window and Storefront						\$26,000.00
	Doors and Hardware						\$8,000.00
	Floor concrete repair and front						\$32,000.00
	Stucco repair						\$6,000.00
	Drywall and Offices						\$7,000.00
	Plumbing						\$4,000.00
	Electrical						\$19,000.00
	HVAC						\$24,000.00
	Painting Interior and Exterior						\$24,000.00
	Pavers at Front						\$27,000.00
	Flooring Tiles						\$7,200.00
	Cabinets						\$8,500.00
	Architect Fee						\$18,000.00
	General Contractor Fee						\$56,000.00
	Total						\$291,700.00

Current View



After







MARTY KIARD
BR 3 WARD
 COUNTY
 PROPERTY APPRAISER

Site Address	1134 NW 6 STREET, FORT LAUDERDALE FL 33311	ID #	5042 04 05 0320
Property Owner	CHDS LLC	Millage	0312
Mailing Address	1740 NW 3 COURT FORT LAUDERDALE FL 33311	Use	11
Abbreviated Legal Description	TUSKEGEE PARK 3-9 B LOT 8 LESS RD R/W BLK 3		

The just values displayed below were set in compliance with Sec. 193.011, Fla. Stat., and include a reduction for costs of sale and other adjustments required by Sec. 193.011(8).

Property Assessment Values					
Click here to see 2016 Exemptions and Taxable Values as reflected on the Nov. 1, 2016 tax bill.					
Year	Land	Building / Improvement	Just / Market Value	Assessed / SOH Value	Tax
2017	\$70,090	\$88,050	\$158,140	\$152,190	
2016	\$70,090	\$74,090	\$144,180	\$138,360	\$3,502.35
2015	\$70,090	\$55,700	\$125,790	\$125,790	\$3,157.75

2017 Exemptions and Taxable Values by Taxing Authority				
	County	School Board	Municipal	Independent
Just Value	\$158,140	\$158,140	\$158,140	\$158,140
Portability	0	0	0	0
Assessed/SOH	\$152,190	\$158,140	\$152,190	\$152,190
Homestead	0	0	0	0
Add. Homestead	0	0	0	0
Wid/Vet/Dis	0	0	0	0
Senior	0	0	0	0
Exempt Type	0	0	0	0
Taxable	\$152,190	\$158,140	\$152,190	\$152,190

Sales History				Land Calculations		
Date	Type	Price	Book/Page or CIN	Price	Factor	Type
4/22/2011	QCD-T	\$100	47869 / 576	\$11.00	6,372	SF
1/6/2011	WD-E	\$45,000	47637 / 247			
8/21/2009	PRD-T	\$100	46501 / 774			
7/1/1985	WD	\$2,000	12715 / 156			
1/1/1968	WD	\$5,000				
				Adj. Bldg. S.F. (Card, Sketch)		2537
				Eff./Act. Year Built: 1987/1986		

Special Assessments								
Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc
03							FL	
C								
2537							311.49	

This instrument prepared by and return to:
Robert E. Murdoch, Esq.
Johnson, Anselmo, Murdoch, Burke, Piper & Hochman, P.A.
2455 East Sunrise Boulevard, Suite 1000
Fort Lauderdale, Florida 33304

Property Identification Number: 504204-05-0320

WARRANTY DEED

(Statutory Form - §689.02, Florida Statutes)

THIS INDENTURE, made this 6th day of January, 2011, between **Thomas E. Pollard, a married man and Melissa L. Pollard, a single woman, ("Grantor")** and **Christopher L. Smith and Desorae Giles-Smith, husband and wife**, whose post office address is 1740 NW 3rd Court, Fort Lauderdale, Florida 33311, ("Grantee"),

WITNESSETH that said Grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said Grantor in hand paid by said Grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantee, and Grantee's heirs and assigns forever, the following described land, situate, lying and being in Broward County, Florida, to-wit:

See Exhibit "A" attached hereto and made a part hereof.

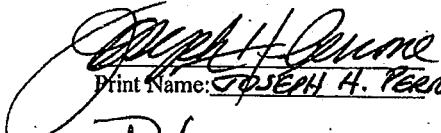
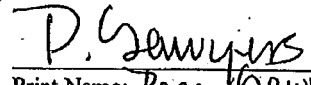
Said Grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever; subject to zoning and/or other restrictions and prohibitions imposed by governmental authority; covenants, restrictions, and public utility easements of record; and taxes for the year 2011 and all subsequent years.

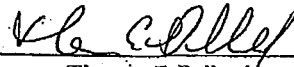
*"Grantor" and "grantee" are used for singular or plural, as context requires.

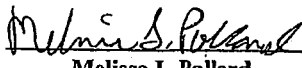
Grantor warrants that at the time of this conveyance, the subject property is not his or her homestead within the meaning set forth in the constitution of the State of Florida, nor is it contiguous to or a part of homestead property. Grantors' residence and homestead address are set forth underneath their signatures below.

IN WITNESS WHEREOF, Grantor has hereunto set Grantor's hand and seal the day and year first above written.

Witnesses:


Print Name: JOSEPH H. PERRONE

Print Name: Peggy Sawyers

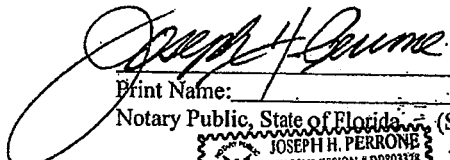
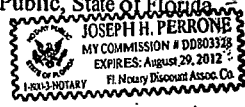

Thomas E. Pollard
Address: 8120 SW 22nd Street, B-101
North Lauderdale, Florida
33068


Melissa L. Pollard
Address: 699 NW 21st Avenue
Pompano Beach, Florida 33069

STATE OF FLORIDA)
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 6th day of January, 2011, by Thomas E. Pollard and Melissa L. Pollard, who are personally known to me or have produced DRIVER'S LICENSES as identification.

My Commission Expires:
My Commission Number Is:


Print Name: _____
Notary Public, State of Florida (Seal)


2

Quitclaim Deed

State of Florida

County of Broward

This indenture, made this 18th day of April 2011 between Desorae Giles-Smith and Christopher Smith, herein called the "grantor" and CHDS L.L.C., herein called the "grantee";

Witness that, in consideration of Ten dollars in hand paid and other valuable consideration, the receipt and sufficient of which are hereby acknowledged, grantor does hereby transfer and convey unto grantee all grantor's right, title and interest in and to the land:

Street address: 1130 NW 6TH Street, Fort Lauderdale, Florida 33311
Legal Description: TUSKEGEE PARK 3-9 B LOT 8 LESS RD R/W BLK 3
ID#: 5042 04 05 0320

together with all buildings and other improvements located thereon, and together with all rights, members and appurtenances in any manner appertaining or belonging to said property.

To have and to hold said property unto grantee and fee simple absolute forever. Grantor shall have no obligation to warrant or defend right, title or interest to said property unto grantee against the claims of any persons. Where the context requires or permits, "grantor" and "grantee" shall include their respective heirs, successors and assigns.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

Joise Margitt Desorae Giles-Smith Christopher Smith
Witness Grantor Grantor
John Gray Christopher Smith
Witness Grantee

STATE OF FLORIDA }
COUNTY OF BROWARD }

On April 22, 2011 before me, Erica Frederick, personally appeared Desorae Giles-Smith (Christopher Smith), personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Erica Frederick
Signature
Desorae Giles-Smith, FL DL
Christopher personally known to me
Affiant: ☐ Known ☐ Unknown

ID Produced: _____

[Seal]



ERICA FREDERICK
MY COMMISSION # EE 022337
EXPIRES: September 30, 2014
Shaded Tree Design Notary Services

①

Smitty's Equipment

Equipment	Vendor	Quantity	Price	Total	
Gas Fryer	Restaurant Depot	3	\$949.00	\$2847.00	
Ice Maker	Restaurant Depot	1	\$1741.00	\$1741.00	
Commercial Sink	Restaurant Depot	1	\$704.00	\$704.00	
MOP SINK CLOSET	Restaurant Depot	1	\$3059.00	\$3059.00	
Waffle Maker	Cheney Brother	2	\$797.00	\$1594.00	
Walk-In Cooler	Cheney brothers	1	\$8623.00	\$8623.00	
Beer Dispenser	Restaurant Depot	1	\$1500.00	\$1500.00	
Work Table	Restaurant Depot	1	\$188.00	\$188.00	
Two-door Freezer	Restaurant Depot	1	\$2219.00	\$2219.00	
Commercial Microwave Oven	Restaurant Depot	1	\$794.00	\$794.00	
Gas Range	Restaurant Depot	1	\$7089.00	\$7089.00	
Ambient Display Case	Restaurant Depot	1	\$730.00	\$730.00	
Inside Metal Frame Chairs	Restaurant Depot	60	\$56.40	\$3384.00	
Outdoor Chairs	Restaurant Depot	36	\$68.00	\$2448.00	
Outdoor Tables	Restaurant Depot	9	\$162.00	\$1458.00	
Booth Chairs	Restaurant Depot	14	\$324.00	\$4536.00	
Table Bottoms	Restaurant Depot	27	\$46.00	\$1242.00	
Table Tops	Restaurant Depot	20	\$40.00	\$800.00	
Outside Umbrellas	Restaurant Depot	9	\$194.00	\$1746.00	
					including tax
Total				\$46702.00	\$49504.12



Quote

05/24/2017

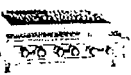
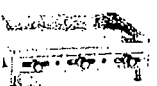
Project:
Smittys Wings - Equipment

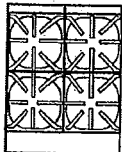
From:
Cheney Brothers
Belkys Quintana
1 Cheney Way
Riveria Beach, FL 334047000

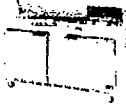
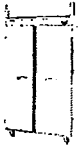
Job Reference Number: 5140

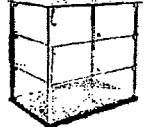
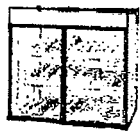
ALL QUOTES MUST BE SIGNED AND ATTACHED TO THE BACK OF A SPECIAL ORDER FORM WITH THE ITEMS BEING ORDERED WRITTEN ON THE SPECIAL ORDER FORM. NO ORDERS WILL BE PROCESSED WITHOUT A SIGNED QUOTE

THIS QUOTATION IS BASED ON OUR UNDERSTANDING OF THE INFORMATION FURNISHED TO US. WE ARE NOT RESPONSIBLE FOR THIS QUOTATION MEETING YOUR REQUIREMENTS IF BASED ON INCORRECT OR INCOMPLETE INFORMATION. PLEASE CHECK THIS QUOTATION CAREFULLY. ANYTHING NOT LISTED WILL NOT BE FURNISHED.

Item	Qty	Description	Sell	Sell Total
1	4 ea	 FRYER BATTERY, GAS, DUAL TANK Pitco Frialator Solstice Prepackaged Fryer System with Solstice Solo Filter System, gas, twin tank, (2) 20-25 lb. oil capacity tanks, millivolt control, stainless steel tank, front, sides, under-fryer drawer filtration, 10" adjustable legs, total 100,000 BTU, NSF, CE, CSA Flame, CSA Star, AuGA	\$11,214.69	\$44,858.76
	4 ea	1 year parts and labor warranty from the date of installation up to a maximum of 15 months from the date of manufacture (with appropriate documentation), standard		
	4 ea	Contact factory for multiple battery options		
	1 ea	LP gas		
	4 ea	Contact factory for control options & pricing		
	4 ea	Touch Screen Controller, 7" display	\$2,842.19	\$11,368.76
	4 ea	115v/60/1-ph, 6.1 amps		
	4 ea	Contact factory for cord information		
	4 ea	10" legs, standard		
	4 ea	Gas Connector Hose, 3/4" connection, 48" long, with quick disconnect couplings, restraining device & thermal shut-off, for single unit 240,000 BTU	\$480.00	\$1,920.00
ITEM TOTAL:				\$58,147.52
2	1 ea	 CHARBROILER, GAS, COUNTERTOP Imperial Charbroiler, gas, countertop, 24", cast iron radiants & slanted top grates, full width grease gutter, removable drip pan, stainless steel burners, front, sides & landing ledge, 4" legs, adjustable feet, 60,000 BTU, cETLus, NSF, CE	\$2,512.75	\$2,512.75
	1 ea	Limited one year parts and labor warranty, standard		
	1 ea	LP gas (must specify elevation if over 2000 ft)		
	1 ea	Equipment Stand, 24", undershelf, stainless steel construction, legs, for IRB-24, cETLus, NSF, CE	\$510.63	\$510.63
	1 ea	Quick disconnect & flex hose with restraining device, 3/4" N.P.T. x 60"	\$518.34	\$518.34
ITEM TOTAL:				\$3,541.72
3	1 ea	 GAS COUNTERTOP GRIDDLE Imperial Griddle, countertop, gas, 36" W x 24" D cooking surface, 3/4" thick, smooth polished steel plate, manual controls, 4" wide front grease trough, removable grease pan, stainless steel front, sides, splash guards & ledge, 4" legs, 90,000 BTU, cETLus, NSF	\$2,078.13	\$2,078.13
	1 ea	Limited one year parts and labor warranty, standard		
	1 ea	LP gas (must specify elevation if over 2000 ft)		
	1 ea	Equipment Stand, 36", undershelf, stainless steel construction, legs, for IMGA-3628 or IMGA-2428-OB-2, cETLus, NSF	\$673.91	\$673.91
	1 ea	Quick disconnect & flex hose with restraining device, 3/4" N.P.T. x 48"	\$467.88	\$467.88
ITEM TOTAL:				\$3,219.92
4	1 ea	RANGE, 24", 4 OPEN BURNERS	\$2,762.13	\$2,762.13

Item	Qty	Description	Sell	Sell Total
		Imperial Restaurant Range, gas, 24", (4) open burners, space saver oven, (1) chrome rack, safety pilot, shut-off valve, stainless steel front, sides, backguard, landing ledge & kick plate, 6" legs, adjustable feet, 155,000 BTU, NSF, CE, CSA		
	1 ea	Limited one year parts and labor warranty, standard		
	1 ea	Natural gas (must specify elevation if over 2000 ft)		
	1 ea	Stainless steel backguard with shelf standard		
	1 ea	Restaurant Series Range Match Cheesemelter, gas, 24", infrared burners, adjustable gas valve, continuous pilot, removable chrome plated rack, stainless steel front, sides, top & bottom, 20,000 BTU, NSF, CE, CSA	\$1,860.22	\$1,860.22
	1 ea	LP gas (must specify elevation if over 2000 ft)		
	1 ea	Quick disconnect & flex hose with restraining device, 3/4" N.P.T. x 48"	\$467.88	\$467.88
	1 ea	NOTE: Stainless steel backguard and reinforcement channels are required to mount to range		
	1 ea	(2) Reinforcement channels to mount broiler or cheesemelter to range	\$190.59	\$190.59
	1 ea	One point 3/4" gas connection from ISB broiler to range	\$322.41	\$322.41
	1 ea	Extra rack, for 24" cheesemelter	\$157.34	\$157.34
	1 ea	Gas shut-off valve, 3/4" N.P.T., per valve	\$43.34	\$43.34
	1 ea	Quick disconnect & flex hose with restraining device, 3/4" N.P.T. x 48"	\$467.88	\$467.88
		ITEM TOTAL:		\$6,271.79
5	1 ea	CONVECTION OVEN, GAS	\$6,026.56	\$6,026.56
		Imperial Convection Oven, gas, (1) deck, manual controls, (2) speed fan motor, dual open 60/40 doors, window, (5) racks, interior lights, stainless steel front, sides, doors, top & legs, 120v/50/60/1-ph, 9.0 amps, 1/2 HP, 70,000 BTU, cETLus, NSF, CE		
	1 ea	Limited one year parts and labor warranty, standard		
	1 ea	LP gas (must specify elevation if over 2000 ft)		
	1 ea	Casters (set of 4)	\$292.13	\$292.13
	1 ea	Gas shut-off valve, 3/4" N.P.T., per valve	\$43.34	\$43.34
	1 ea	Quick disconnect & flex hose with restraining device, 3/4" N.P.T. x 48"	\$467.88	\$467.88
		ITEM TOTAL:		\$6,829.91
6	1 ea	WAFFLE MAKER	\$797.54	\$797.54
		Waring Belgian Waffle Maker, double, up to (60) 7" diameter, 1-1/4" thick waffles per hour per plate, audio beep signal, rotary feature, power & ready-to-bake LED indicators, embedded heating element, non-stick plates, heavy duty die cast housing, 120v/60/1-ph, 2400W, 20.0 amps		
	1 ea	1 year limited warranty, standard		
		ITEM TOTAL:		\$797.54
7	2 ea	SANDWICH / SALAD PREPARATION REFRIGERATOR	\$3,916.35	\$7,832.70

Item	Qty	Description	Sell	Sell Total
		Beverage Air Elite Series™ Sandwich Top Refrigerated Counter, two-section, 60" W, 17.1 cu. ft., (2) doors, stainless steel top with opening for (16) 1/6 size pans, 10" cutting board, stainless steel exterior, aluminum interior, rear-mounted self-contained refrigeration, (pans furnished are 4" deep, tops will accommodate 6" deep pans) 1/3 HP, UL, cUL, UL EPH, MADE IN USA		
	2 ea	3 years parts & labor warranty (excludes maintenance items)		
	2 ea	Self-contained refrigeration standard		
	2 ea	Additional 2 yr compressor warranty, standard		
	2 ea	115v/60/1-ph, 9.6 amps, 8' cord, NEMA 5-15P, standard		
	2 ea	Left door hinged left, right door hinged right, standard		
	2 ea	6" Heavy duty casters, standard		
ITEM TOTAL:				\$7,832.70
8	2 ea	REFRIGERATED WORK TOP	\$3,206.59	\$6,413.18
		Beverage Air Worktop Refrigerator, two-section, 48" W, 13.9 cu. ft., (2) solid doors, (4) shelves, vertical thermometer, stainless steel front, 1/2" thick top and sides, aluminum interior, 4" removable backsplash, rear-mounted self-contained refrigeration, 6" casters, 1/5 HP, UL, cUL, ULEPH, MADE IN USA		
	2 ea	3 years parts & labor warranty (excludes maintenance items)		
	2 ea	Self-contained refrigeration standard		
	2 ea	Additional 2 yr compressor warranty, standard		
	2 ea	115v/60/1-ph, 3.3 amps, 8' cord, NEMA 5-15P, standard		
	2 ea	Left door hinged left, right door hinged on right, standard		
	2 ea	6" Heavy duty casters, standard		
ITEM TOTAL:				\$6,413.18
9	1 ea	REACH-IN FREEZER	\$6,421.28	\$6,421.28
		Beverage Air Horizon Series Freezer, reach-in, two-section, 49 cu. ft., (1) right-hand hinged solid door with locks, (1) left-hand hinged solid door with locks, (6) adjustable shelves, electronic control, LED interior lighting, digital display, expansion valve technology, automatic defrost, top-mounted self-contained refrigeration, stainless steel front, gray painted sides, aluminum interior, 6" casters, 3/4 hp, UL, cUL, UL EPH, MADE IN USA, ENERGY STAR®		
	1 ea	3 years parts & labor warranty (excludes maintenance items)		
	1 ea	Self-contained refrigeration standard		
	1 ea	Additional 2 yr compressor warranty, standard		
	1 ea	115v/60/1-ph, 12.0 amps, standard		
	1 ea	Left door hinged left, right door hinged right, standard		
	1 ea	6" Heavy duty casters (2) locking, standard		
ITEM TOTAL:				\$6,421.28
10	1 ea	REACH-IN REFRIGERATOR	\$4,865.57	\$4,865.57

Item	Qty	Description	Sell	Sell Total
		Beverage Air Horizon Series Refrigerator, reach-in, two-section, 49 cu. ft., (1) right-hand hinged solid door, (1) left-hand hinged solid door, door locks, (6) shelves, electronic control, LED interior lighting, digital display, top-mounted self-contained refrigeration, stainless steel front, gray painted sides, aluminum interior, 6" casters, 1/3 hp, UL, cUL, UL EPH, MADE IN USA, ENERGY STAR®		
	1 ea	3 years parts & labor warranty (excludes maintenance items)		
	1 ea	Self-contained refrigeration standard		
	1 ea	Additional 2 yr compressor warranty, standard		
	1 ea	115v/60/1-ph, 8.4 amps, standard		
	1 ea	Left door hinged left, right door hinged right, standard		
	1 ea	6" Heavy duty casters (2) locking, standard		
			ITEM TOTAL:	\$4,865.57
11	1 ea	AMBIENT DISPLAY CASE	\$730.50	\$730.50
		Equipex Ambient Display, 23-1/8"W x 14"D x 20-3/4"H, 3 tier, dual service, 2 glass shelves and top plus MDF base shelf, fully enclosed sides and top, pass thru with horizontally hinged glass doors, metal door pulls, MDF laminated base, aluminum columns, tempered glass panels, shelves and door		
	1 ea	Limited 1 yr. parts & labor warranty		
			ITEM TOTAL:	\$730.50
12	1 ea	DISPLAY CASE, NON-REFRIGERATED COUNTERTOP	\$589.31	\$589.31
		Paderno World Cuisine Doughnut Display, 19-5/8"L x 13"W x 20-7/8"H, plexiglas, double door		
			ITEM TOTAL:	\$589.31
13	1 ea	DISPLAY CASE, NON-REFRIGERATED COUNTERTOP	\$3,016.69	\$3,016.69
		Federal Industries Counter Top Full Pan Non-Refrigerated Self-Serve Bakery Display, 43"W x 30"D x 38"H, clear lift-up doors, top light with lighted shelves, (2) tiers of adjustable white wire shelves, black powder coated frame with white interior deck, back light merchandising sign, removable sliding glass rear doors, glass ends, cord & plug, UL		
	1 ea	One year parts & labor warranty		
	1 ea	120v/60/1-ph, 2.0 amps		
			ITEM TOTAL:	\$3,016.69
14	1 ea	DISPLAY CASE, REFRIGERATED, SELF-SERVE	\$7,354.13	\$7,354.13
		Federal Industries Specialty Display Low Profile Self-Serve Refrigerated Merchandiser, 60"W x 34"D x 46"H, self contained refrigeration with condensate pump, electronic temperature control, night curtain, horizontal top light, (2) tiers of adjustable solid black metal shelves, stainless steel display deck & black interior, black trim, tempered glass ends, rear access, choice of laminate, thermometer, steel base construction, adjustable feet, R404, UL, UL EPH CLASSIFIED		

Item	Qty	Description	Sell	Sell Total
	1 ea	One year parts & labor warranty		
	1 ea	Self-contained refrigeration standard		
	1 ea	208-240v/60/1-ph, 1/2 hp, 9.0 amps, cord & plug (NEMA 6-15P)		
	1 ea	Five year compressor warranty (for self-contained units only)		
	1 ea	Laminate standard color - Black		
			ITEM TOTAL:	\$7,354.13
15	1 ea	WALK IN COMBINATION COOLER FREEZER, SELF-CONTAINED AmeriKooler Two Compartment Walk-In INDOOR COMBO Overall Dimensions: 11'-1/4" x 16'-7 3/4" Compartment 1 of 2 - Indoor Freezer, with Floor	\$12,750.00	\$12,750.00
			ITEM TOTAL:	\$12,750.00
	1 ea	WALK IN COMBINATION COOLER FREEZER, SELF-CONTAINED AmeriKooler REMOTE CONDENSING UNIT 2.5 HP Bohn Outdoor Condensing Unit, Model BHT025L6BF, 208-230/60/1, MCA 20 AMPS, LOW TEMP, HERMETIC, AIR COOLED R404A, 1 YEAR COMPRESSOR AND PARTS WARRANTY FROM DATE OF SHIPMENT...Full spec to be provided when signed.	\$6,723.60	\$6,723.60
			ITEM TOTAL:	\$6,723.60
	1 ea	INSTALLATION CHERNOFF Installation by Ultra Air, LLC - Price for install including labor, material, and start up. Price includes up to 60' of refrigerant lines per system. Price subject to change if refrigerant lines extend beyond 60'. NOTE: Estimates are good for 30 days from date of estimate. Customer signature required and implies agreement to price and description of estimate. 50% deposit required at time of acceptance, and 50% due upon completion of job. Price subject to change upon occurrence of unexpected situations. PREPAID FREIGHT TO MIAMI	\$8,623.84	\$8,623.84
			ITEM TOTAL:	\$8,623.84
16	1 ea	EXHAUST HOOD CBI HOOD Exhaust Only Wall Canopy Hood w/ ASP Constant Volume Fan Control Center Inline Fan	\$58,949.80	\$58,949.80

Cheney Brothers

05/24/2017

Item	Qty	Description	Sell	Sell Total
			ITEM TOTAL:	\$58,949.80
1 ea		ANSUL CABINET		<Included>
		CBI HOOD		
		Fire Suppression System		
		PRICE INCLUDED WITH ITEM #100		<Included>
1 ea		INSTALLATION	\$9,839.00	\$9,839.00
		CHERNOFF		
		Installation by Ultra Air, LLC - Price for install including labor, material, and start up. Price includes up to 60' of refrigerant lines per system. Price subject to change if refrigerant lines extend beyond 60'.		
NOTE: Estimates are good for 30 days from date of estimate. Customer signature required and implies agreement to price and description of estimate. 50% deposit required at time of acceptance, and 50% due upon completion of job. Price subject to change upon occurrence of unexpected situations.				
PREPAID FREIGHT TO MIAMI				
			ITEM TOTAL:	\$9,839.00
17	4 ea	UMBRELLA	\$398.48	\$1,593.92
		Tuuci		
		Bay Master Classic Parasol, 6-1/2 ft., square top, 1-1/2" dia. mast, market style canopy, single wind vent, fiberflex strut design, silver delrin hub system, manual lift with stainless steel pin, stainless steel acorn finial, satin anodized silver frame finish		
	4 ea	Grade B fabric	\$19.92	\$79.68
	4 ea	Fabric to be specified		
	4 ea	Shade Anchor, 24" dia., 95 lb., concrete filled, includes 1-1/2" stainless steel security sleeve, aluminum, silver marine finish	\$188.89	\$755.56
			ITEM TOTAL:	\$2,429.16
	16 ea	CUSTOM	\$41.81	\$668.96
		TUUCI		
		Please add valance for Tucci umbrella		
			ITEM TOTAL:	\$668.96
	1 ea	CUSTOM	\$186.30	\$186.30
		TUUCI		
		ONE COLOR LOGO PRINTED ON VALANCE - ONE TIME SCREEN CHARGE		
			ITEM TOTAL:	\$186.30
	16 ea	CUSTOM	\$11.50	\$184.00
		TUUCI		
		PRINT LOGO PER VALANCE		
			ITEM TOTAL:	\$184.00
	1 ea	FREIGHT PROGRAM	\$200.00	\$200.00
		TUUCI		
		Est Freight - Made to Order - Lead time 4-5 weeks		
			ITEM TOTAL:	\$200.00
18	10 ea	LAMINATE TABLE TOP	\$188.89	\$1,888.90

Item	Qty	Description	Sell	Sell Total
		BFM Seating Tribeca Table Top, 36" x 36", square, compact laminate with knife edge, driftwood		
	1 ea	NO UMBRELLA HOLE		
			ITEM TOTAL:	\$1,888.90
2	45 ea	CHAIR	\$105.57	\$4,750.65
		BFM Seating Packed 2 ea Mai Tai Stacking Side Chair, black textilene back & seat, powder coat aluminum frame with walnut bamboo finish		
				
			ITEM TOTAL:	\$4,750.65
3	10 ea	METAL TABLE BASE	\$91.08	\$910.80
		BFM Seating Bali Table Base, standard height, 26" x 26", 4-leg, for Longport, SoHo & Chelsea tops, outdoor/indoor, powder coated, black finish		
				
			ITEM TOTAL:	\$910.80
4	1 ea	FREIGHT PROGRAM	\$700.00	\$700.00
		BFM Seating Freight Program....LIFT GATE REQUIRED - lead time 3-4 weeks		
			ITEM TOTAL:	\$700.00
19	1 ea	FREIGHT PROGRAM	\$2,885.00	\$2,885.00
		freight Est Freight for All other equipment		
			ITEM TOTAL:	\$2,885.00
19	1 ea	INSTALLATION	\$4,882.00	\$4,882.00
		freight Installation for kitchen line equipment		
			ITEM TOTAL:	\$4,882.00
20	1 ea	SMALLWARE PACKAGE	\$15,282.00	\$15,282.00
		Custom Small equipment & smallwares package		
			ITEM TOTAL:	\$15,282.00
19	1 ea	FREIGHT PROGRAM	\$1,965.00	\$1,965.00
		freight Freight for small equipment package...		
			ITEM TOTAL:	\$1,965.00

NOTE:

1. FREIGHT CHARGES ADDITIONAL UNLESS NOTED
2. PRICE DOES NOT INCLUDE INSTALLATION OF EQUIPMENT UNLESS NOTED
3. PRICING DOES NOT INCLUDE TAX
4. "F.O.B. DELIVERY"/FREE FREIGHT DOES NOT INCLUDE LIFTGATE CHARGES
5. ALL ELECTRICAL, PLUMBING, PERMITS, ROOF PENETRATIONS ARE BY OTHERS
6. PRICING IS VALID AS A PACKAGE FOR THIRTY DAYS
7. WE ARE NOT RESPONSIBLE FOR TYPOGRAPHICAL ERRORS
8. AT TIME OF ORDERING, PLEASE CONFIRM UTILITIES AND DIMENSIONS
9. SHOP DRAWINGS ON CUSTOM ITEMS WILL BE SUPPLIED ONLY AFTER RECEIPT OF APPROVED PURCHASE ORDER AND DEPOSIT
10. PLEASE VERIFY SPECIFICATIONS; ITEMS ORDERED ARE BASED ON WRITTEN QUOTATIONS, NOT VERBAL
11. ALL RIGHTS AND INTEREST RESERVED UNTIL PAID IN FULL

*****ORDER WILL NOT BE PLACED WITHOUT INITIALS VERIFYING UTILITIES*****

CIRCLE AND INITIAL IF APPLICABLE: GAS _____ LP _____ NATURAL

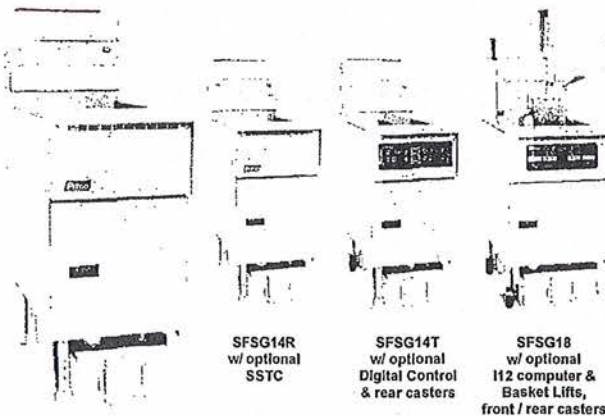
Acceptance: _____ Date: _____

Printed Name: _____

Project Grand Total: \$249,850.77



SOLOFILTER Solstice Gas (SFSG) Series SFSG14, 14R, 14T, 18 Fryer



SFSG14
w/ standard
Millivolt T-Stat

SFSG14R
w/ optional
SSTC

SFSG14T
w/ optional
Digital Control
& rear casters

SFSG18
w/ optional
I12 computer &
Basket Lifts,
front / rear casters

STANDARD FRYER FEATURES & ACCESSORIES

- Tank - stainless steel construction
- Cabinet - stainless front, door and sides
- Solstice Burner Technology, No blower or ceramics
- Patented Self Cleaning Burner & Down Draft Protection (with upgraded controls, SSTC, Digital, Computer)
- Millivolt Thermostat (T-Stat)
- High Temperature safety limit switch
- Heavy duty 3/16" bottom door hinge
- 1 1/4" (3.2 cm) Full port drain valve for fast draining
- Separate Manual gas shutoffs, for front servicing
- Integrated flue deflector
- 10" (25.4cm) adjustable legs, easier access to clean
- Tube rack, allows crumbs & debris into cool zone
- Removable basket hanger, requires no tools
- Drain Line Clean out rod
- Fryer cleaner sample packet
- Choice of basket options :
 - ☐ 2-Twin Baskets
 - ☐ 1-Full Basket (not available on 14T or Basket Lifts)

STANDARD FILTER FEATURES & ACCESSORIES

- Easy Two Step Filtering
- Extra Large 3" (7.6cm) curved drain spout virtually eliminates splashing and swivels for oil disposal
- 8 gpm filter pump for fast refill times
- Self Aligning filter connection for effortless hookup
- Rear oil return for bottom cleaning
- Filter pan is stainless with rear wheels for easy handling
- Filter pan lid is self storing and out of the way
- Fryer crumb scoop
- Filter shovel scoop
- Filter paper envelope starter pack
- Filter powder sample
- Fryer cleaning brush

Project _____

Item No. _____

Quantity _____

APPLICATION

For Space Saving filtering and high production frying in one single Solo cabinet, specify Pitco SoloFilter Solstice Gas Models SFSG14, 14R, 14T or SFSG18 tube fryers with the patented Solstice Burner Technology. The dependable atmospheric heating system provides fast recovery to cook a variety of food products. The Solstice gas fryer comes in various sizes with optional cooking controllers and a self contained space saving simple two step Solstice filter. Making filtering conveniently fast to keep the oil cleaner for producing better quality products and to maximize oil life & profits.

MODELS AVAILABLE

- ☐ SFSG14 (40-50 lbs, 14 x14" fry area, 110 Kbtu/hr)
- ☐ SFSG14R (40-50 lbs, 14 x14" fry area, 122 Kbtu/hr)
- ☐ SFSG14T (20-25 lbs, 7x 14", 50 Kbtu/hr per side for this twin tank fryer, 100 Kbtu/hr total)
- ☐ SFSG18 (70-90 lbs, 18 x 18" fry area, 140Kbtu/hr)

OPTIONS & ACCESSORIES (AT ADDITIONAL COST)

- ☐ Matchless Ignition with DVI drain valve interlock (included with Solid State T-Stat, Digital Control & Computer only)
- ☐ Solid State T-Stat (SSTC) (w/melt cycle & boil out mode)
- ☐ Digital Controller (2 timers w/melt cycle)
- ☐ Intellifry I-12 Computer (12 elastic timers w/melt cycle & boil out)
- ☐ Backup thermostat (only on Digital and I-12 computer)
- ☐ Basket Lift (must be ordered with Digital Control or Computer) (To meet AGA/CGA/CSA specification, must be ordered with casters & installed with flexible gas hose w/restraining cable)
- ☐ Stainless Steel back (not available with basket lift)
- ☐ 10" (25.4cm) adjustable, rear fixed rigid casters only
- ☐ 10" (25.4cm) adjustable, rear non locking & front locking rigid casters
- ☐ Flexible gas hose with disconnect and restraining cable
- ☐ Tank cover
- ☐ 3-Triple Baskets (not available on 14T or Basket Lifts)
- ☐ Splash Guard reversible (L/R) ☐ 6" ☐ 8" ☐ 12" ☐ 18"
- ☐ Work shelves call factory for specifications and availability.
- ☐ Fish Grids (not available on 14T)
- SoloFilter System Options
 - ☐ Filter flush hose
 - ☐ Filter pump heaters
 - ☐ Paperless Filter
 - ☐ Waste Oil Management
 - ☐ Filter Crumb Catch
- ☐ Institutional Prison security package
- ☐ BNB Dump Station, see BNB spec sheet L10-199 for details
- ☐ SPINFRESH See Spec Sheet L10-524 for details

SOLOFILTER Solstice Gas (SFSG) Series SFSG14, 14R, 14T, 18 Fryer



Smittys Wings - Equipment

Pitco Frialator, Inc • P.O. Box 501, Concord, NH 03302-0501 • 509 Route 3A, Bow, NH 03304

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L10-152 Rev 5 04/12

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SOLOFILTER Solstice Gas (SFSG) Series SFSG14, 14R, 14T, 18 Fryer

G 3/4 INCH GAS CONNECTION
(CE 3/4 INCH BSP ADAPTOR
ADDS 1 1/2 [3.8] TO
CONNECTION)

P 6 FOOT (183 CM) POWER
CORD (NEMA 5-15 PLUG
115VAC UNITS ONLY)

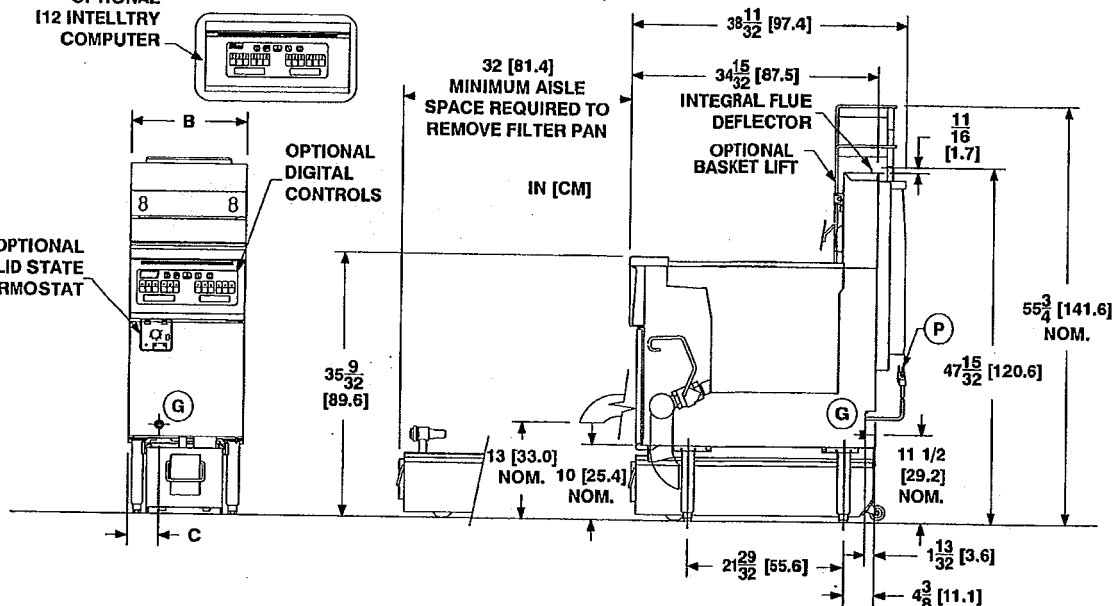
OPTIONAL
112 INTELLTRY
COMPUTER

OPTIONAL
SOLID STATE
THERMOSTAT

OPTIONAL
DIGITAL
CONTROLS

32 [81.4]
MINIMUM AISLE
SPACE REQUIRED TO
REMOVE FILTER PAN
IN [CM]

	SG14 (R) SG14T	SG18
A	48 5/16 [122.8]	52 5/16 [132.9]
B	15 5/8 [39.7]	19 5/8 [49.8]
C	4 1/4 [10.8]	6 1/4 [15.9]



INDIVIDUAL FRYER SPECIFICATIONS

Model	Frying Area	Cook Depth	Oil Capacity
SFSG14 & 14R	14 x 14 in (35.6 x 35.6 cm)	3-1/4 - 5 in (8.3 - 12.7 cm)	40 - 50 Lbs (18 - 23 kg)
SFSG14T per side	7 x 14 in (17.7 x 35.6 cm)	3-1/4 - 5 in (8.3 - 12.7 cm)	20 - 25 Lbs (9 - 11 kg)
SFSG18	18 x 18 in (45.7 x 45.7 cm)	3-1/4 - 5 in (8.3 - 12.7 cm)	70 - 90 Lbs (34 kg)

FILTER SPECIFICATIONS

For Models	Pan Oil Capacity	Filter Media Paper Envelope	Filter Pump Rated Flow	Filter Pump Motor
SFSG14, 14R	66 Lbs (29.9 kg)	10 x 20-1/2 in (25.4 x 52.1 cm)	8 GPM (30.3 LPM) @ 60 Hz 6.7 GPM (25.4 LPM) @ 50 Hz	1/3 HP 50/60 Hz
SFSG14T				
SFSG18	90 Lbs (41 kg)	14 x 22 in (35.6 x 55.9 cm)		

FRYER SYSTEM SHIPPING INFORMATION (Approximate)

Model	Shipping Weight	Shipping Weight w B/L	Shipping Crate Size H x W x L	Shipping Cube
SFSG14 & 14R	358 Lbs (162 kg)	458 Lbs (208 kg)	59 x 23 x 44 in (149.8 x 58.4 x 111.7 cm)	34.6 ft ³ (1.0m ³)
SFSG14T	380 Lbs (172 kg)	480 Lbs (218 kg)		
SFSG18	376 Lbs (170 kg)	467 Lbs (212 kg)		

INSTALLATION INFORMATION

GAS SYSTEM REQUIREMENTS			ELECTRIC SYSTEM REQUIREMENTS (50/60 Hz)			
Gas Type	Store Supply Pressure *	Burner Manifold Pressure	Amps	# of Cord	115V	208 / 220-240V
Natural	7 - 10" w.c. (17.4 mbars/ 1.7 kPa)	4" w.c. (10 mbars / 1 kPa)	Fryer/Filter	1	6.1	6.1
Propane	11 - 13" w.c. (27.4 mbars/ 2.7 kPa)	10" w.c. (25mbars/2.4 kPa)	For heaters add 0.43A to 115V or .24A to 208/230-240V			

* Check plumbing / gas codes for proper gas supply line sizing to sustain burner pressure when all gas appliances are full on.

CLEARANCES (Do Not Curb Mount)

Front min.	Floor min.	Combustible material		Non-Combustible material		Fryer Flue Area
32" (81.4 cm)	6" (15.25 cm)	Sides min.	Rear min.	Sides min.	Rear min.	Do not block / restrict flue gases from flowing into hood or install vent hood drains over the flue.
		6" (15.2cm)	6" (15.2cm)	0"	0"	

SHORT FORM SPECIFICATIONS

Provide Pitco SoloFilter Solstice Gas Model (SFSG xxx) tube fired high production gas floor filter/fryer. Fryer shall be xx-xx lbs oil capacity, xxx Kbtu/hr, xx" by xx" fry area, SS peened tank, stainless front, door, sides. Blower Free atmospheric burner system, with millivolt thermostat (or specify optional upgraded controls: behind the door solid state thermostat w/ melt & boil mode or digital controller or computer controls: with matchless ignition, drain valve interlock and patented self clean burner and down draft protection), separate gas shut off, 3/4" npt rear gas connect, recessed cabinet back, 1-1/4" Full port drain, 3/16" bottom hinge. Drain Line shall be 3" (7.6 cm) diameter with a swivel drain spool for oil disposal. Filter pickup assembly use envelope filter paper. 8 GPM, 60 Hz (25.4 LPM 50 Hz) filter pump. Filter piping to be self aligning, filter lid integral to cabinet, filter pan to have rear casters for portability, two step filter process. Provide options and accessories as follows:



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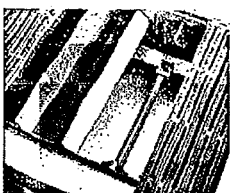
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IMPERIAL RADIANT COUNTER TOP

IMPERIAL®

Model Numbers

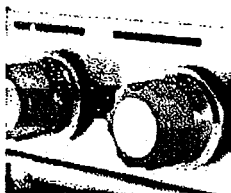
IRB-24
IRB-30
IRB-36
IRB-48
IRB-60
IRB-72



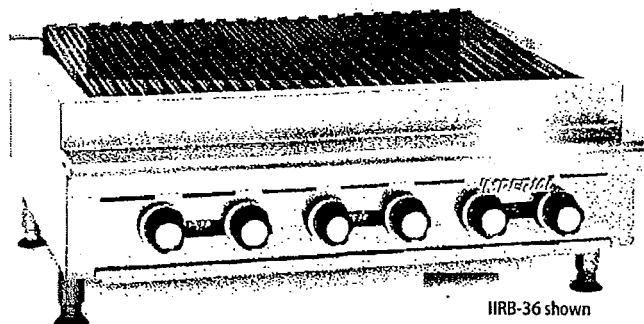
Stainless steel burners with both cast-iron and optional stainless steel radiants shown.



Stainless steel burners and radiant combination creates a searing hot grate temperature.



Durable cast aluminum with a vylox heat protection grip.



IRB-36 shown

RADIANT BROILER BURNER SYSTEM - Individually controlled 15,000 BTU/hr. (4 KW) stainless steel burners.

- Burners are located every 6" (152 mm) with individual controls.
- Removable, reinforced cast iron radiants prevent clogging of burners and provide even broiling.
- Standard cast iron radiants provide maximum heat retention and intense surface temperatures.
- Optional stainless steel radiants provide quick heat-up while minimizing flare-ups.

TOP GRATES - Heavy duty cast iron top grates provide attractive char-broiler markings.

- 3" x 22" (76 x 559) sections remove easily and safely for cleaning.
- Slanted cooking surface provides a range of cooking temperatures.
- All grates are in sections to remove easily and safely for cleaning.
- Slanted cooking surface provides a range of cooking temperatures.
- Each top grate blade has a cast-in grease trough that allows excess fat to flow to the front grease gutter minimizing flare-up.
- No tools are needed to remove grates, radiant covers and stainless steel burners for cleaning.

EXTERIOR FEATURES - Stainless steel front, sides and landing ledge for cleanability and professional look.

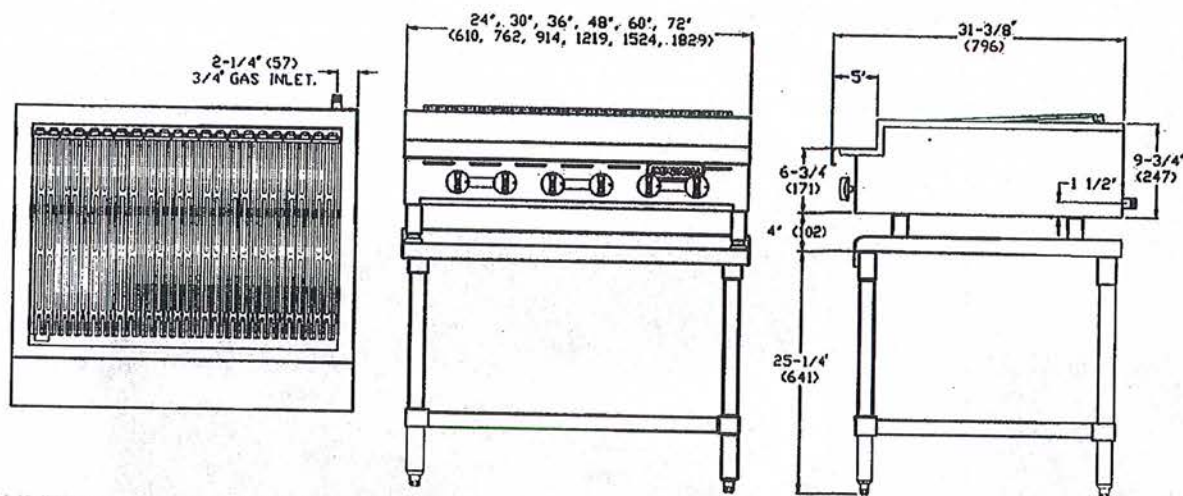
- Welded and polished stainless steel seams.
- Range Match profile when placed on a refrigerated base or equipment stand.
- Large 5" (127 mm) stainless steel landing ledge is ideal for plating.
- Control knobs are durable cast aluminum with a vylox heat protection grip.
- Full width grease gutter and large capacity removable drip pan.
- Insulated throughout cooktop to conserve energy.
- 4" (152 mm) heavy duty legs with adjustable feet.
- One year parts and labor warranty.





RADIANT COUNTER TOP

IMPERIAL®



COUNTER TOP RADIANT BROILERS

MODEL	WIDTH	NUMBER OF BURNERS	GAS OUTPUT BTU (KW)	SHIP WEIGHT (KG) LBS
IRB-24	24" (610 mm)	4	60,000 (18)	(118) 260
IRB-30	30" (762 mm)	5	75,000 (22)	(141) 310
IRB-36	36" (914 mm)	6	90,000 (26)	(159) 350
3-48	48" (1219 mm)	8	120,000 (35)	(202) 445
IRB-60	60" (1524 mm)	10	150,000 (44)	(261) 575
IRB-72	72" (1829 mm)	12	180,000 (53)	(319) 705

Measurements in () are metric equivalents.

MANIFOLD PRESSURE	MANIFOLD
NATURAL GAS	PROPANE GAS
5.0" W.C.	10.0" W.C.
	3/4" (19 mm)

Specify elevation, if over 2,000 ft.

CLEARANCE REQUIREMENTS

Legs or stand required for non-combustible surfaces.
Provide 0" clearance from non-combustible surfaces
and 8" (203 mm) from combustible surfaces.

MODEL	DIMENSIONS	CRATED DIMENSIONS
IRB-24	24" w x 31-3/8" d x 13-3/4" h (610 x 797 x 286 mm)	26-1/2" w x 34" d x 16" h (673 x 864 x 406 mm)
IRB-30	30" w x 31-3/8" d x 13-3/4" h (762 x 797 x 286 mm)	32-1/2" w x 34" d x 16" h (826 x 864 x 406 mm)
IRB-36	36" w x 31-3/8" d x 13-3/4" h (914 x 797 x 286 mm)	38-1/2" w x 34" d x 16" h (978 x 864 x 406 mm)
IRB-48	48" w x 31-3/8" d x 13-3/4" h (1219 x 797 x 286 mm)	50-1/2" w x 34" d x 16" h (1283 x 864 x 406 mm)
IRB-60	60" w x 31-3/8" d x 13-3/4" h (1524 x 797 x 286 mm)	62-1/2" w x 34" d x 16" h (1588 x 864 x 406 mm)
IRB-72	72" w x 31-3/8" d x 13-3/4" h (1829 x 797 x 286 mm)	74-1/2" w x 34" d x 16" h (1892 x 864 x 406 mm)

OPTIONS AND ACCESSORIES

- Stainless steel radiants, in lieu of cast iron
- Stainless steel flashing
- Stainless steel equipment stands
- 6" (152 mm) casters for equipment stands
- Gas shut off valve 3/4" (19 mm)
- Quick disconnect and flexible gas hose



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Smittys Wings - Equipment

Cheney Brothers

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MANUALLY CONTROLLED

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Model Numbers

IMGA-2428

IMGA-3628

IMGA-4828

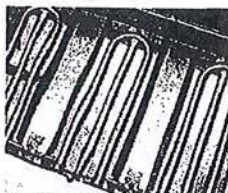
IMGA-2428-1

IMGA-3628-1

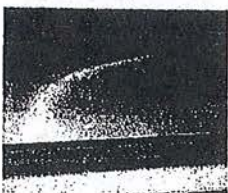
IMGA-4828-1

IMGA-6028-1

IMGA-7228-1



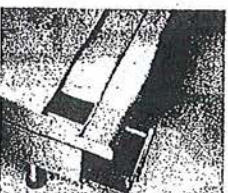
Aeration baffles between burners spread heat across the griddle plate for even heating.



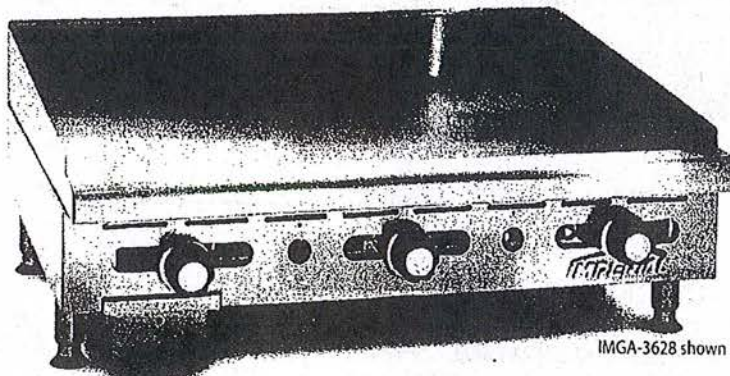
Thick highly polished steel griddle plate maintains selected temperatures.



Full width rear flue distributes heat uniformly across the griddle surface.



Stainless steel grease gutter and 1 gal. (3.8 L) grease can.



IMGA-3628 shown

BURNERS - Each manually controlled griddle burner is rated at 30,000 BTU (9KW).

- Each burner has an adjustable gas valve and continuous pilot for instant ignition.
- Aeration baffles between burners spread the heat evenly across the entire griddle surface.
- Burners are located every 12" (305 mm).

GRIDDLE PLATE - Thick, highly polished steel plate holds temperature and has a quick recovery.

- Two plate thickness available, 3/4" (19 mm) and 1" (25 mm) for models with (-1) suffix.
- Full 24" (610 mm) plate depth for more cooking surface.
- Surface is ideal for a large range of menu items.
- Optional chrome and grooved griddle top are available as an option.

GREASE MAINTENANCE - Stainless steel grease gutter is 4" (102 mm) wide.

- Large 1 gal (3.8 L) capacity grease can has a weep hole to indicate when full.
- Grease can removes easily.

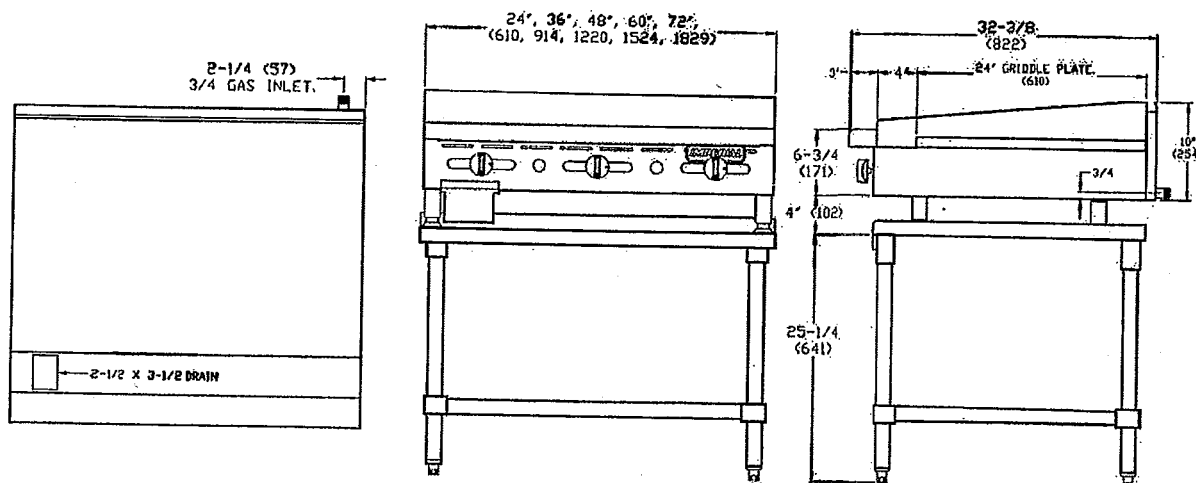
EXTERIOR - Stainless steel front, sides, splash guard, and ledge.

- Stainless steel ledge is one piece rolled for cleaning convenience.
- Range match profile when placed on a refrigerated base or equipment stand.
- Control knobs are cast aluminum with a vylox heat protection grip.
- 4" (102 mm) stainless steel legs are included.
- One year parts and labor warranty.





MANUALLY CONTROLLED

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MANUALLY CONTROLLED GRIDDLES

MODEL	WIDTH	NUMBER OF BURNERS	GAS OUTPUT BTU	(KW)	SHIP WEIGHT (KG)	LBS
3/4" (19 mm) HIGHLY POLISHED PLATE						
IMGA-2428	24" (610 mm)	2	60,000	(18)	(91)	200
IMGA-3628	36" (914 mm)	3	90,000	(26)	(138)	305
IMGA-4828	48" (1219 mm)	4	120,000	(35)	(163)	360
(25 mm) HIGHLY POLISHED PLATE						
IMGA-2428-1	24" (610 mm)	2	60,000	(18)	(116)	255
IMGA-3628-1	36" (914 mm)	3	90,000	(26)	(172)	380
IMGA-4828-1	48" (1219 mm)	4	120,000	(35)	(193)	425
IMGA-6028-1	60" (1524 mm)	5	150,000	(44)	(245)	540
IMGA-7228-1	72" (1829 mm)	6	180,000	(53)	(290)	640

Measurements in () are metric equivalents.

MANIFOLD PRESSURE	MANIFOLD SIZE
NATURAL GAS 5.0" W.C.	PROANE GAS 10.0" W.C.
	3/4" (19 mm)

Specify elevation, if over 2,000 ft.

CLEARANCE REQUIREMENTS

For use only on non-combustible surfaces. Provide 0" clearance from non-combustible surfaces and 6" (152 mm) from combustible surfaces.

OPTIONS AND ACCESSORIES

- Stainless steel equipment stands
- 6" (152 mm) casters for equipment stands
- Open burners available, set of 2 burners, add 12" (305 mm) to width and "OB-2" to model number)
- Open burners available, set of 4 burners, add 24" (610 mm) to width and "OB-4" to model number)
- 5" (127 mm) deep, stainless steel front landing ledge
- 7" (178 mm) deep, stainless steel front landing ledge
- Chrome griddle top, (add "-CG" to model number)
- Grooved griddle top, (add "-GG" to model number)
- Extra grease can



MODEL	GRIDDLE PLATE DIMENSIONS	DIMENSIONS	GRIDDLE PLATE DIMENSIONS	DIMENSIONS
IMGA-2428	24" w x 24" d (610 x 610 mm)	24" w x 32-3/8" d x 14" h (610 x 822 x 356 mm)	26-1/2" w x 36" d x 16-1/2" h (673 x 914 x 419 mm)	
IMGA-3628	36" w x 24" d (914 x 610 mm)	36" w x 32-3/8" d x 14" h (914 x 822 x 356 mm)	38-1/2" w x 36" d x 16-1/2" h (978 x 914 x 419 mm)	
IMGA-4828	48" w x 24" d (1219 x 610 mm)	48" w x 32-3/8" d x 14" h (1219 x 822 x 356 mm)	50-1/2" w x 36" d x 16-1/2" h (1283 x 914 x 419 mm)	
IMGA-2428-1	24" w x 24" d (610 x 610 mm)	24" w x 32-3/8" d x 14" h (610 x 822 x 356 mm)	26-1/2" w x 36" d x 16-1/2" h (673 x 914 x 419 mm)	
IMGA-3628-1	36" w x 24" d (914 x 610 mm)	36" w x 32-3/8" d x 14" h (914 x 822 x 356 mm)	38-1/2" w x 36" d x 16-1/2" h (978 x 914 x 419 mm)	
IMGA-4828-1	48" w x 24" d (1219 x 610 mm)	48" w x 32-3/8" d x 14" h (1219 x 822 x 356 mm)	50-1/2" w x 36" d x 16-1/2" h (1283 x 914 x 419 mm)	
IMGA-6028-1	60" w x 24" d (1524 x 610 mm)	60" w x 32-3/8" d x 14" h (1524 x 822 x 356 mm)	62-1/2" w x 36" d x 16-1/2" h (1588 x 914 x 419 mm)	
IMGA-7228-1	72" w x 24" d (1829 x 610 mm)	72" w x 32-3/8" d x 14" h (1829 x 822 x 356 mm)	74-1/2" w x 36" d x 16-1/2" h (1892 x 914 x 419 mm)	

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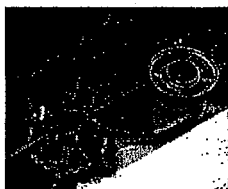
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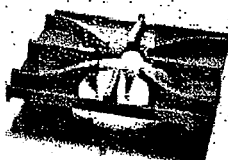
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Model Numbers

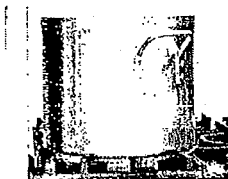
IR-4	IR-2-G12-XB
IR-4-XB	IR-G24
IR-2-G12	IR-G24-XB



Two rings of flame for even cooking no matter the pan size.



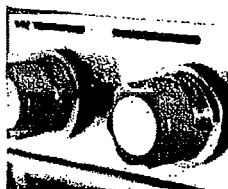
Top grates with anti-clogging pilot shield protect the pilot from grease and debris.



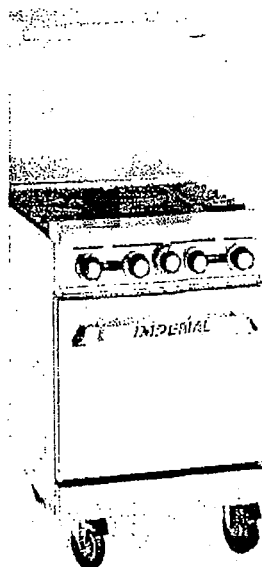
Back grate hot air dam deflects heat onto the stock pot, not the back splash.



Large 5" (127 mm) stainless steel landing ledge for convenient plating.



Durable cast aluminum with a vylox heat protection grip.



IR-4 shown with optional casters

OPEN BURNERS - PyroCentric™ 32,000 BTU (9 KW) anti-dogging burner with a 7,000 BTU/hr. (2 KW) low simmer feature. Two rings of flame for even heating.

- Cast iron PyroCentric burners are standard on all IR Series Ranges.
- Burners are anti-clogging and lift-off and separate for easy cleaning. No gaskets or screws.
- One standing pilot per burner for instant ignition.

GRATES - Front grates measure 12" x 11" (305 x 279 mm). Back grates are 12" x 13" (305 x 330 mm).

- Back grates are sized for positioning large stock pots directly over burner and feature a hot air dam.
- Pots slide easily from section to section and onto landing ledge.
- Grates are cast iron for a long service life.

GRIDDLE - Highly polished 3/4" (19 mm) steel plate. 21" (533 mm) plate depth.

- Burners have 20,000 (6 KW) BTU/hr. output with a heat deflector every 12" (305) for even heating.
- 3" (76 mm) wide grease trough and removable grease can for easy cleaning.
- Large griddle grease can and full width broiler drip tray are removable for easy cleaning.

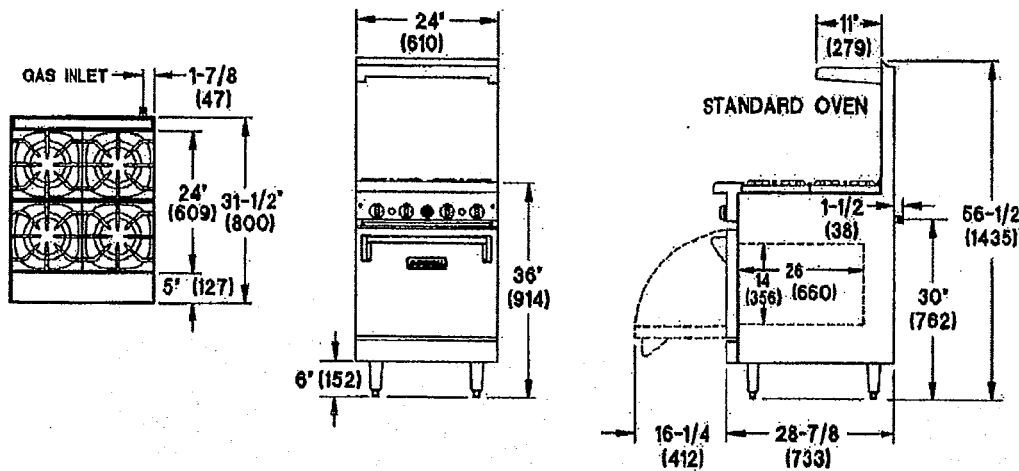
STANDARD SPACE SAVER OVEN - Linear burner provides even heating throughout the 27,000 BTU/hr (8 KW) oven. 100% safety pilot.

- Unique burner baffle distributes heat flow to provide even temperatures throughout the oven cavity.
- Exclusive heat deflector reflects heat into the oven, not the floor.
- Interior is 20" w x 26" d x 14" h (508 w x 660 d x 356 h mm). Accommodates standard size sheet pans.
- Porcelainized sides, rear, deck and door lining for easy cleaning. Heavy duty door hinge.
- Stamped inner door liner provides extra strength while optimizing heat retention.
- One chrome oven rack is included.





IMPERIAL®



24" RESTAURANT RANGES

MODEL	GAS OUTPUT BTU	(KW)	BURNERS	GRIDDLE WIDTH	SHIP WEIGHT (KW)	LBS
IR-4	155,000	(45)	4	N/A	(210)	465
IR-4-XB	128,000	(38)	4	N/A	(183)	405
IR-2-G12	111,000	(33)	2	12" (305 mm)	(213)	470
IR-2-G12-XB	84,000	(25)	2	12" (305 mm)	(185)	410
IR-G24	67,000	(20)	N/A	24" (610 mm)	(224)	495
IR-G24-XB	40,000	(12)	N/A	24" (610 mm)	(196)	435

Measurements in () are metric equivalents.

NOTES

- "XB" specifies Cabinet Base
- "G" specifies Griddle Top, griddle on left is standard

EXTERIOR

- Stainless steel front, sides, backguard, shelf, landing ledge and kick plate
- Welded and polished stainless steel seams
- Large 5" (127 mm) stainless steel landing ledge
- Control knobs are durable cast aluminum with a vylox heat protection grip
- Full width, removable crumb tray under open burners for easy cleaning
- 6" (152 mm) heavy duty legs with adjustable feet
- One year parts and labor warranty

DIMENSIONS

24" w x 31-1/2" d x 56-1/2" h
(610 x 800 x 1435 mm)

MANIFOLD PRESSURE

NATURAL GAS 5.0" W.C. PROPANE GAS 10.0" W.C.

Specify elevation, if over 2,000 ft.

CLEARANCE REQUIREMENTS

For use only on non-combustible floors. Legs or casters are required for non-combustible floors; or 2" (51 mm) overhang is required when curb mounted. Provide 0" clearance from non-combustible surfaces and 8" (203 mm) from combustible surfaces.

OPTIONS AND ACCESSORIES

- Reinforcement channels for mounting cheesemelter/salamander
- 6" and 11" (152 and 279 mm) stainless steel backguards
- 10" (254 mm) stainless steel wok ring
- Saute burner head, interchangeable
- Wok burner head, interchangeable
- Extra oven racks
- Thermostatic griddle control
- Grooved griddle plate
- Chrome griddle plate
- Griddle safety valve
- Gas shut off valve 3/4" (19 mm)
- Quick disconnect and flexible gas hose
- 6" (152 mm) casters



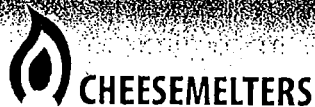
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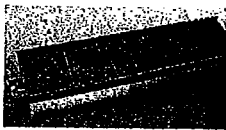
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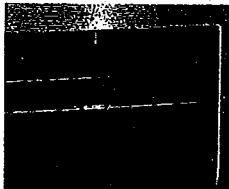
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Model Numbers

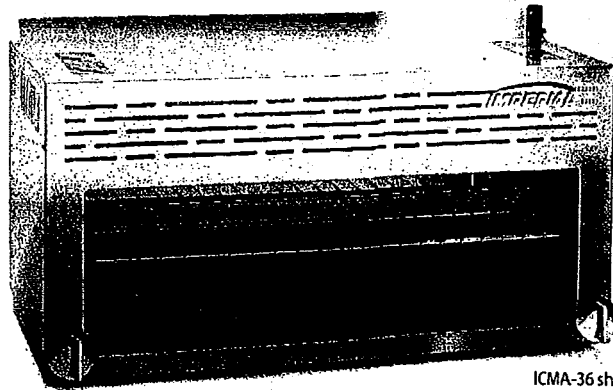
ICMA-24	ICMA-36
ICMA-48	ICMA-60
ICMA-72	ICMA-84



Infra-red burner provides instant, even heating.



Chrome plated heavy duty rack.



ICMA-36 shown

INFRA-RED BURNERS - Provides instant even heat.

- 20,000 BTU (6 KW) ICMA-24 model.
- 40,000 BTU (12 KW) ICMA-36 model.
- 40,000 BTU (12 KW) ICMA-48 model.
- 60,000 BTU (17 KW) ICMA-60 model.
- 70,000 BTU (21 KW) ICMA-72 model.
- 80,000 BTU (23 KW) ICMA-84 model.
- Protective screen over infra-red burner for splatter protection.
- Individual left / right gas controls (except on ICMA-24) model.
- Adjustable gas valve.
- Continuous pilot for instant ignition.

BROILER GRID - Chrome plated heavy duty rack.

- Loads and unloads easily.
- Full width, large capacity for high production in peak hours.
- Rack easily lifts out for cleaning.

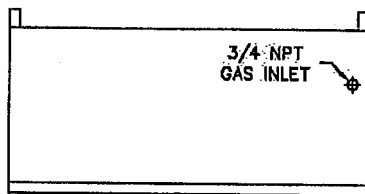
EXTERIOR FEATURES - Stainless steel front, sides, top and bottom.

- Mounts over IR and IHR ranges, with mounting accessory.
- Can be wall or counter mounted.
- Welded and polished stainless steel seams.
- Control knobs are durable cast aluminum with a chrome finish.
- Available in 24", 36", 48", 60", 72" and 84" (610, 914, 1219, 1524, 1829, 2134 mm) widths.
- One year parts and labor warranty.

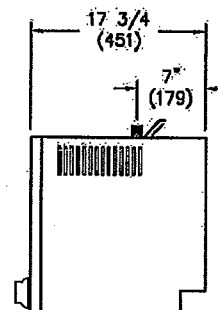
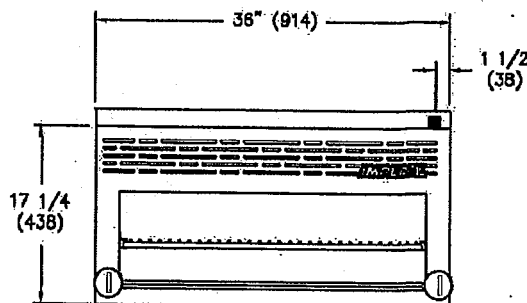




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ICMA-36



RANGE MATCH CHEESEMELTER BROILERS

MODEL	WIDTH INCHES (MM)	DEPTH INCHES (MM)	NET WEIGHT LBS
ICMA-24	24" (610)	20,000 (6 KW)	(48) 105
ICMA-36	36" (914)	40,000 (12 KW)	(75) 162
ICMA-48	48" (1219)	40,000 (12 KW)	(95) 208
ICMA-60	60" (1524)	60,000 (17 KW)	(125) 275
ICMA-72	72" (1829)	70,000 (21 KW)	(152) 335
ICMA-84	84" (2134)	80,000 (23 KW)	(184) 405

Measurements in () are metric equivalents.

MODEL	DIMENSIONS	CRATED DIMENSIONS
ICMA-24	24" w x 17-3/4" d x 17-1/4" h (610 x 451 x 438 mm)	26" w x 20" d x 21" h (660 x 508 x 533 mm)
ICMA-36	36" w x 17-3/4" d x 17-1/4" h (914 x 451 x 438 mm)	38" w x 20" d x 21" h (965 x 508 x 533 mm)
ICMA-48	48" w x 17-3/4" d x 17-1/4" h (1219 x 451 x 438 mm)	50" w x 20" d x 21" h (1270 x 508 x 533 mm)
ICMA-60	60" w x 17-3/4" d x 17-1/4" h (1524 x 451 x 438 mm)	62" w x 20" d x 21" h (1575 x 508 x 533 mm)
ICMA-72	72" w x 17-3/4" d x 17-1/4" h (1829 x 451 x 438 mm)	74" w x 20" d x 21" h (1880 x 508 x 533 mm)
ICMA-84	84" w x 17-3/4" d x 17-1/4" h (2134 x 451 x 438 mm)	86" w x 20" d x 21" h (2184 x 508 x 533 mm)

MANIFOLD PRESSURE	MANIFOLD
NATURAL GAS	PROPANE GAS
5.0" W.C.	10.0" W.C.
	3/4"

Specify elevation, if over 2,000 ft.

CLEARANCE REQUIREMENTS

For use only on non-combustible surfaces. Legs are required for counter top installation. Provide 0" clearance from non-combustible surfaces and 4" (102 mm) from combustible surfaces.

OPTIONS AND ACCESSORIES

- Wall mounting kits
- 4" (102 mm) leg kit for counter mounting
- Reinforcement channels for range mount
- One point 3/4" (19 mm) gas connection from ICMA to IIR or IHR range
- Gas shut off valve, 3/4" N.P.T.
- Quick disconnect and flexible gas hose, 3/4" N.P.T.



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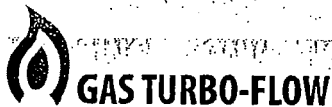
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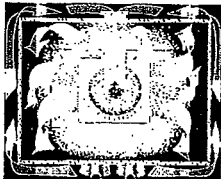
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Model Numbers

ICV-1

ICVD-1

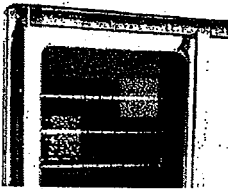
ICVCG-1



Turbo-Flow System provides even temperatures throughout the oven cavity.



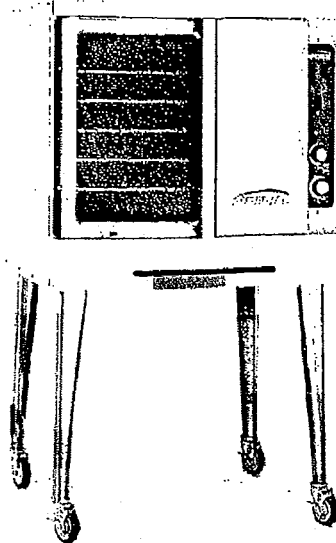
Oven interior is porcelainized for easy cleaning.



Door handle is secured to an internal stainless steel chassis system, not the door finish.



Four bearings per door extend the life of the door mechanism.



ICV-1 shown with optional casters

TURBO-FLOW SYSTEM - This system assures even cooking throughout the entire oven.

- Cooked or baked products have less shrinkage, more moisture and taste better.
- Creates an air flow pattern that simultaneously heats the inner and outer surfaces of the oven cavity.
- Recirculates hot air to maximize efficiency for energy savings.
- Fast temperature recovery.
- 2-speed 1/2 hp fan motor for high production cooking and delicate baking.
- 2-speed oven cool down feature.
- Standard depth 70,000 BTU (21 KW), Bakery depth 80,000 BTU (23 KW).

EXTREME DUTY DOOR SYSTEM - Standard and Bakery depth oven sizes available.

- Porcelainized oven interior for easy cleaning and provides better browning.
- 2 interior oven lights are controlled by a momentary switch outside the oven.
- 10 rack positions for maximum versatility.
- 5 oven racks included.

EXTREME DUTY DOOR SYSTEM - Extends the life of the door mechanism and eliminates side-to-side shaft movement.

- Double bearings on the top and bottom of each door, four bearings per door.
- Improved door pressure locking.
- Door chassis is fortified to withstand constant opening and closing.
- Handle is secured to an internal stainless steel chassis system, not the external door finish.

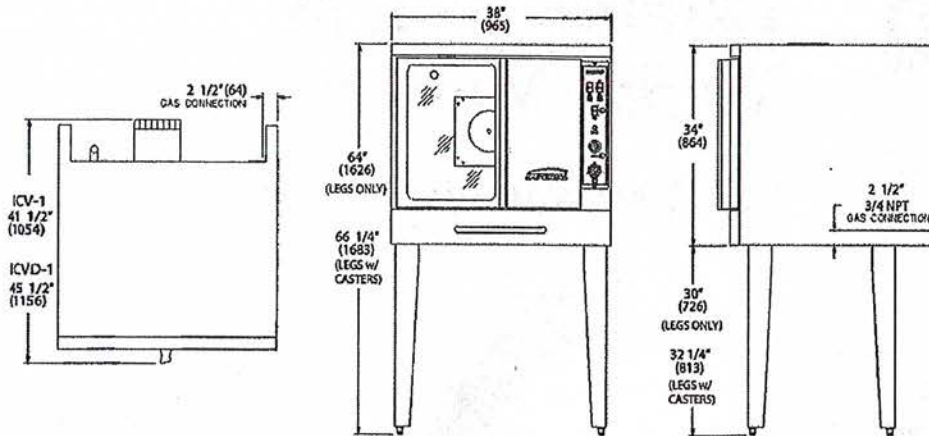
DUAL OPEN DOORS - One hand opens and closes both doors simultaneously.

- 60/40 doors open to 130° for complete interior access.
- Large window for viewing product at a glance.





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GAS SINGLE DECK CONVECTION OVENS

MODEL	DESCRIPTION	GAS OUTPUT BTU	(KW)	SHIP WEIGHT (KG)	LB
ICV-1	Single Deck, Standard depth	70,000	(21)	(236)	521
ICVD-1	Single Deck, Bakery depth	80,000	(23)	(277)	611
ICVCG-1	Single Deck, Standard depth Catering Style	70,000	(21)	(254)	561
ICVDCG-1	Single Deck, Bakery depth Catering Style	80,000	(23)	(295)	651

Measurements in () are metric equivalents.

NOTES

- "D" specifies Bakery Depth
- "CG" specifies Catering Package
- "H" specifies Cook and Hold computer controls for (1) Oven

MODEL	DIMENSIONS	SHIPPING DIMENSIONS
ICV-1	38" w x 41-1/2" d x 64" h (965 x 1054 x 1526 mm)	40" x 47-1/2" x 38-1/2" (1016 x 1206 x 978 mm)
ICVD-1	38" w x 45-1/2" d x 64" h (965 x 1156 x 1526 mm)	40" x 51-1/2" x 38-1/2" (1016 x 1308 x 978 mm)
ICVCG-1	38" w x 41-1/2" d x 64" h (965 x 1054 x 1526 mm)	40" x 47-1/2" x 38-1/2" (1016 x 1206 x 978 mm)
ICVDCG-1	38" w x 45-1/2" d x 64" h (965 x 1156 x 1526 mm)	40" x 51-1/2" x 38-1/2" (1016 x 1308 x 978 mm)

EXTERIOR

- Stainless steel exterior, except back. Reflects a quality, professional look for exhibition cooking
- Welded and finished seams
- Stainless steel legs
- Easy to clean and maintain
- One year parts and labor warranty



Manual Controls

- Manual controls are standard
- Independent time and temperature controls provide maximum versatility for general baking and roasting
- 2-speed fan switch controls bake or roast

Thermostatic oven control

- Snap Action temperature control 150° F to 550° F. (66° C to 260° C)

On-Off switch Timer

- 60 minute manual timer
- Audible buzzer lets you know when the cooking cycle is complete

Programmable Controls available as an option

MANIFOLD TYPE	MANIFOLD SIZE
NATURAL GAS	3/4"
PROPANE GAS	3/4"

Specify elevation, if over 2,000 ft.

ELECTRICAL REQUIREMENT

VOLTS	PHASE	HERTZ	AMPS MAX.
120V	1	60/50	9 amps

6ft. (1829 mm) power cord with 3 prong plug provided

CLEARANCE REQUIREMENTS

For use only on non-combustible floors with legs or casters; or 2 1/4" (57 mm) overhang is required when curb mounted. 0" clearance from non-combustible side and rear walls. Provide 6" (152 mm) minimum clearance from combustible side walls and 0" from combustible wall at rear.

OPTIONS AND ACCESSORIES

- Cook and Hold computer controls
- Stainless steel back enclosure
- Direct connect vent
- Heavy duty casters, set of 4
- Stack kit with 6" (152) stainless steel legs
- One point gas connection for double stack ovens
- Stainless steel solid doors
- Stainless steel bottom shelf and adjustable rack supports
- Stainless steel bottom shelf only for stand
- Extra oven racks
- 480 Volt



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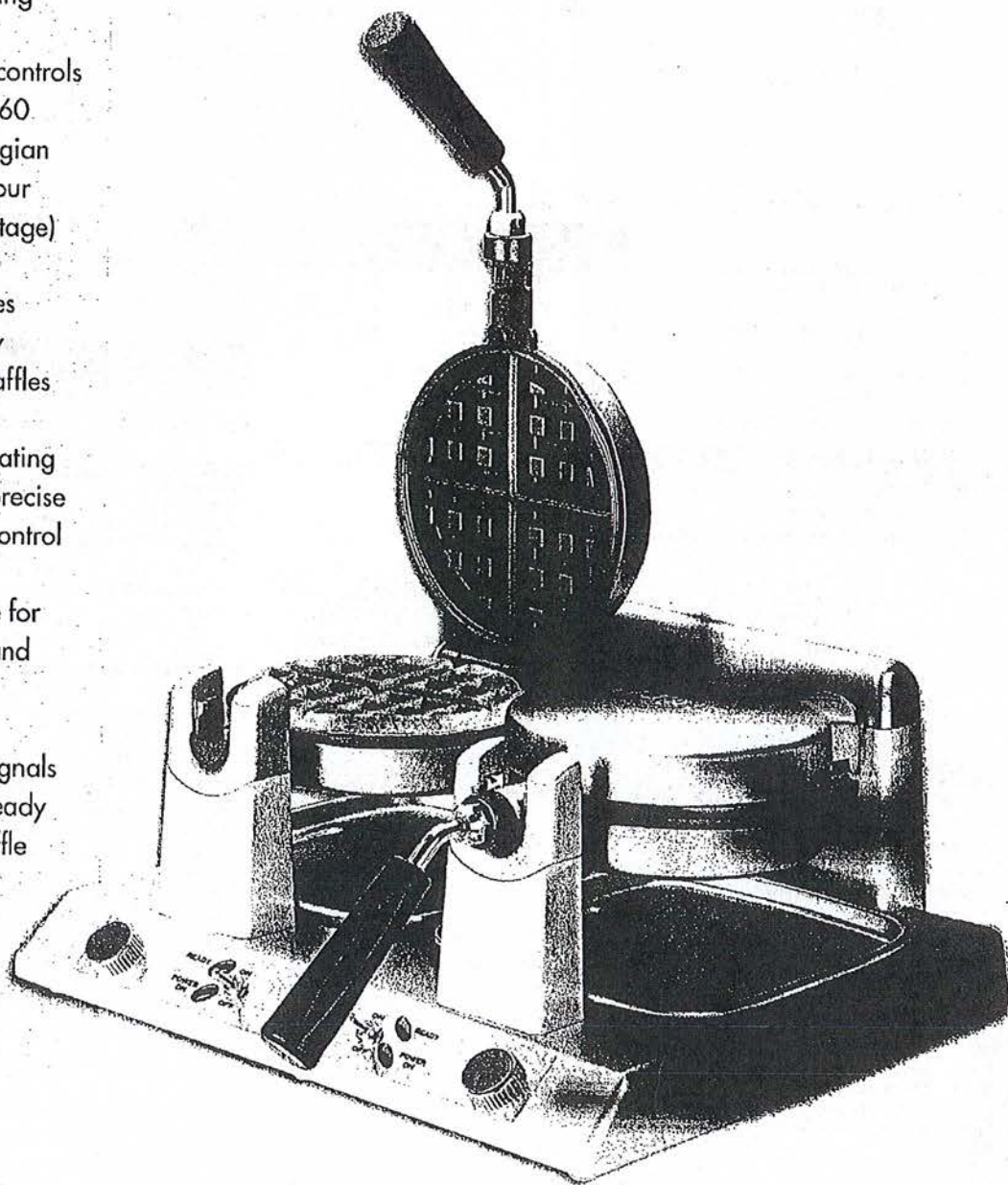
WARING® COMMERCIAL WAFFLE MAKER**WARING
COMMERCIAL**

Double Belgian Waffle Makers

WW250/WW250B

Features

- Heavy-duty die-cast housing
- Independent controls deliver 50 to 60 1¼"-thick Belgian waffles per hour (based on voltage)
- Nonstick plates allow for easy removal of waffles
- Embedded heating elements for precise temperature control
- Rotary feature for even baking and browning
- Audio beep signals when unit is ready and when waffle is cooked
- Power and ready-to-bake LED indicators



WARING
COMMERCIAL

Commercial Double Belgian Waffle Makers

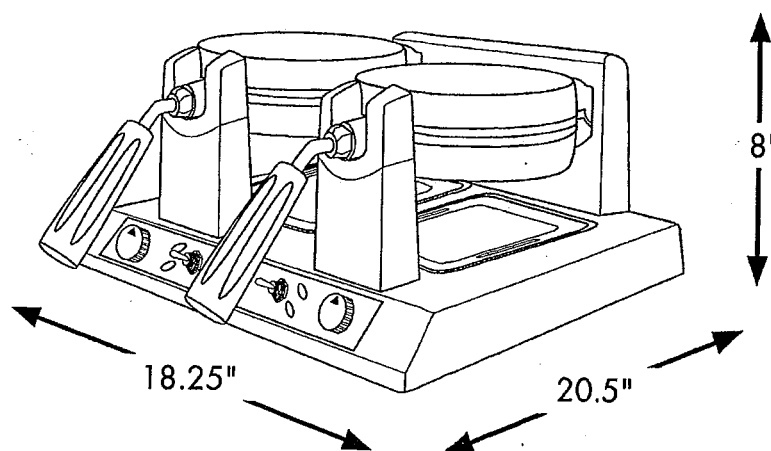

WW250/WW250B

Specifications

Item	Electrical	Listings	Dimensions (H" x W" x D")	Warranty
WW250	120 Volt	UL, CUL, NSF	8" x 18.25" x 20.5"	Limited One Year
WW250B	208 Volt	UL, CUL, NSF	8" x 18.25" x 20.5"	Limited One Year

Ordering Information

Description	Catalog #	Std Pkg.	Ship Wt. (lbs.)	Cubic Feet	UPC Code
Commercial Double Belgian Waffle Maker - 120V	WW250	1	32.2	2.8	040072008320
Commercial Double Belgian Waffle Maker - 208V	WW250B	1	32.2	2.8	040072008344



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Commercial Double Belgian Waffle Makers

WW250/WW250B

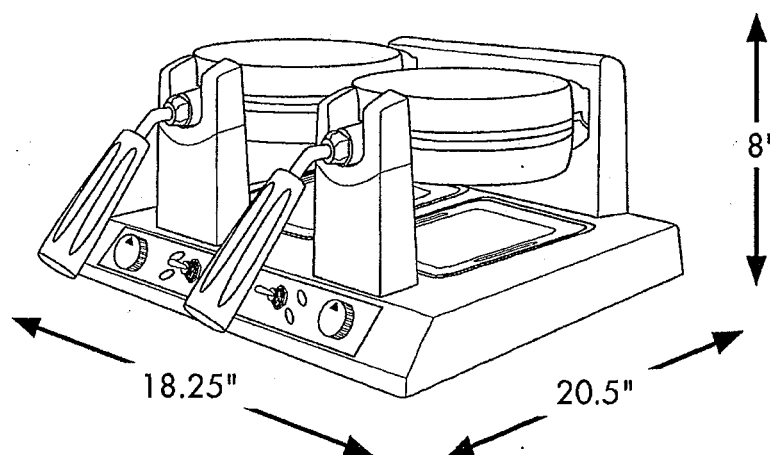


Specifications

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Ordering Information

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Commercial Double Belgian Waffle Maker - 208V	WW250B	1	32.2	2.8	040072008344



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Model Specified _____

Store# _____

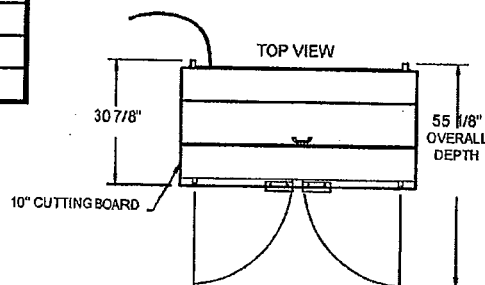
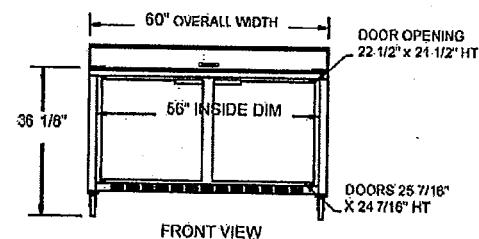
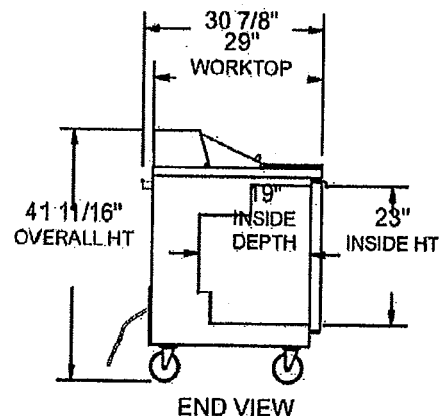
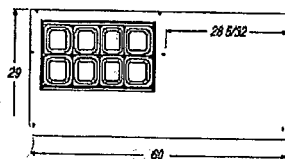
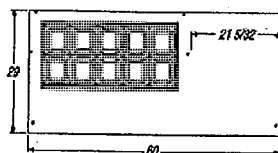
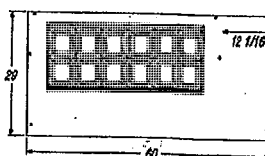
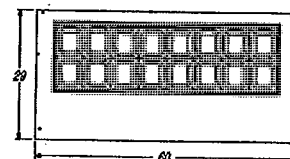
Location _____

Quantity _____

**BEVERAGE-AIR****Food Preparation Table — Standard Top**

Models: SPE60-08, SPE60-10, SPE60-12, SPE60-16

MODEL	SPE60-08	SPE60-10	SPE60-12	SPE60-16
EXTERNAL DIMENSIONAL DATA				
Length Overall (inches)	60"	60"	60"	60"
Length Overall (mm)	1524	1524	1524	1524
Depth Overall (inches)	29 1/4"	29 1/4"	29 1/4"	29 1/4"
Depth Overall (mm)	743	743	743	743
Height Overall— (inches)	41 11/16"	41 11/16"	41 11/16"	41 11/16"
Height Overall— (mm)	1059	1059	1059	1059
Number of doors	2	2	2	2
Depth with Door Open 90°	54"	54"	54"	54"
Clear Door Opening (inches)	22 1/2" x 21 1/2"	22 1/2" x 21 1/2"	22 1/2" x 21 1/2"	22 1/2" x 21 1/2"
INTERNAL DIMENSIONAL DATA				
NET Capacity (cubic ft.)	17.1	17.1	17.1	17.1
NET Capacity (Liters)	484	484	484	484
Internal Length Overall (inches)	56"	56"	56"	56"
Internal Length Overall (mm)	1422	1422	1422	1422
Internal Depth Overall (inches)	19"	19"	19"	19"
Internal Depth Overall (mm)	483	483	483	483
Internal Height Overall—(inches)	23"	23"	23"	23"
Internal Height Overall—(mm)	584	584	584	584
Number of shelves	4	4	4	4
ELECTRICAL DATA				
Full Load Amperes 115/60/1	9.6	9.6	9.6	9.6
ENERGY CONSUMPTION (KWH)				
	4.4	4.4	4.4	4.4
REFRIGERATION DATA				
Horsepower	1/3	1/3	1/3	1/3
WEIGHT DATA				
Gross Weight (Crated lbs)	357	363	367	383
Gross Weight (Crated kg)	162	165	167	174

PLAN VIEWS**SPE60-08
TOP VIEW****SPE60-10
TOP VIEW****SPE60-12
TOP VIEW****SPE60-16
TOP VIEW****BEVERAGE-AIR® CORPORATION**

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Specifications are subject to change without prior notice 06/13

Smitty's Wings - Equipment

Cheney Brothers

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BEVERAGE-AIR

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CUSTOMER'S CHOICE FOR A HOT KITCHEN
Tested & Certified to Ambient Class of 100°F

3 Year Parts/Labor Warranty Additional 2 Year Compressor Warranty

WTR SERIES WORKTOP UNITS

Versatile, compact (29" deep) models with stainless steel work tops and refrigerated storage of food products. Working height is 35 1/2."

CABINET CONSTRUCTION

Heavy duty construction includes stainless steel on front, sides, door(s) and grille. Stainless steel 2 1/2" thick worktop with 4" high removable backsplash. Cabinet back and bottom are galvanized steel. Interior liner is made of aluminum for longer lasting corrosion protection. Interior thermometer is standard.

Cabinets are insulated with foamed-in-place polyurethane insulation of 2" minimum thickness. Doors are mounted to cabinet on self-closing, cartridge style hinges with 120° stay open feature. A plug-in type vinyl magnetic gasket is attached to each door for positive seal. Convenient, contoured, pull handle is made of black anodized aluminum. Interior arrangement includes 2 steel wire epoxy coated shelves behind each door, adjustable in 1/2 inch increments. Interior light with manual switch is provided with glass door models.

REFRIGERATION

Refrigeration system utilizes R134a refrigerant metered by a capillary tube system. Automatic (non-electric) condensate evaporator is standard. Interior forced air system, with high humidity evaporator coils, provides the ideal environment for food preservation.

ELECTRICAL

Units wired at factory and ready for connection to a 115/60/1 phase, 15 amp dedicated outlet. 8' long cord and plug set included.

SPECIAL FEATURES

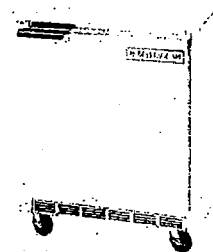
- WTR27A has earned the ENERGY STAR®.
- Cartridge style door hinges provides positive seal & eliminates door sagging issues (excludes glass door and some special units).
- 6" casters, two with brakes standard.
- Optional 6" legs or 3" casters available

***Note:** Overall heights of casters may vary with different types of casters depending upon caster manufacturer designations.

Item No. _____
Quantity _____

WORK TOP REFRIGERATORS 29" BASE MODEL SERIES

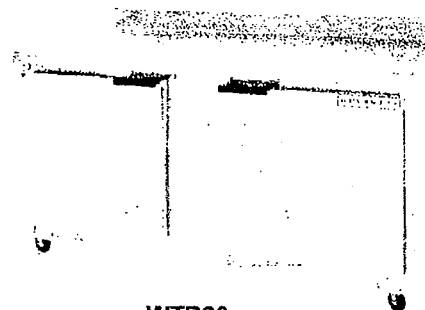
MODELS:
WTR27A
WTR48A
WTR60A
WTR72A



WTR27



WTR48



WTR60

ELECTRICAL CONNECTION



115/60/1
NEMA-5-15P

Units pre-wired at
factory and include 8'
long cord and plug



***Note:** Not all markings may apply to all model variations.

Available From:

Model Specified _____

Store# _____

Location _____

Quantity _____

**BEVERAGE-AIR**

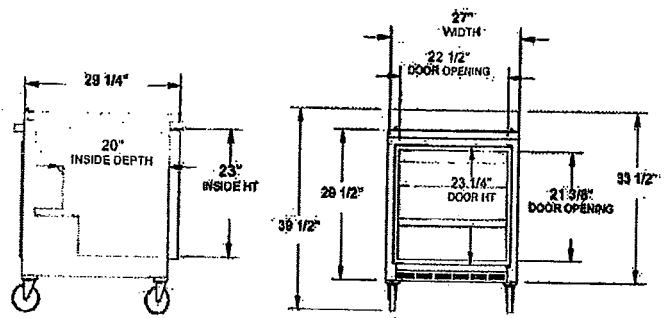
Standard Worktop Refrigerator Cabinets

Models: WTR27A, WTR48A, WTR60A, WTR72A

MODEL	WTR27A	WTR48A	WTR60A	WTR72A
EXTERNAL DIMENSIONAL DATA				
Length Overall (inches)	27"	48"	60"	72"
Length Overall (mm)	686	1219	1524	1829
Depth Overall (inches) - Less handle	29 1/4"	29 1/4"	29 1/4"	29 1/4"
Depth Overall (mm) - Less handle	743	743	743	743
Height Overall—on 6" casters (inches)*	39 1/2"	39 1/2"	39 1/2"	39 1/2"
Height Overall—on 6" casters (mm)*	1003	1003	1003	1003
Depth with Door Open 90°	55 1/4"	52 1/4"	53 13/16"	52 1/8"
Clear Door Opening (inches)	22 1/2" x 23 1/4"	19 1/2" x 21 1/2"	22 1/2" x 21 3/8"	19 1/2" x 21 1/2"
Number of doors	1	2	2	3
INTERNAL DIMENSIONAL DATA				
NET Capacity (cubic ft.)	7.3	13.9	17.1	21.5
NET Capacity (Liters)	207	394	484	609
Internal Length Overall (inches)	23"	44"	56"	68"
Internal Length Overall (mm)	584	1118	1422	1727
Internal Depth Overall (inches)	20"	20"	24 7/8"	19 3/4"
Internal Depth Overall (mm)	508	508	632	502
Internal Height Overall (inches)	23"	23"	23"	22 3/4"
Internal Height Overall (mm)	584	584	584	578
Number of shelves	2	4	4	6
ELECTRICAL DATA				
Full Load Amperes 115/60/1	4.0	3.3	8.2	8.2
ENERGY CONSUMPTION (KWH)	2.88	2.37	3.76	3.38
REFRIGERATION DATA				
Horsepower	1/6	1/5	1/4	1/4
WEIGHT DATA				
Gross Weight (Crated lbs)	161	235	265	305
Gross Weight (Crated kg)	73	107	120	138

*Note: Overall heights of casters may vary with different types of casters depending upon caster manufacturer designations.

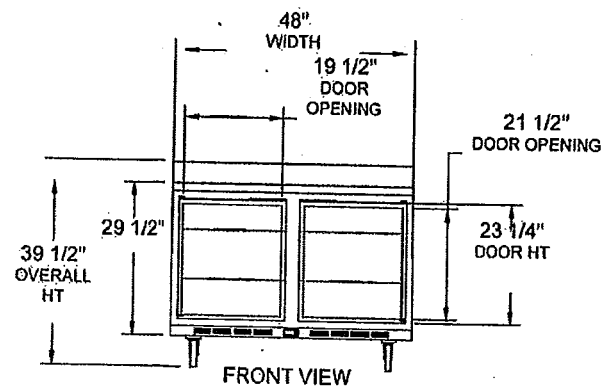
PLAN VIEWS



COMMON END

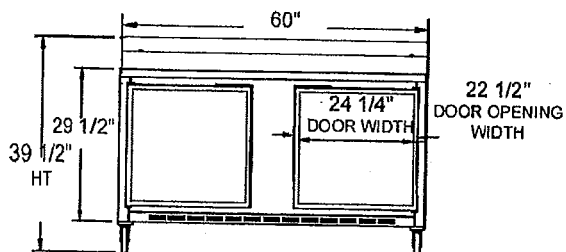
FRONT VIEW

WTR27A



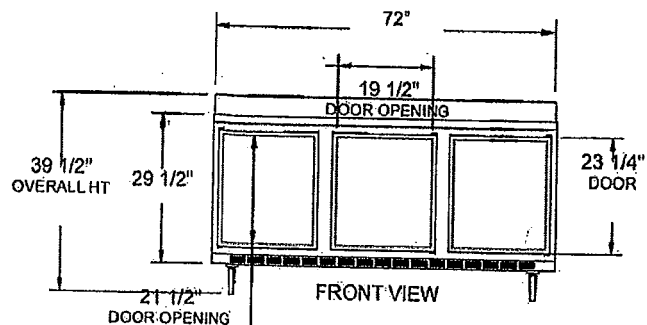
FRONT VIEW

WTR48A



FRONT VIEW

WTR60A



FRONT VIEW

WTR72A

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Smitty's Wings - Equipment

Cheney Brothers



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3 Year Parts/Labor Warranty Additional 2 Year Compressor Warranty

CABINET CONSTRUCTION

- Exterior—Stainless steel exterior front and gray painted sides standard (Additional exterior finish options available—see right).
- Interior—Aluminum interior with coved corners standard.
- Insulation—2" foamed-in-place CFC and HCFC-free polyurethane insulation.

ELECTRONIC CONTROL

- Electronic thermostat with manual defrost button provides a digital display of cabinet temperatures, which includes status indicators and key pad for any necessary temperature adjustments.

REFRIGERATION SYSTEM

- Top mount balanced refrigeration system with evaporator positioned out of the food zone to maximize capacity.
- Automatic evaporation system for energy efficiency.
- Expansion Valve technology.
- Unique down draft airflow system ensures uniform distribution of airflow throughout the entire cabinet to ensure even product temperatures; maintains product temperatures at or near -10°F.
- Factory engineered, self-contained refrigeration system uses environmentally friendly (CFC and HCFC-free) R404A refrigerant.
- Automatic defrost system is fully automatic, time-initiated and temperature terminated operation.

DOORS

- Choose from solid door or half-solid door configuration.
- Anti-microbial door handles and door locks are standard.
- Field reversible doors and cam lift hinges standard. Positive seal self-closing door(s) with 120° stay open feature.
- Plug-in magnetic door gaskets of one piece construction, removable without tools for ease of cleaning.

SHELVING

- Three (3) heavy duty epoxy coated wire shelves per section standard. Four (4) shelf clips included per shelf (field installed).
- Shelves are adjustable in 1/2" increments. Four (4) interior pan slide kits available for field installation (see catalog).

MODEL FEATURES

- Incandescent interior light.
- 6" heavy-duty casters included, two with brakes. HFPS Spec Series standard with 6" legs.
- Cord and plug pre-wired - 115/60/1 phase.
- Freezers powered by 115/208-230 volts are designed for field wiring (requires 4-wire electrical circuit, hard-wired).
- Epoxy coated evaporator to eliminate the potential of corrosion.
- ENERGY STAR® Qualified - See applicable model list at right.
- UL-EPH and CUL for open food product.
- Certified to 100°F ambient

Item No. _____
Quantity _____

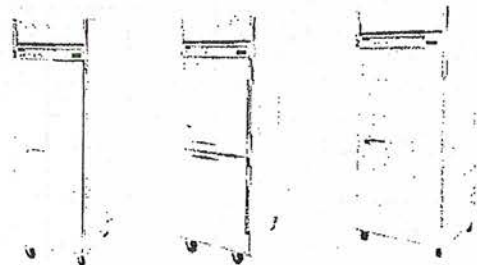
**TOP MOUNTED
REACH-IN FREEZERS**
HORIZON SERIES
SOLID & HALF-SOLID DOORS

MODELS:

HF
HFP
HFS
HFPS

1 Great Design, 4 Finish Options:

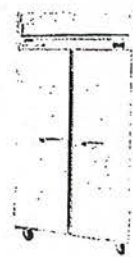
- HF Standard Series: S/S front, gray painted sides, aluminum interior
- HFP Series: S/S front, S/S sides, aluminum interior
- HFS Series: S/S front, gray painted sides, s/s interior
- HFPS Spec Series: Complete S/S exterior and interior



HF1/HFP1/
HFS1/HFPS1-1S

HF1/HFP1/
HFS1/HFPS1-1HS

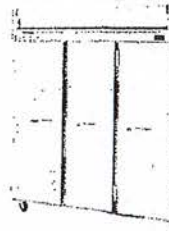
HF1WH/HFP1W/
HFS1WH/HFPS1WH-1S



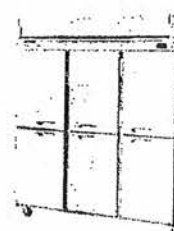
HF2/HFP2/
HFS2/HFPS2-1S



HF2/HFP2/
HFS2/HFPS2-1HS



HF3/HFP3/
HFS3/HFPS3-5S



HF3/HFP3/
HFS3/HFPS3-5HS



ENERGY STAR® Qualified Models:

Solid Door Freezers: HF1-1S, HF2-1S, HFS1-1S, HFP1-1S, HFPS1-1S

Half-Solid Door Freezers: HF1-1HS, HFS1-1HS, HFP1-1HS, HFPS1-1HS

Available From:



*Note: Not all markings may apply to all model variations.
Smittys Wings - Equipment

Cheney Brothers

Model Specified _____

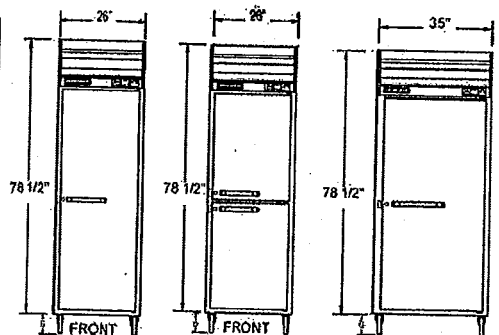
Store# _____

Location _____

Quantity _____

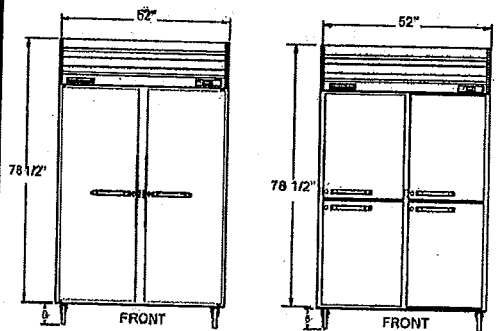
**BEVERAGE-AIR****Top Mount, Horizon Series Freezers****Models: HF, HFP, HFS, HFPS****(-S) Solid Door Models, (-HS) Half-Solid Door Models**

DOOR TYPE	HF STANDARD S/S Front, Gray Painted Sides, Aluminum Interior	HFP S/S Front, S/S Sides, Aluminum Interior	HFS S/S Front, Gray Painted Sides, S/S Interior	HFPS Complete Stainless Exterior and Interior	DOORS & SHELVES
SOLID (-S)	HF1-1S	HFP1-1S	HFS1-1S	HFPS1-1S	1 Door & 3 Shelves
	HF1W-1S	HFP1W-1S	HFS1W-1S	HFPS1W-1S	1 Door & 3 Shelves
	HF2-1S	HFP2-1S	HFS2-1S	HFPS2-1S	2 Doors & 6 Shelves
HALF-SOLID (-HS)	HF3-5S	HFP3-5S	HFS3-5S	HFPS3-5S	3 Doors & 9 Shelves
	HF1-1HS	HFP1-1HS	HFS1-1HS	HFPS1-1HS	2 Doors & 3 Shelves
	HF2-1HS	HFP2-1HS	HFS2-1HS	HFPS2-1HS	4 Doors & 6 Shelves
	HF3-5HS	HFP3-5HS	HFS3-5HS	HFPS3-5HS	6 Doors & 9 Shelves

PLAN VIEWS**COMMON FEATURES**

MODEL	HF1/HFP1/ HFS1/HFPS1 1 Section Solid/Half Solid	HF1W/HFP1W/ HFS1W/HFPS1W-1S 1 Section Solid	HF2/HFP2/ HFS2/HFPS2 2 Section Solid/Half Solid	HF3/HFP3/ HFS3/HFPS3 3 Section Solid/Half Solid
EXTERNAL DIMENSIONAL DATA				
Length Overall (inches) / (mm)	26" / 660	35" / 889	52" / 1321	78" / 1981
Depth Overall (inches) / (mm) Add 1 3/4" for handle	32" / 813	32" / 813	32" / 813	32" / 813
Height Overall— (inches) / (mm)* Add 6" for legs or casters	78 1/2" / 1994	78 1/2" / 1994	78 1/2" / 1994	78 1/2" / 1994
Depth with Door Open 90°	54"	54"	54"	54"
INTERNAL DIMENSIONAL DATA				
NET Capacity (cubic ft.) / (Liters)	24 / 680	34 / 963	49 / 1388	74 / 2098
Internal Length Overall (inches) / (mm)	22" / 559	31" / 787	48" / 1219	73 1/2" / 1867
Internal Depth Overall (inches) / (mm)	28" / 711	28" / 711	28" / 711	28" / 711
Height Overall— (inches) / (mm)	60" / 1524	60" / 1524	60" / 1524	60" / 1524
ELECTRICAL DATA				
Full Load Amperes 115/60/1	7.1	7.8	12.0	*208-230 / 8.4A
REFRIGERATION DATA				
Horsepower	1/2	1/2	3/4	1
WEIGHT DATA				
Gross Weight (Crated lbs)	360	405	532/550	873
Gross Weight (Crated kg)	163	184	241/250	396

HF1/HFP1/
HFS1/HFPS1-1S HF1/HFP1/
HFS1/HFPS1-1HS HF1W/HFP1W/
HFS1W/HFPS1W-1S



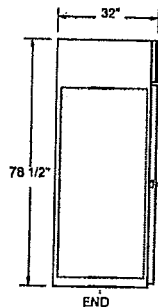
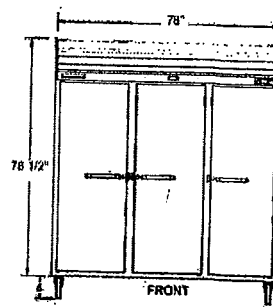
HF2/HFP2/
HFS2/HFPS2-1S

HF2/HFP2/
HFS2/HFPS2-1HS

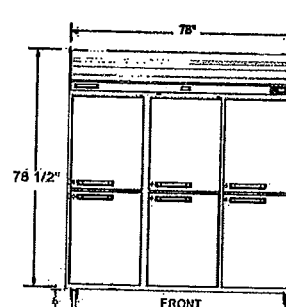
For total depth add 1 3/4" for handle. For total height add 3" (casters only) or 6" (casters/legs.)

*Note: Some refrigeration components may protrude beyond cabinet height by up to 1 1/2" - in some models.

*Note: Freezers powered by 115/208-230 volts are designed for field wiring (requires 4-wire electrical circuit, hard-wired).

**COMMON END**

HF3/HFP3/
HFS3/HFPS3-5S



HF3/HFP3/
HFS3/HFPS3-5HS

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CABINET CONSTRUCTION

- Exterior—Stainless steel exterior front and gray painted sides standard (Additional exterior finish options available—see right).
- Interior—Aluminum interior with coved corners standard.
- Insulation—2" foamed-in-place CFC and HCFC-free polyurethane insulation.

ELECTRONIC CONTROL

- Electronic thermostat provides a digital display of cabinet temperatures, which includes status indicators and key pad for any necessary temperature adjustments.

REFRIGERATION SYSTEM

- Top mount balanced refrigeration system with evaporator positioned out of the food zone to maximize capacity.
- Automatic evaporation system for energy efficiency.
- Unique down draft airflow system ensures uniform distribution of airflow throughout the entire cabinet to ensure even product temperatures; maintains product temperatures between 36 - 38°F.
- Factory engineered, self-contained refrigeration system uses environmentally friendly (CFC and HCFC-free) R134A refrigerant.

DOORS

- Choose from solid door or half-solid door configuration.
- Anti-microbial door handles and door locks are standard.
- Field reversible doors and cam lift hinges standard. Positive seal self-closing door(s) with 120° stay open feature.
- Plug-in magnetic door gaskets of one piece construction, removable without tools for ease of cleaning.

SHELVING

- Three (3) heavy duty epoxy coated wire shelves per section standard. Four (4) shelf clips included per shelf (field installed).
- Shelves are adjustable in 1/2" increments. Four (4) interior pan slide kits available for field installation (see catalog).

MODEL FEATURES

- Recessed incandescent interior lighting.
- HR1 features a recessed light.
- 6" heavy-duty casters included, two with brakes.
- Cord and plug pre-wired - 115/60/1 phase.
- Epoxy coated evaporator to eliminate the potential of corrosion.
- ENERGY STAR® Qualified - See applicable model list at right.
- UL-EPH and CUL for open food product.
- Certified to 100°F ambient

Item No. _____

Quantity _____

TOP MOUNTED REACH-IN REFRIGERATORS HORIZON SERIES SOLID & HALF-SOLID DOORS

MODELS:

HR
HRP
HRS
HRPS

1 Great Design, 4 Finish Options:

- HR Standard Series: S/S front, gray painted sides, aluminum interior
- HRP Series: S/S front, S/S sides, aluminum interior
- HRS Series: S/S front, gray painted sides, s/s interior
- HRPS Spec Series: Complete S/S exterior and interior



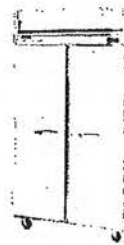
HR1/HRP1/
HRS1/HRPS1-1S



HR1/HRP1/
HRS1/HRPS1-1HS



HR1W/HRP1W/
HRS1W/HRPS1W-1S



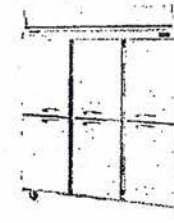
HR2/HRP2/
HRS2/HRPS2-1S



HR2/HRP2/
HRS2/HRPS2-1HS



HR3/HRP3/
HRS3/HRPS3-1S



HR3/HRP3/
HRS3/HRPS3-1HS



ENERGY STAR® Qualified Models:
Solid Door Refrigerators: HR1W-1S, HR2-1S, HR3-1S
Half-Solid Door Refrigerators: HR2-1HS



*Note: Not all markings may apply to all model variations.

Available From:

Model Specified _____

Store# _____

Location _____

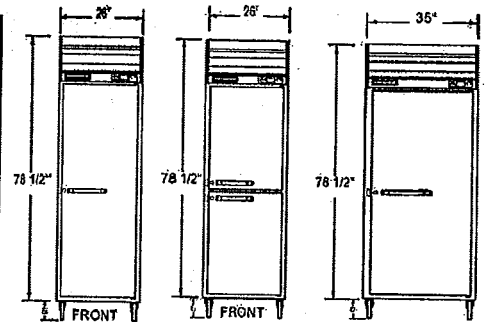
Quantity _____

**BEVERAGE-AIR****Top Mount, Horizon Series Refrigerators**

Models: HR, HRP, HRS, HRPS

(-S) Solid Door Models, (-HS) Half-Solid Door Models

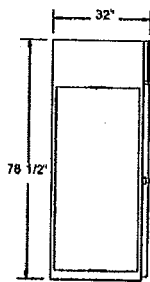
DOOR TYPE	HR STANDARD S/S Front, Gray Painted Sides, Aluminum Interior	HRP S/S Front, S/S Sides, Aluminum Interior	HRS S/S Front, Gray Painted Sides, S/S Interior	HRPS Complete Stainless Exterior and Interior	DOORS & SHELVES
SOLID (-S)	HR1-1S	HRP1-1S	HRS1-1S	HRPS1-1S	1 Door & 3 Shelves
	HR1W-1S	HRP1W-1S	HRS1W-1S	HRPS1W-1S	1 Door & 3 Shelves
	HR2-1S	HRP2-1S	HRS2-1S	HRPS2-1S	2 Doors & 6 Shelves
	HR3-1S	HRP3-1S	HRS3-1S	HRPS3-1S	3 Doors & 9 Shelves
HALF-SOLID (-HS)	HR1-1HS	HRP1-1HS	HRS1-1HS	HRPS1-1HS	2 Doors & 3 Shelves
	HR2-1HS	HRP2-1HS	HRS2-1HS	HRPS2-1HS	4 Doors & 6 Shelves
	HR3-1HS	HRP3-1HS	HRS3-1HS	HRPS3-1HS	6 Doors & 9 Shelves

PLAN VIEWSHR1/HRP1/
HRPS1-1SHR1/HRP1/
HRS1/HRPS1-1HSHR1W/HRP1W/
HRS1W/HRPS1W-1S**COMMON FEATURES**

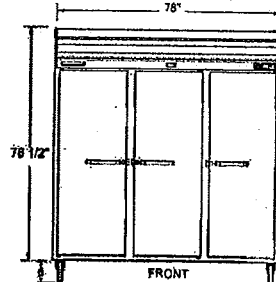
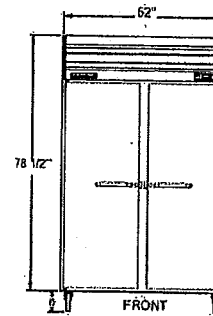
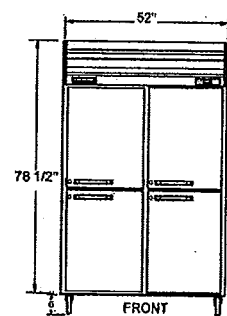
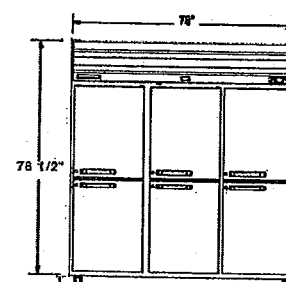
MODEL	HR1/HRP1/ HRS1/HRPS1 1 Section Solid/Half Solid	HR1W/HRP1W/ HRS1W/HRPS1W 1 Section Solid	HR2/HRP2/ HRS2/HRPS2 2 Section Solid/Half Solid	HR3/HRP3/ HRS3/HRPS3 3 Section Solid/Half Solid
EXTERNAL DIMENSIONAL DATA				
Length Overall (inches) / (mm)	26" / 660	35" / 889	52" / 1321	78" / 1981
Depth Overall (inches) / (mm) Add 1 3/4" for handle	32" / 813	32" / 813	32" / 813	32" / 813
Height Overall—(inches) / (mm)* Add 6" for legs or casters	78 1/2" / 1994	78 1/2" / 1994	78 1/2" / 1994	78 1/2" / 1994
Depth with Door Open 90°	55"	64"	55"	55"
INTERNAL DIMENSIONAL DATA				
NET Capacity (cubic ft.) / (Liters)	24 / 680	34 / 963	49 / 1388	74 / 2096
Internal Length Overall (inches) / (mm)	22" / 559	31" / 787	48" / 1219	73 1/2" / 1867
Internal Depth Overall (inches) / (mm)	28" / 711	28" / 711	28" / 711	28" / 711
Height Overall—(inches) / (mm)	60" / 1524	60" / 1524	60" / 1524	60" / 1524
ELECTRICAL DATA				
Full Load Amperes 115/60/1	5.8	5.8	8.4	10.0
REFRIGERATION DATA				
Horsepower	1/3	1/3	1/3	1/2
WEIGHT DATA				
Gross Weight (Crated lbs)	379	379	510/543	791
Gross Weight (Crated kg)	172	172	231/246	359

For total depth add 1 3/4" for handle. For total height add 3" (casters only) or 6" (casters/legs).

*Note: Some refrigeration components may protrude beyond cabinet height by up to 1 1/2" in some models.



COMMON END

HR3/HRP3/
HRS3/HRPS3-1SHR2/HRP2/
HRS2/HRPS2-1SHR2/HRP2/
HRS2/HRPS2-1HSHR3/HRP3/
HRS3/HRPS3-1HS**BEVERAGE-AIR® CORPORATION**

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Specifications are subject to change without prior notice. 02/16

Smitty's Wings - Equipment

Cheney Brothers

Page: 31

EQUIPEx

AMBIENT AND CHILLED

CONCEPT

COUNTER CHILLED DISPLAYS

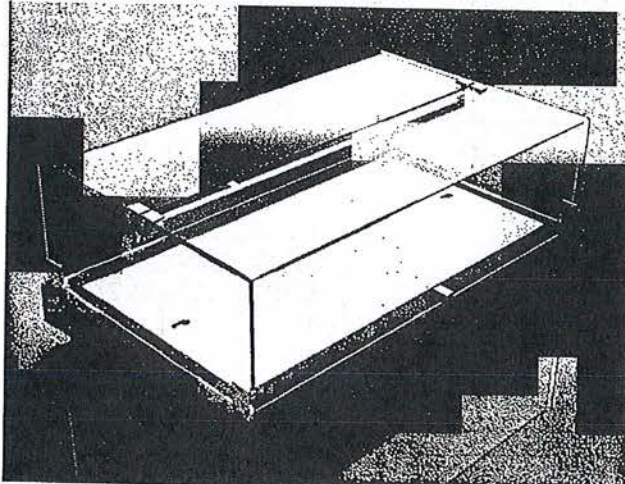
Fully panoramic displays offer versatility

FEATURES:

- ☐ Chilled counter top display
- ☐ Laminated galvanized exterior base
- ☐ Aluminum chill pack cover and interior liner
- ☐ Eutectic chill plate included - provides up to 4 hours of holding cold food
- ☐ Center mounted Plexiglas dual hinged cover with metal door pulls
- ☐ Additional chill packs available
- ☐ Ideal for meeting rooms, buffets, county fairs, dessert stations and much more

CHILLY

TE58C / TE87C



COUNTER AMBIENT DISPLAYS

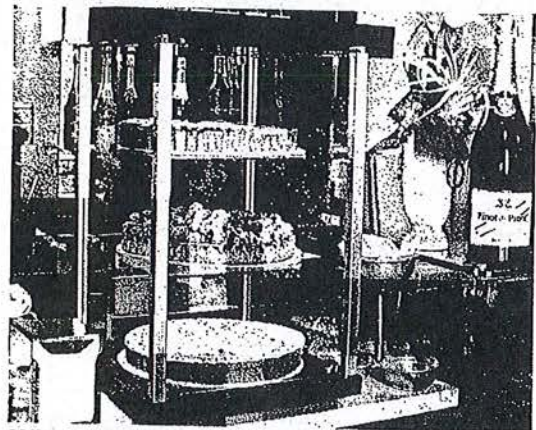
Fully panoramic displays offer versatility

FEATURES:

- ☐ Two tempered glass shelves
- ☐ MDF top on TP353; Tempered glass top on TN583
- ☐ Fully enclosed tempered glass sides and doors
- ☐ Pass through design with aluminum columns
- ☐ MDF base material laminated

AMBIENTE

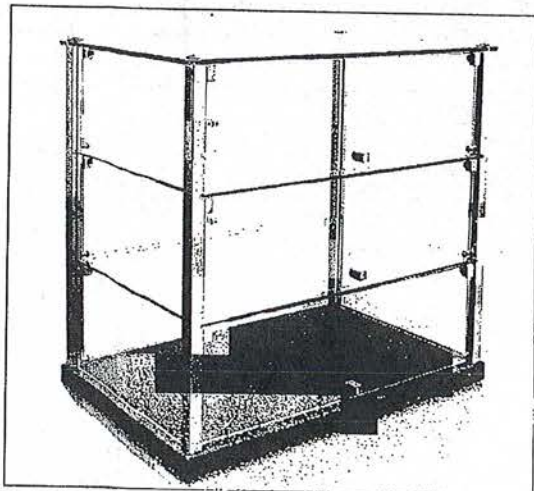
TP353



With vertical doors

ELEGANTE

TN583



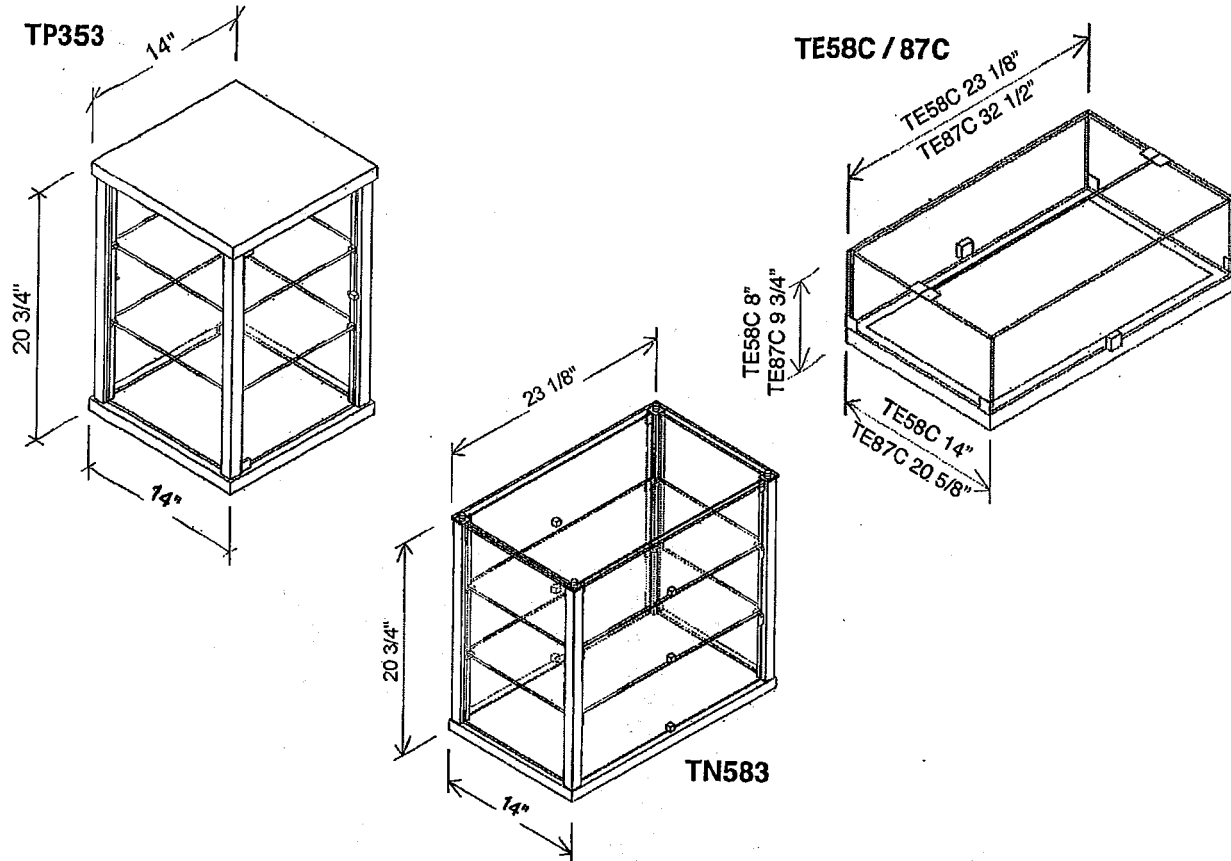
With horizontal doors

EQUIPEx

765 WESTMINSTER STREET PROVIDENCE, RI 02903
 TEL: (401) 273-3300 FAX: (401) 273-3328 E-mail: sales@equipex.com
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EQUIPEX

COUNTERTOP DISPLAYS



SPECIFICATIONS

MODEL	EXTERIOR DIMENSIONS	SHELF DIMENSIONS	SHELF SPACING	SHIPPING WEIGHT
TP353	14"W x 14"D x 20 3/4"H	12 1/4"W x 11 5/8"D	6"	45 lbs
TN583	23 1/8"W x 14"D x 20 3/4"H	18 7/8"W x 12"D	6"	50 lbs
TE58C	23 5/8"W x 14"D x 7 7/8"H	21 5/8"W x 12 1/2"D	1 chill plate	25 lbs
TE87C	34 1/4"W x 20 5/8"D x 9 3/4"H	32 1/2"W x 19 1/8"D	3 chill plates	50 lbs

WARRANTY: Limited one year parts and labor

EQUIPEX

765 WESTMINSTER STREET PROVIDENCE, RI 02903
 TEL: (401) 273-3300 FAX: (401) 273-3328 E-mail: sales@equipex.com
 www.equipex.com

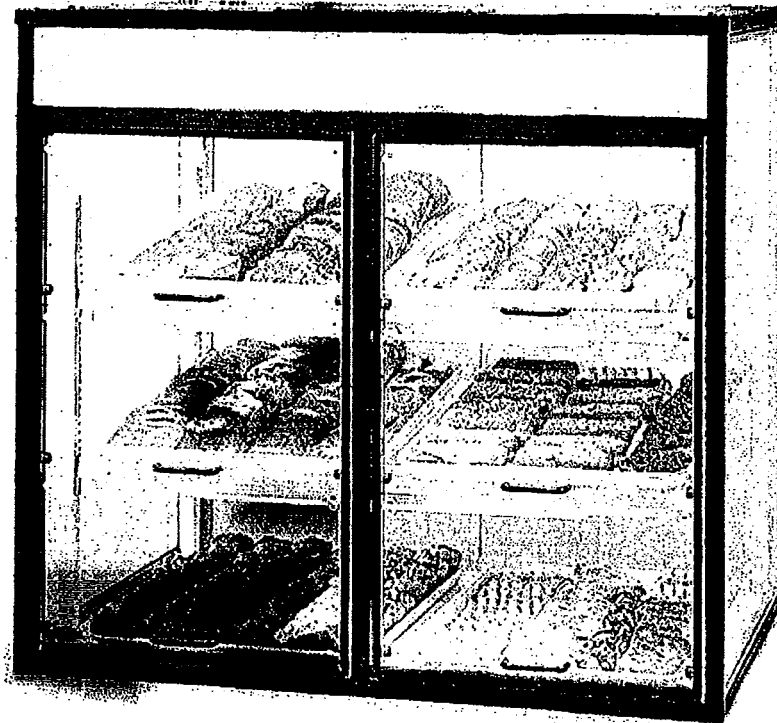


a Standex company

ITEM: _____ PROJECT NAME: _____ DATE: _____

COUNTER TOP SELF-SERVE NON-REFRIG. BAKERY DISPLAY

MODEL ☐ CT-6
☐ CT-9
☐ CT-12



*Generate increased impulse bakery sales with maximum product exposure.
Federal's self-serve bakery case is designed to fit on your counter
and is available in three different sizes.*

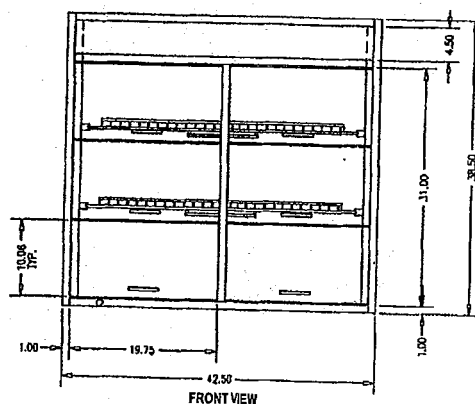
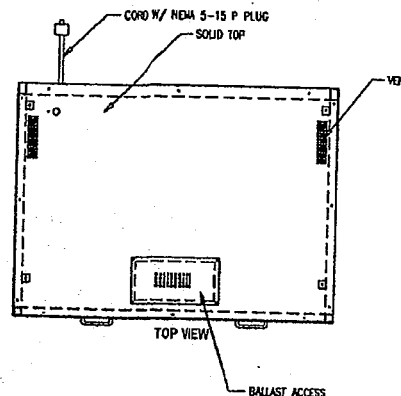
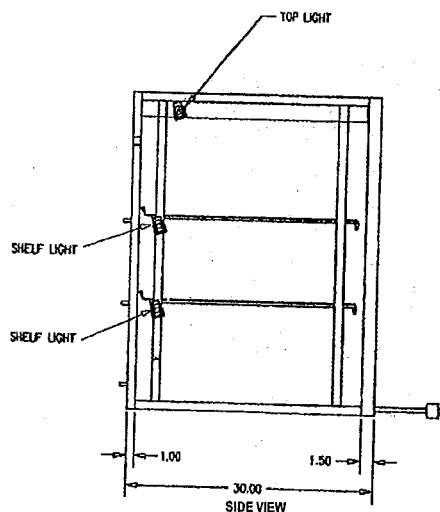
STANDARD FEATURES

- Acrylic lift-up doors for customer product access.
- Removable sliding rear doors, shelf lights, shelf supports, and shelves.
- Glass ends and rear doors.
- Adjustable white wire shelves. Shelves are adjustable up and down and can be tilted.
- Top light and shelf lights. Lights are shielded.
- All-welded steel frame construction.
- Black powder coated frame with white interior deck.
- Back light merchandising sign.
- Electronic ballast.
- Cord and plug (NEMA 5-15P).
- Toggle light switch.

COUNTER TOP SELF-SERVE NON-REFRIGERATED BAKERY DISPLAY

OPTIONAL ACCESSORIES:

- ☐ Reflective Ends
- ☐ Reflective Rear Doors
- ☐ Front Swing Doors Incorporating Acrylic Lift-up Doors



SPECIFICATIONS:

Model	Dimensions L W H	Shipping Weight (lbs)	Capacity (Bakery Pans)	Power 120/60/1
CT-6	42 1/2" x 30" x 38 1/2"	375	6 (18" x 26")	2.0 AMPS
CT-9	60 1/4" x 30" x 38 1/2"	450	9 (18" x 26")	2.0 AMPS
CT-12	80" x 30" x 38 1/2"	748	12 (18" x 26")	2.0 AMPS

- If a GFCI circuit is required, a GFCI Breaker Must be used instead of GFCI receptacle.
- Due to continuing engineering improvements, specifications are subject to change without notice.



Look to Federal for Innovative Merchandising



FEDERAL INDUSTRIES
A Standex Company

215 FEDERAL AVENUE, BELLEVILLE, WISCONSIN 53508-9201

PHONE: 800-356-4206

EMAIL: geninfo@federalind.com

FAX: 608-424-3234

WEBSITE: www.federalind.com





FEDERAL
a Standex company

ITEM: _____ PROJECT NAME: _____ DATE: _____

REFRIGERATED SELF-SERVE LOW PROFILE SPECIALTY MERCHANDISER

MODEL ☐ LPRSS3

☐ LPRSS4

☐ LPRSS5

☐ LPRSS6



Maximize your display potential with Federal's low-profile, refrigerated self-serve merchandiser. Bring product to the customer for increased sales with the reduced labor of a self-serve display case. Available in lengths of 3', 4', 5', and 6'.

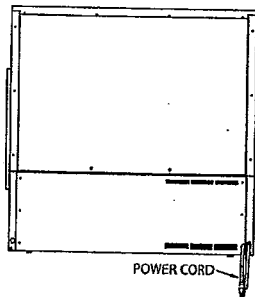
STANDARD FEATURES

- Steel base construction with choice of six standard laminates on exterior. Other finishes optional.
- Black trim.
- Two tiers adjustable solid black metal shelves.
- Stainless steel display deck and black interior ends and back panel. Glass end panels.
- Horizontal top light. Undershelf lights are optional.
- On-demand PTC condensate evaporator provided for a totally self-contained system. A condensate pump is required on the LPRSS5 and LPRSS6 and remote cases.
- Easily cleaned, rustproof, insulated evaporator coil compartment.
- Insulated with high-density foam.
- Rear access to the refrigeration system for quick easy service.
- Easily accessible light switch, power switch, and adjustable temperature control.
- Energy-saving night curtain.
- Electronic temperature control maintains 38° to 40°F.
- R404 Refrigerant.
- Thermometer provided.
- Adjustable feet.
- Continuous line-ups are available for remote applications.
- Cord and plug (Self-Contained only).
- UL Safety and UL Sanitation listed.
- DOE 2012 Compliant.

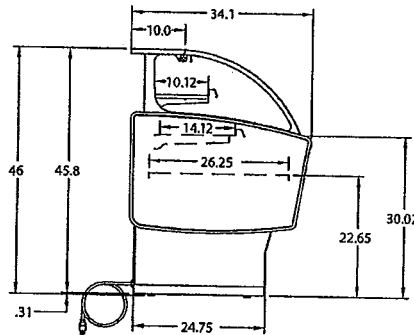
REFRIGERATED SELF-SERVE LOW PROFILE SPECIALTY MERCHANDISER

OPTIONAL ACCESSORIES:

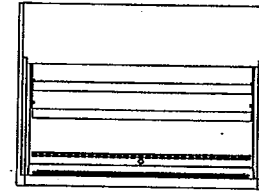
- | | |
|--|---|
| ☐ Special Base Finish
☐ Lights Below Shelves
☐ LED Lighting
☐ Casters: Recessed or Exposed
☐ Legs
☐ Remote Refrigeration
(Includes Condensate Pump)
☐ Solid Rear Sliding Access Doors
☐ Two-Tier Display Step
in Lieu of Shelving
☐ Glass or Stainless Shelving
in Lieu of Black Metal
☐ Flush End Panels for
Counter Installations | ☐ Joining Kit for Continuous Line-ups
☐ Reflective End Glass
☐ Stainless Steel Interior, Including Shelves
☐ Security Night Cover
☐ Front Non-Refrigerated Display
Merchandiser
☐ Front or Rear Condensing Unit Air
Discharge
☐ Condensate Pump (LPRSS3 & LPRSS4 Only)
☐ Condensate Evaporator Assembly
(Field Install, Dedicated 120V, 15A Circuit Required) |
|--|---|



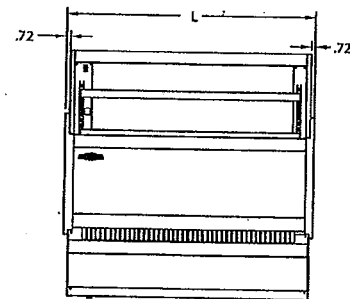
REAR VIEW



END VIEW



PLAN VIEW



FRONT VIEW

SPECIFICATIONS:

Model	Dimensions L W H	Shipping Weight (lbs)	Shelf Area (Square Feet)	Self-Contained Electrical Data	Remote Electrical Data 120/60/1
☐ LPRSS3	36" x 34" x 46"	457	11	120/60/1 • 1/3 HP • 16 AMPS (NEMA 5-20P)	2 AMPS
☐ LPRSS4	48" x 34" x 46"	560	15	120/60/1 • 1/3 HP • 16 AMPS (NEMA 5-20P)	2 AMPS
☐ LPRSS5	60" x 34" x 46"	650	19	208-240/60/1 • 1/2 HP • 9 AMPS (NEMA 6-15P)	3 AMPS
☐ LPRSS6	72" x 34" x 46"	750	24	208-240/60/1 • 3/4 HP • 10 AMPS (NEMA 6-15P)	3 AMPS

- If a GFCI circuit is required, a GFCI Breaker Must be used instead of GFCI receptacle.
- Case temperature will vary if the air curtain is disrupted.
- The rear of the unit needs to be 6" from a wall.
- Refrigerated cases are designed to operate in a maximum environment of 75°F ambient and 55% relative humidity.
- Due to continuing engineering improvements, specifications are subject to change without notice.



The Signature of Quality

FEDERAL INDUSTRIES
A Standex Company

215 FEDERAL AVENUE, BELLEVILLE, WISCONSIN 53508-9201

PHONE: 800-356-4206

EMAIL: geninfo@federalind.com

FAX: 608-424-3234

WEBSITE: www.federalind.com





[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Limited Liability Company
CHDS L.L.C.

Filing Information

Document Number L11000041780
FEI/EIN Number N/A
Date Filed 04/07/2011
State FL
Status ACTIVE

Principal Address

1740 N.W. 3RD COURT
FT. LAUDERDALE, FL 33311

Mailing Address

1740 N.W. 3RD COURT
FT. LAUDERDALE, FL 33311

Registered Agent Name & Address

SMITH, LADESORAE G
1740 N.W. 3RD COURT
FT. LAUDERDALE, FL 33311

Name Changed: 12/04/2012

Authorized Person(s) Detail

Name & Address

Title President

GILES-SMITH, LADESORAE
1740 N.W. 3RD COURT
FT. LAUDERDALE, FL 33311

Annual Reports

Report Year	Filed Date
2015	01/14/2015
2016	03/02/2016
2017	02/10/2017

Document Images

[02/10/2017 -- ANNUAL REPORT](#)

[View image in PDF format](#)

Detail by Entity Name

Florida Limited Liability Company

1134 L.L.C.

Filing Information**Document Number** L17000017999**FEI/EIN Number** NONE**Date Filed** 01/25/2017**Effective Date** 01/25/2017**State** FL**Status** ACTIVE**Principal Address**1740 NW 3RD CT
FORT LAUDERDALE, FL 33311**Mailing Address**1740 NW 3RD CT
FORT LAUDERDALE, FL 33311**Registered Agent Name & Address**SMITH, CHRISTOPHER
1740 NW 3RD CT
FORT LAUDERDALE, FL 33311**Authorized Person(s) Detail****Name & Address**

Title MGR

GILES-SMITH, LADESARAE
1740 NW 3RD CT
FORT LAUDERDALE, FL 33311

Title MGR

SMITH, CHRISTOPHER
1740 NW 3RD CT
FORT LAUDERDALE, FL 33311**Annual Reports****No Annual Reports Filed****Document Images**01/25/2017 -- [Florida Limited Liability](#)[View image in PDF format](#)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

1134 LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Smith

Name of Person

Firm/Company

1740 NW 3rd Court

Address

Ft Lauderdale FL 33311

City/State and Zip Code

CSmith93@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Smith (954) 525-7500

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy

(additional copy is enclosed)

☐

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy

(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
17 JAN 25 PM 2:17

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1134 LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1740 NW 3rd Ct
Fort Lauderdale FL 33311

Mailing Address:

1740 NW 3rd Ct
Fort Lauderdale FL 33311

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Christopher Smith

Name

1740 NW 3rd Ct

Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale FL 33311

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

STATE OF FLORIDA
CLERK OF THE COURT
JAN 25 PM 2:17
FILED

Monday		HOURS	Tuesday	HOURS	Wednesday	HOURS	Thursday	HOURS	Friday	HOURS	Saturday	HOURS	Sunday	HOURS
Pre-Opening	10:30 to 11 am	0.5	10:30 am to 11 am	0.5	10:30 am to 11 am	0.5	10:30 am to 11 am	0.5	10:30 am to 11 am	0.5	10:30 am to 11 am	0.5	10:30 am to 11 am	0.5
Hours Open	11am to 9 pm	10	11am to 8 pm	10	11am to 8 pm	10	11am to 8 pm	10	11am to 10 pm	10	11am to 10 pm	11	11 to 6 pm	7
Post Opening	9 pm to 10 pm	1	9 pm to 10 pm	1	9 pm to 10 pm	1	9 pm to 10 pm	1	10 pm to 11pm	1	10 pm to 11pm	1	6 pm to 7 pm	1
Total Hours		11.5		11.5		11.5		11.5		11.5		12.5		8.5

71

Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		Totals
Supervisor - Stacy	\$ 115.00	\$ 80.00	\$ 80.00	\$ 70.00	\$ 80.00	\$ 80.00	\$ 55.00	\$ 55.00					\$ 400.00	
Cook 1		\$ 96.60	\$ 96.60	\$ 96.60	\$ 96.60	\$ 96.60	\$ 46.20	\$ 46.20					\$ 336.00	
Wait Staff 1		\$ 21.20	\$ 21.20	\$ 21.20	\$ 21.20	\$ 21.20	\$ 21.20	\$ 21.20					\$ 84.80	
Cook 2							\$ 105.00	\$ 105.00			\$ 84.00		\$ 294.00	
Cook 3	\$ 96.60												\$ 96.60	
Wait Staff 2	\$ 21.20								\$ 21.20	\$ 21.20			\$ 63.60	
Totals	\$ 232.80	\$ 197.80	\$ 197.80	\$ 187.80	\$ 197.80	\$ 197.80	\$ 227.40	\$ 227.40	\$ 126.20	\$ 126.20	\$ 105.20	\$ 105.20	\$ 1,275.00	

Weekly

Salary	Wage per hour	Hours	Total Cost
Supervisor	\$ 10.00	40	\$ 400.00
Cook 1	\$ 8.40	40	\$ 336.00
Wait Staff 1	\$ 5.30	16	\$ 84.80
Cook 2	\$ 8.40	35	\$ 294.00
Cook 3	\$ 8.40	11.5	\$ 96.60
Wait Staff 2	\$ 5.30	12	\$ 63.60
TOTAL		154.5	\$ 1,275.00

ITEM VII
DALES PROPERTIES FUNDING
REQUEST



October 31, 2017

D'Wayne Spence, NPF CRA Manager
City of Fort Lauderdale Community Redevelopment Agency
914 NW 6th Street, Suite 200
Fort Lauderdale, FL 33311

RE: Application for Commercial Façade Improvement Program; Application for Business Improvement Program

Dear Mr. Spence:

I am pleased to submit the enclosed application for the Application for Commercial Façade Improvement Program and Application for Business Improvement Program for improvements and renovation to the building at 300 West Sunrise Blvd, Fort Lauderdale, FL 33311.

As a long time business owner on the Sunrise Blvd corridor, it has been a long-life dream to make a difference to the neighborhood. I have more than two decades of operating a successful tire business at 250 West Sunrise Blvd and have recently acquired the adjacent property located at 300 West Sunrise Blvd, which is in need of major improvements and upgrades of the tenancy to include offerings such as doctor's offices, dentist offices, pharmacy and possible franchises. These types of businesses were historically part of this center, but moved due to poor maintenance by the previous owner. These are the types of services to the community that we want to bring back to the area.

Over the past few months, I have been consumed with thoughts of redeveloping the plaza and its environs. Specific outcomes that are expected to be achieved over time from an updated plaza and the environs are:

- To make improvements to the physical infrastructure and appearance of the plaza.
- Coordination of a cohesive business community committed to ongoing marketing and development of the plaza.
- An enhanced profile for the entire plaza with upgraded tenancy with improved services.
- To improve customer perceptions about the plaza.
- A continual improvement in consumer spending patterns at the plaza.
- The creation of additional job opportunity for residents of the community.

I am aware of what is being proposed for the area such as the integrated Progresso Village development to include the WAWA petrol station, supermarket, restaurant and Dunkin Donuts. I am excited and eager to be a part of the redevelopment, and this center (and eventually the tire business and adjoining buildings) will have a similar color scheme/facade as the planned WAWA development. The idea that this neighborhood will be transformed to a place which will bring about a lifestyle change is awe inspiring.



Given our financial commitment, expertise in entrepreneurship, and commitment to the Fort Lauderdale community, we respectfully request that the CRA Board and its Advisory Board will find that our application qualifies for the applied supporting funds.

Sincerely,

Dale Saunders
President



Application for CRA Funding

Dale's Properties- 300 W Sunrise LLC, submits this application for CRA funding based on the following programs:

1. Property and Business Improvement Program (PBIP). Amount: \$225,000.
2. Commercial Façade Improvement Program (CFIP). Amount: \$125,000.

Table of Contents

Application for CRA Funding Assistance	Section 1
Business Plan and Market Analysis	Section 2
List of Partners and Shareholders	Section 3
Corporate/Personal Tax Returns (2014, 2015, 2016)	Section 4
New Job Creation	Section 5
Articles of Organization	Section 6
Real Property Deed to 300 W. Sunrise Blvd	Section 7
Scope of Work and Project Estimate	Section 8
Map and Property Information	Section 9
Supplemental Questions	Section 10
Documentation of Supporting Funds	Section 11

City of Fort Lauderdale

**Northwest-Progresso-Flagler Heights
Community Redevelopment Agency
(NWPF CRA)**



APPLICATION FOR CRA FUNDING ASSISTANCE

Name of Principal Owner in Charge Dale Saunders		Tel. No. 9544485575		E-Mail Address			
Primary Contact for this CRA Request Alicia Brooks		Tel. No. 9546831664		E-Mail Address brooksalia2@gmail.com			
Name of Business Dale's Properties-300 W Sunrise LLC		Tax I.D. No. 47-4248140		Company Website			
Business Address 300 W. Sunrise Blvd		Tel. No. 9543066992		Fax No. 9543066224			
City Ft. Lauderdale		State FL		Zip Code 33311			
Commencement Date to Begin Project: _____ As soon as project is approved				JOB INFORMATION Full Time Equivalent (FTE) Jobs to be created 40-50 Existing Jobs _____ Total FTE Jobs _____ TYPE OF BUSINESS Sole Proprietor _____ Partnership _____ Joint Venture _____ Corporation _____ Cooperative _____ Limited Liability Company _____ Non-Profit Org. _____ Other: _____			
Completion Date for Project: 9-12 months							
Check Appropriate Description †Existing Business ☐ †New Business ☐		Project Type †Expansion ☐ †Relocation ☐				Facility Description Existing Space 28,350 sq. ft. New Space _____ sq. ft.	
NAICS Code / Industry Type		Date of Incorporation 4/20/2015				State where the business was incorporated Florida	
Proposed Project Location/City Fort Lauderdale		Proposed Address 300 W. Sunrise Blvd					
Property Control Number(s) 4942 34 05 5480 4942 34 11 0090		Property Owner Dale Saunders					
Owner Tel. No. (include Area Code) 9544485575		Is there a lien on the property? ☐ Yes ☒ No NO					
Bank(s) Where Business Accounts for Projects Are Held		1. _____ 2. Wells Fargo					
Name of Participating Bank/Lender Wells Fargo (Dale's Properties-300 W Sunrise LLC)							
Amount \$ 53,889.51		Contact Person		Tel. No. (include Area Code) (800) 225-5935			
Name of Other Financial Source Wells Fargo (Dale's Properties & Investments Inc)							
Amount \$ 39,270.94		Contact Person		Tel. No. (include Area Code) (800) 225-5935			
Name of Other Financial Source Wells Fargo (Dale's Wheels & Tires Direct)							
Amount \$ 245,577.27		Contact Person		Tel. No. (include Area Code) (800) 225-5935			
Name of Other Financial Source							
Amount \$		Contact Person		Tel. No. (include Area Code)			
Fax No. (include Area Code)							
Project Purpose and Economic Impact To get more tenants to open store front businesses that will allow more jobs and bring in a variety of tenancy to accomodate the community							

NOTE 1: If the project receives funds via another City, County, Federal or State program which also requires job creation/retention, the jobs created/retained for those programs must be in addition to the jobs required under this program.

NOTE 2: If project includes the purchase of equipment using CRA funds, then there must not be another UCC filing for the equipment.

Management: Owners, partners, officers, all holders of outstanding stock — 100% of ownership must be shown (use separate sheet if necessary).

Name	Complete Address	% Owned	From	To
Dale Saunders	5604 NW 108th Terrace, Coral Springs	100	2015	Present
Name	Complete Address	% Owned	From	To
Name	Complete Address	% Owned	From	To
Name	Complete Address	% Owned	From	To
Name	Complete Address	% Owned	From	To

PROJECT/ACTIVITY COST SUMMARY	
1. Please state the overall project cost:	\$ 1,571,975 (including real estate acquisition)
2. Please state the overall project costs related to the CRA's assisted activity?	\$ 471,975
3. Please indicate the sources and uses of funds for the project on the following table.	

Project Source(s) of Funding	Amount	Rate	Term
Bank Loan (specify)			
City funds			
CRA funds	350,000		
Company's current cash assets	121,975		
Owner equity (specify)	1,100,000		
Other (specify)			
Other (specify)			
Other (specify)			
Total Sources	1,571,975		
Select the Use(s) of Funds and the Amount Need for Each	Sources of Funds (Yes or No)	Amount	
Land Acquisition	NO		
Real Property Acquisition	Yes	1,100,000	
Utility and road infrastructure improvements	No		
New construction of commercial and industrial buildings	NO		
Rehabilitation of commercial and industrial buildings	Yes	471,975	
Purchase and installation of equipment and fixtures	NO		
Other (specify)			
Other (specify)			
Other (specify)			
Total Uses		1,571,975	

NOTE 3: Other "uses" include Architectural/Engineering Fees, Application Fees, Permit Fees Impact Fees

BUSINESS INDEBTEDNESS: Furnish the following information on all outstanding installment debts, code and other liens, notes and mortgages payable that relate to this project. The present balances should agree with the latest balance sheet submitted (*use a separate sheet if necessary*).

To Whom Payable	Original Amount	Original Date	Present Balance	Rate of Interest	Maturity Date	Monthly Payment
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$
Name: _____	\$		\$	%		\$

THE FOLLOWING ITEMS MUST BE COMPLETED AND SUBMITTED WITH YOUR APPLICATION

1. A business plan which describes the company mission, market analysis, applicant capacity, economic analysis and project feasibility, a brief history and description of the company (*including the founding of the company*), overview of operations, product information, customer base, method and areas of distribution, primary competitors and suppliers within the County.
2. A list of general and limited partners, officers, directors and shareholders of the company. Please provide a resume for all the principals and key management.
3. Corporate income tax returns for the last three years (*personal returns may also be requested*).
4. Two separate lists that detail the existing jobs on your payroll and the new jobs to be created (*within the list please provide the job title of each position, a brief description of each position, annual salary for existing and new positions and the industry average salary for those positions*).
5. If machinery and equipment are being purchased with CRA funds, provide a list of all the items to be purchased, with quotes on vendor's letterhead. Include a statement from the manufacturer, attesting to the economic life of the equipment.
6. If business is a franchise, include a copy of the franchise agreement;
7. Bank Commitment Letter detailing the conditions of the loan approval.
8. Copy of IRS determination letter as a non-profit organization (*required for all non-profit organizations only*).
9. Signed copy of resolution or minutes from the meeting of the governing body authorizing submission of the application (*required for all non-profit organizations only*).
10. Articles of Incorporation or Division of Corporations information identifying authorized signatories
11. Copy of the Property Deed (*if the applicant is the owner*)
12. Copy of By-Laws (*required for all non-profit organizations only*).
13. Please sign and submit *Statement of Personal History and Credit Check Release* (as attached).
14. If project involves construction, please provide a minimum of two (2) detailed cost estimates prepared by Architect/Engineer and/or General Contractor, preliminary plans and specifications, Architectural Illustration and photos of existing conditions.
15. Attach a street map showing the location of the proposed project, Property Folio number and Legal Description.
16. Preliminary Project Schedule.

The following items are also needed, if your funding request is \$500,000 or more
(*not applicable for Commercial Façade, Streetscape Enhancement and Property and Business Improvement Incentive requests*)

17. CPA audited corporate financial statements for the last three years (*Profit and Loss Statement and a Balance Sheet*).
18. If the most recent business return and/or financial statement is more sixty (60) days old, please submit a current Interim Financial Statement.
19. Three year financial pro formas which include operating statements, balance sheets, funding sources, and use details.
20. Ten year revenue and expense projection for the project
21. Copy of sales/purchase agreement when purchasing land or a building (*or an executed lease if applicable*).
22. Provide details regarding any credit issues, bankruptcies and lawsuits by any principal, owning 20% or more of the business.
23. The names of all affiliates and/or subsidiary companies, and their previous three (3) years financial statements and Interim Financial Statements if the financial statements are more than sixty (60) days old.
24. Letter from the Department of Sustainable Development (DSD) approving the proposed project with zoning and land use designations, and Plan Development Review number and comments.
25. Identification and qualifications of project development team (*i.e., attorney, engineer, architect, general contractor, etc.*).

26. Current Broward County Assessed Value, new capital investment dollars and total estimated new assessment when completed and placed into service.
27. Existing Leases, Lease commitments and tenant makeup (*if applicable*).
28. Copy of Environmental Report showing there are no Environmental issues (*if applicable*).
29. Copy of Appraisal Report (*if applicable*).

THE FOLLOWING ITEMS ARE REQUIRED AFTER CRA BOARD APPROVAL AND PRIOR TO EXECUTION OF AN AGREEMENT AND RELEASE OF FUNDS

30. Evidence that all funds are in-place to fully fund the project.
31. A copy of the City approved project plans, contract with General Contractor and permits (Prior to Release of Funds)
32. Scope of work and all project costs
33. Copies of Insurance Certificates (Builders Risk/All Risk Policy, Commercial General Liability, Workers Compensation with the City of Fort Lauderdale and the Fort Lauderdale CRA listed as Additional Insured.

APPLICANTS CERTIFICATION

By my signature, I certify that I have read and understand the application, criteria, loan fees and program requirements. I further certify that all the information I (we) supplied is correct and accurate. All of the owners of the company/organization (*regardless of ownership percentage*) are aware of this loan and are in full agreement with the business securing financing for this project. My (our) signature(s) represent my (our) agreement to comply with City of Fort Lauderdale Community Redevelopment Agency, as it relates to this CRA funding request.

Each Proprietor, General Partner, Limited Partner and Business Owner, owning 20% or more must sign below. For all Non-Profit Organizations, all guarantors must be approved by City of Fort Lauderdale Community Redevelopment Agency.

Business Name: Dale's Properties-300 W Sunrise LLC

By: [Signature] Date: 11/2/17

Signature and Title Date

Guarantors:

Signature and Title	Date
Signature and Title	Date
Signature and Title	Date
Signature and Title	Date
Signature and Title	Date



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

PERSONAL HISTORY STATEMENT

PLEASE READ CAREFULLY - PRINT OR TYPE

Each Proprietor (if a Sole Proprietorship), General Partner (if Partnership), Limited Partner (if Partnership), Officer, Director and Business Owner (owning 20% or more of the business), must complete a Personal History Statement. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

Applicant/Business Name: Dale Saunders/Dale's Properties-300 W Sunrise LLC	Participating Bank/Lender:
City: <u>Ft. Lauderdale</u> State: <u>FL</u> Zip: <u>33311</u>	City: _____ State: _____ Zip: _____

Personal Statement of (if you do not have a middle name, put NMN):

First Name: Dale Middle: _____ Last: Saunders
Social Security No. _____ Date of Birth: 06/03/1965 Place of Birth: Trinidad & Tobago

Present Address: <u>5604 NW 108th Terrace</u> City: <u>Coral Springs</u> State: <u>FL</u> Zip: <u>33065</u> From: <u>1999</u> To: <u>Present</u>	Previous Address: (needed if in present address less than 5 years) City: _____ State: _____ Zip: _____ From: _____ To: _____
Loan Requested from CRA: \$ <u>350,000</u> Loan Request from Bank(s): \$ <u>0</u> Percentage of Company Ownership: <u>100</u> %	Are you a U.S. Citizen: ☐ YES ☒ NO If NO, are you a Lawful Permanent Resident Alien: ☒ YES ☐ NO Alien Registration Number: _____

IT IS IMPORTANT THAT THE NEXT THREE (3) QUESTIONS BE ANSWERED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU. HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED.

IF YOU ANSWER "YES" TO ANY OF THE QUESTIONS BELOW, PLEASE FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION.

1. Are you presently under indictment, on parole or probation?
(If YES, indicate the date parole or probation is to expire) ☐ YES ☒ NO
2. Have you ever been charged with and/or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted. ☒ YES ☐ NO
3. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? ☒ YES ☐ NO

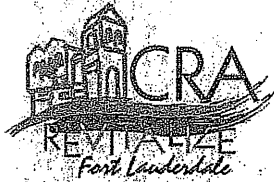
I hereby authorize the City of Fort Lauderdale to request criminal record information about me from the criminal justice agencies for the purpose of determining my eligibility.

Signature: <u>[Signature]</u>	Title: <u>Owner</u>	Date: <u>11/2/17</u>
-------------------------------	---------------------	----------------------

*ORIGINAL SIGNATURES REQUIRED

CRA INCENTIVE APPLICATION

Last Updated: September 16, 2016



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

CREDIT CHECK RELEASE FORM

I authorize the City of Fort Lauderdale Community Redevelopment Agency to obtain such information (from any source necessary), as the City/CRA may require concerning statements made in the application for the CRA funding (including but not limited to, obtaining a copy of my credit report, current loan status reports and financial information from the Participating Bank/Lender).

PLEASE NOTE: Each Proprietor (if a Sole Proprietorship), General Partner (if Partnership), Limited Partner (if Partnership), Officer, Director and Business Owner (owning 20% or more of the business), must complete this Credit Check Release Form. For all Non-Profit Organizations, all guarantors must complete this form and be approved as guarantors by the City of Fort Lauderdale Community Redevelopment Agency.

First Name: Dale Middle: _____ Last: Saunders

Social Security No.: _____ Date of Birth: 06/03/1965

Driver's License (State and Number): S536-167-65-203-1

Home/Cellular Phone No.: 954-448-5575 Office No.: _____

Current Home Address (PO Boxes not accepted): 5604 NW 108th Terrace

City: Coral Springs State: FL Zip Code: 33065

Employer: Dale's Wheel & Tires Direct (Busines Owner)

Employer Address: 250 W. Sunrise Blvd

City: Fort Lauderdale State: FL Zip Code: 33311

Company Phone No.: 954-764-1582 Other No.: _____

Signature: [Handwritten Signature]

Date: 11/2/17

*ORIGINAL SIGNATURES REQUIRED



Northwest-Progresso-Flagler Heights Community Redevelopment Agency

APPLICATION REQUEST SUPPLEMENTAL INFORMATION

CRA Incentive Programs

Please select the incentive(s) you are applying for and insert the amount of funding assistance you are seeking:

☒ COMMERCIAL FAÇADE IMPROVEMENT PROGRAM	\$ <u>125,000</u>
☒ PROPERTY AND BUSINESS IMPROVEMENT PROGRAM	\$ <u>225,000</u>
☐ STREETSCAPE ENHANCEMENT PROGRAM	\$ _____
☐ DEVELOPMENT INCENTIVE PROGRAM	\$ _____
☐ PROPERTY TAX REIMBURSEMENT PROGRAM	\$ _____

Please provide a supplement sheet responding to the following numbered questions:

1. Please describe your project.
2. What is the address, folio number and legal description of the property.
3. What is the existing and proposed use of the property? Please note that certain uses are not eligible for CRA assistance. This includes convenience stores, pawn shops, check cashing stores, tattoo parlors, massage parlors, liquor stores and other uses as may be determined by the CRA that are inconsistent with the CRA Community Redevelopment Plan. Please note that there will be restrictive covenants placed on the property for minimum of 5 years restricting use of the property to only those uses for which CRA funding was provided.
4. Are the proposed improvements to the property being made on behalf of a proposed tenant for the property. If so, please provide a copy of the lease agreement.
5. What is the zoning of the property?
6. Are you the property owner? Please provide a copy of the deed of the property. You must be the owner of the property to apply.
7. Is your project new construction or is it renovation?
8. What is the total capital investment of your project and what is your hard construction and soft cost? (While property acquisition cost is not an eligible CRA expense, it may be included in your total capital investment)
9. What is the current Broward County Assessed Value of the property?
10. Is there a mortgage on the property? Please provide OR Book and Page. Please note that CRA funding is in the form of a 0% interest forgivable loan, forgiven after 5 year of project completion secured by a first

mortgage or subordinate mortgage on the property. Projects receiving over \$225,000 in CRA assistance will be secured by a forgivable loan forgiven after 7 years to 10 years depending on the level of CRA funding. Other forms of security in lieu of a forgivable mortgage will be considered on a case by case basis.

11. Are there any other liens or pending liens on the property? Please provide OR Book and Page.
12. Are there any code violations on the property? Identify.
13. Is the property listed "For Sale." Please note that properties listed for sale may not apply for CRA program funding.
14. How many new permanent jobs will be created by the project? Please describe the jobs to be created and projected salaries.
15. What is the estimated construction commencement date of the project? Please note that no work is to commence on the project unless a Program Agreement is approved and fully executed between the CRA and the property owner and that work must commence within 90 days of CRA funding approval.
16. What is the estimated completion date of the project? Please note that all approved projects must be completed within a maximum of three (3) years.
17. Please provide proof of your matching funds (i.e. bank statement, line of credit, etc.) and identify other proposed forms of financing for your project.
18. Do you have general liability and fire and casualty insurance on the property? You will be required to demonstrate proof of insurance and may include bonding requirements as required by the City/CRA prior to commencement of work. The cost of insurance may be included as part of your total project cost funded by the program.
19. Have you previously received funding from the CRA? Explain.

If you are applying for funding from the Commercial Façade Improvement Program, Property & Business Improvement Program and/or Streetscape Enhancement Program, please also complete the following:

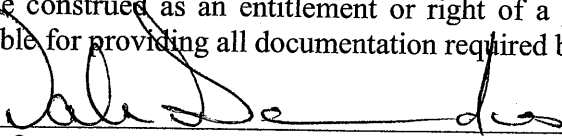
20. Do you have a detailed scope of work? If so, please include for CRA review and approval.
21. Do you have completed architectural drawings for the scope of work to be performed? Please include along with architectural illustration(s) of the proposed work, material specifications, color selections, etc. Please note that architectural cost may be included as part of your total project cost.
22. Have your project plans been submitted for City Development Review and/or permitting and if so what are the status of the plans and the plan review number? All work must be permitted and approved by the Building Official.
23. Do you have detailed, written contractor cost estimates? If so, please provide.
24. Have you selected a contractor from the attached City/CRA Approved Contractor List? Please note if your contractor is not on the City/CRA approved list, it may be possible to have your contractor become an approved CRA Contractor. He/She will need to complete the attached Contractor Application for consideration.
25. If you are applying for the Facade Program or Property and Business investment Program, and if you are not using a City /CRA Approved Contractor, you must secure two detailed licensed and insured contractor cost estimates and CRA funding is limited to 60% of the lowest cost estimate not to exceed \$50,000 which can only be funded on a reimbursement basis, rather than a direct payment to the contractor. In addition, all

projects over \$50,000 may be assigned a CRA Construction Review Specialist who will determine the scope of work to be funded and will secure contractor pricing for the project, manage funding request and provide general project oversight.

26. For Streetscape Enhancement Program projects, see additional requirements for projects in excess of \$300,000 as required by Florida Statute 255.20.

I **Dale Saunders**

attest that the information is correct to the best of my knowledge. I further understand that the CRA program benefits are contingent upon funding availability and CRA approval and are not to be construed as an entitlement or right of a property owner/applicant. I further understand that I am responsible for providing all documentation required by The CRA.



Signature of

Property Owner or Business Owner

Dale Saunders

Print Name

List of all Jobs to be Created

[illegible]

***USE ADDITIONAL SHEETS IF NECESSARY**



Business Plan & Market Analysis

Table of Contents

1. Business Plan & Market Analysis
2. The Applicant Capacity
3. Brief History & Description of the Company
4. Customer Base
5. Dale's Community Outreach Program
6. Contact
7. Background of Founder



Business Plan & Market Analysis

The Dale's Property Retail Plaza is located at 300 West Sunrise Blvd. It is strategically situated in the heart of the northernmost portion of the Northwest Progresso – Flagler Heights (NPFH) CRA. The aim of starting this particular business was to serve as a community based retail plaza, servicing residents located within close proximity of the plaza (including the Sistrunk Corridor), as well as assist entrepreneurs achieve their dreams of being business owners. While we are extremely proud of our ability to accommodate the retail needs of the immediate community, we have a desire to attract improved retail uses that previously operated in the center (doctor's offices, dentist offices, pharmacies, franchises) that will make the plaza a place of destination for individuals that travel along the very busy West Sunrise corridor. The Sunrise Corridor is the only city corridor that has a direct connection from I-95 to the Fort Lauderdale. The enhancement of this plaza will complement the continued growth of our Downtown and the NPFH-CRA.

Dale's Property Retail Plaza (which will be renamed as a part of the renovations) is located directly in the middle of the large redevelopment that is occurring on the Sunrise corridor adjacent to Andrews Ave (WaWa, Aldi Supermarket, Applebees and Dunkin Donuts). The improvements to the plaza will have a similar color scheme/facade as the planned WAWA development. A new name and brand will further promote the area along with the new businesses.

Dale's Property Retail Plaza is owned by Dale Saunders and family which will be the first stage of improvements to be done by Mr. Saunders. He also owns the adjoining property which houses Dale's Wheels & Tires Direct which is a very vibrant and respected business in the area. These properties and businesses have no debts or liens. The property is self-administered and self-managed by the family, with a plaza manager and contractual technicians as needed.

The most desirable features of the plaza include: friendly people (both shop owners and community residents), its convenience to the community, its location in the center of the neighborhood, a decent mix of businesses and a community focus. The most undesirable is its old, tired, dowdy and dated appearance and ambience, not enough landscaping, perhaps a café or takeaway restaurant, including places for lunch is needed. It is not necessarily an inviting plaza for customers and finally, the plaza is lacking in identity and directional signage. In short, the plaza simply needs upgrading to a modernized look.

I am quite aware that improving the property requires a huge capital base, and with the help of the City of Fort Lauderdale and the NWCRA I can confidently say that we are ready to take on the redevelopment project.

As part of our plans to make our customers our number one priority and to become one of many leading property redevelopment projects in Fort Lauderdale and for the Saunders family, we are working on plans to work with our tenants and the community, providing affordable and reasonable price point for our units. In doing so we intend to comply with the stipulated CRA requirements such as job creations and long term leases.



Company Vision:

- To establish Dale's Property Retail Plaza as a premier shopping center on the Sunrise Blvd Corridor.
- To continually improve the goods and services offered so that the plaza is competitive with existing and proposed future establishments in the surrounding areas.

Mission Statement:

- To improve and promote the plaza so that it becomes a state of the art shopping center.
- To develop a stronger sense of cohesion and involvement amongst all the businesses in the plaza and the community.
- Acts as leaders and ambassadors for redevelopment of the corridor in accordance with the overall vision of the CRA.



The Applicant Capacity

Dale's Property Retail Plaza is two buildings with a total square footage of 28,350 that accommodates 12 store front businesses.



Brief History & Description of the Company

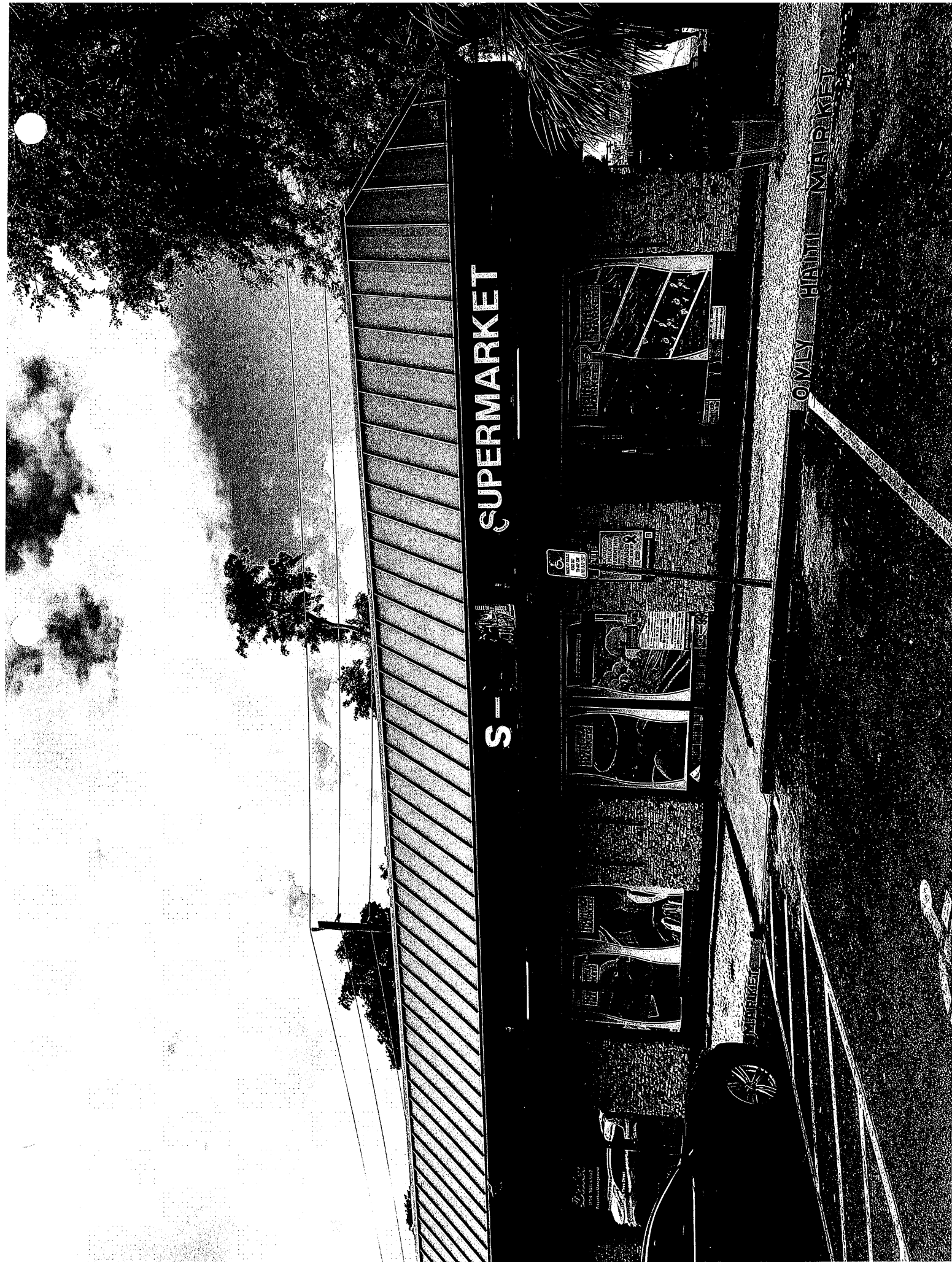
Backed by entrepreneur, Dale Saunders, Dale's Property Retail Plaza is a strip mall that allows entrepreneurs of all kinds to start, and scale their own businesses servicing the Sunrise Corridor. This strip mall will be able to give 12 entrepreneurs a chance to live their dream.

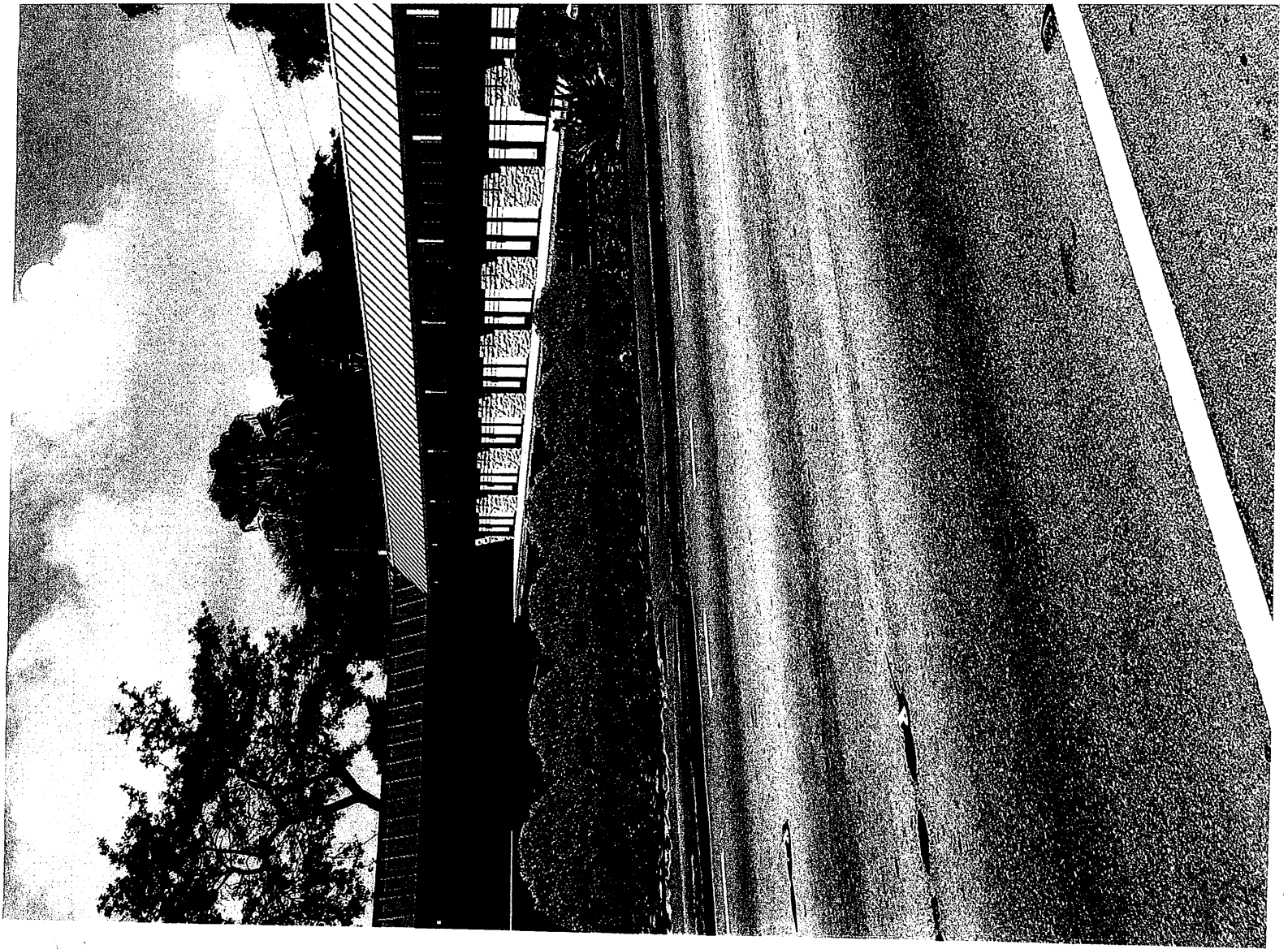
Dale's Property Retail Plaza is a partner business of Dale's Wheels & Tires Direct that started over 25 years ago and is dedicated to serving the Sunrise Corridor. The owner acquired 300 W. Sunrise Blvd in May 2015. The company does not have a mortgage on the building.

300 W Sunrise Blvd
Rent Roll

Space #	Tenant	SQ. FT	Monthly	Cam	PSF	PSF+CAM	Lease Exp
1A	Polo Music	525	\$976.21	\$306.25	\$22.31	\$29.31	8/20/2019
1B	Luc's Tailoring	525	\$920.17	\$306.25	\$21.03	\$28.03	6/30/2018
2	Vacant	812					
3	Vacant	812					
4	Vacant	812					
5+6	Restaurant	2000	\$2,145.17	\$1,516.67	\$12.87	\$21.97	11/30/2018
7	Jovisha Travel	900	\$1,044.38	\$525.00	\$13.93	\$20.93	8/20/2019
8	Vacant	855					
9	Vacant	855					
10	Barber Shop	780	\$988.89	\$455.00	\$15.21	\$22.21	10/31/2019
11	Office	812					
12+13	Haiti Market	2600	\$2,145.17	\$1,516.67	\$9.90	\$16.90	4/30/2028

Total	12,288	
Vacant	4,146	34%
Occupied	8,142	66%







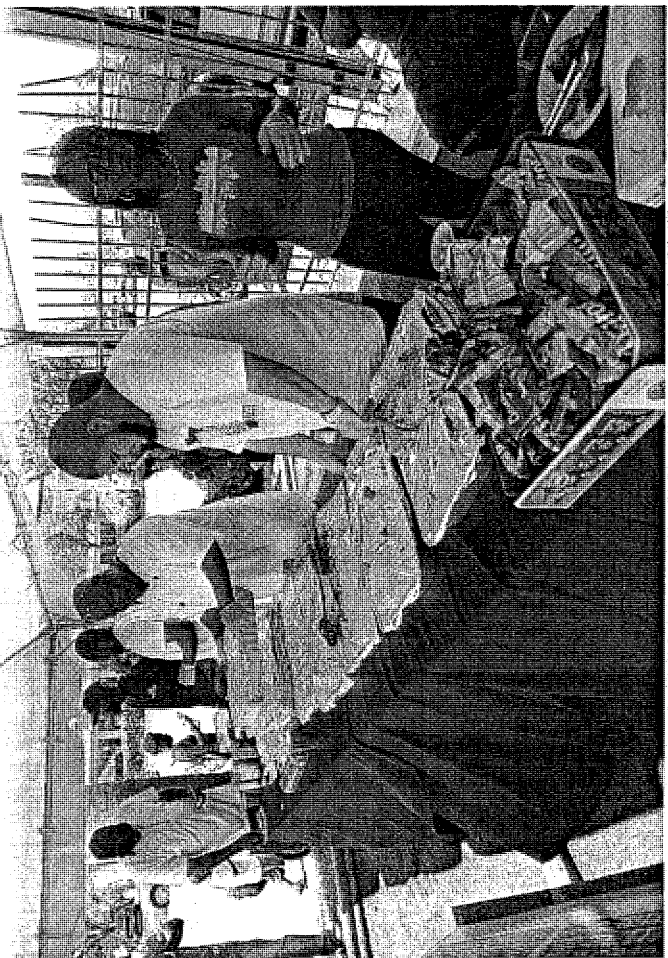
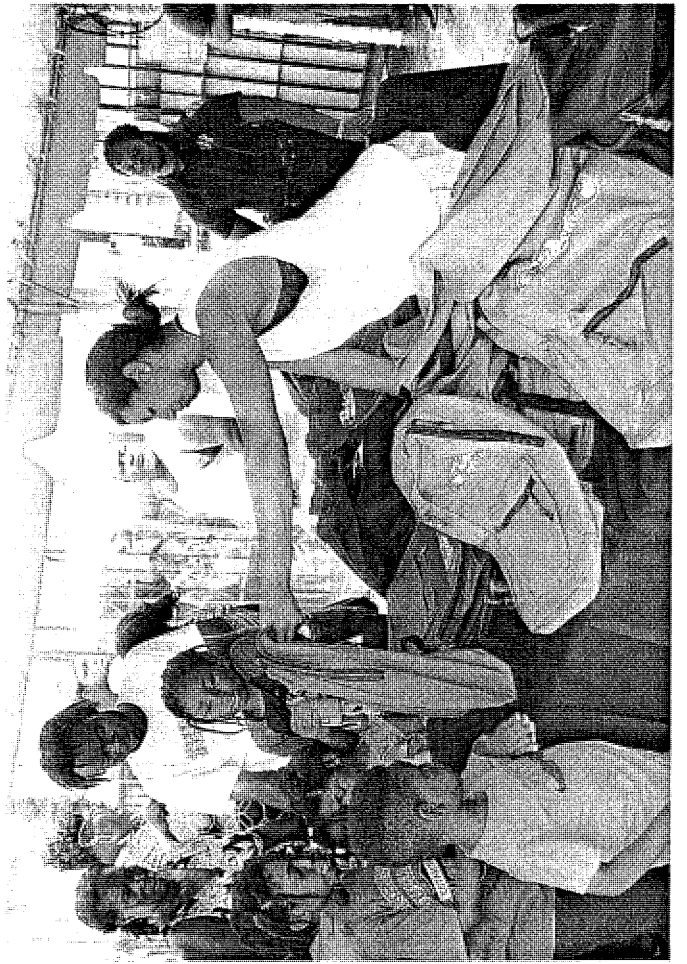
Customer Base

This Retail Plaza will target businesses of all kinds. Some examples of types of businesses we will target includes: doctor's offices, dentist offices, pharmacies, franchises such as a dollar tree or other reputable 99 cents stores, cell phone stores and more. The focus is to have eclectic and unique businesses to add that will provide a variety to the redevelopment of the Sunrise Corridor.



Dale's Community Outreach Program

Dale along with Dale's Wheels & Tires Direct has been a big contributor within the community over the years. Besides doing his own events for the community he donates to many different foundations especially ones that help the kids. Every August Dale's host a Back-To-School Giveaway which provides over 400 backpacks with school supplies, t-shirts, socks, underwear and food to the kids in the community. He is also a member of the Dillard High School Alumni in which he donates to every event the school sponsors. Dale's also sponsors a lot of sport teams like South Florida Shockers Basketball, Annual Kappa Golf Klassic and Western Baseball Booster Club just to name a few. Another yearly event sponsored by Dale's is the Miss Fort Lauderdale Teen Pageant. They also got involved in the T-Doggs Big Dream Charity which hosts the Battle of the Bands between local schools in the area to fight against gun violence.





Contact Us

If you would like more information about Dale's Property Retail Plaza, please contact Dale Saunders at 954-448-5575 or visit us at 300 W. Sunrise Blvd, Suite 11, Ft. Lauderdale, FL 33311.

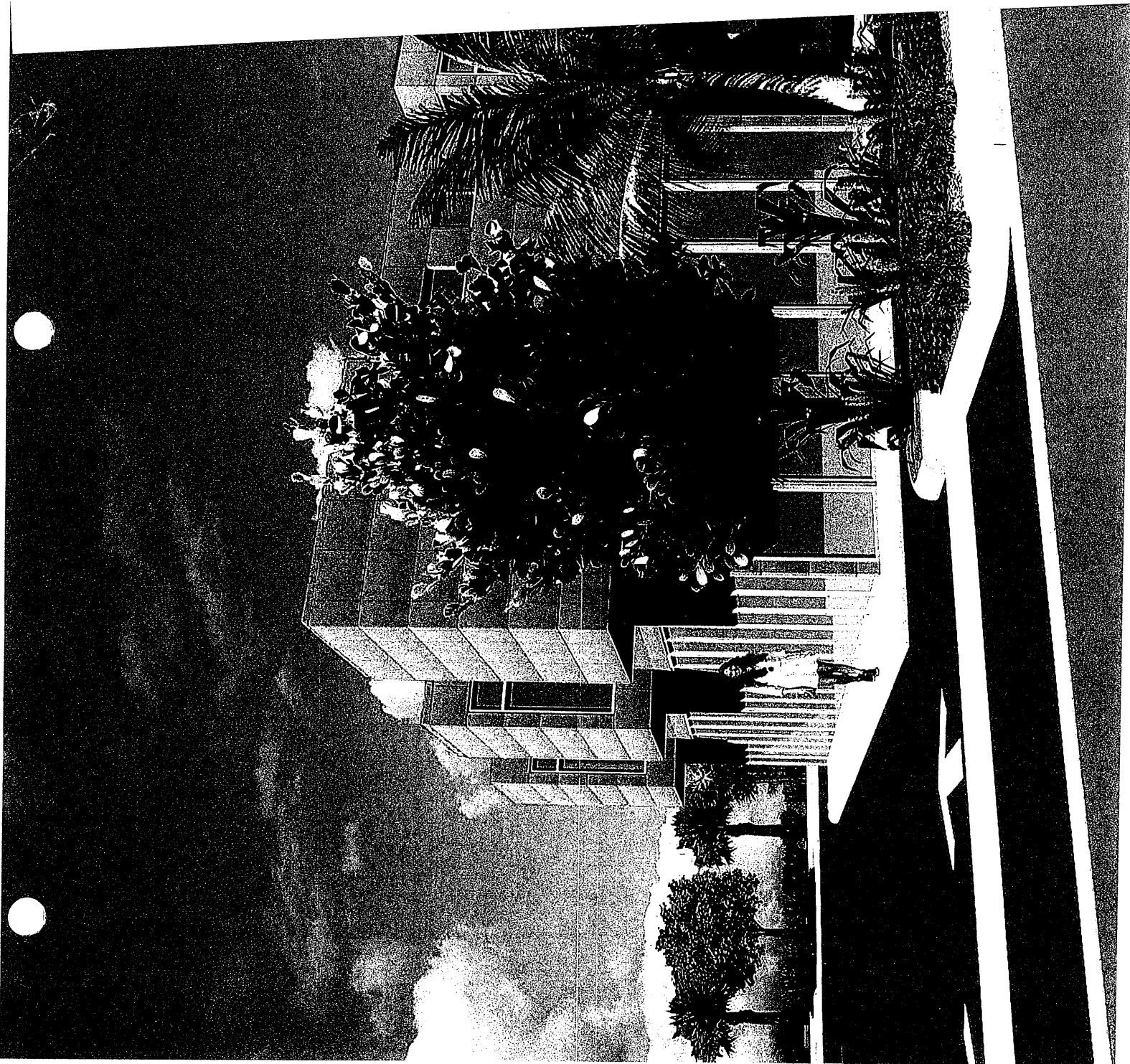


Background of Founder

Dale Saunders

- Founder of Dale's Wheels & Tires Direct that started May of 1991 on Broward Blvd then moved to the Sunrise Corridor April of 1996 where it still stands.
- Owner of Dale's Properties & Investments located at 100 NW 8th Street, Ft. Lauderdale, FL 33311 which consists of 10 condominiums.
- Owner of 727 NW 7th Ave, LLC which consist of a few warehouses.
- Owner of Saunders Vacant Lots, LLC which consist of a few empty lots.
- Owner of Dale's Properties-300 W. Sunrise LLC which consist of two retail plaza.

The businesses listed above that is all owned by Mr. Saunders are all located right here in Fort Lauderdale. Being a business owner in this community for over 25 years and his continued investment shows the dedication that Dale has to this community.





Question 2.

A list of general and limited partners, officers, directors and shareholders of the company. Please provide a resume for all the principals and key management.

The sole owner of Dale's Properties – 300 W. Sunrise LLC – (Dale's Property Retail Plaza) is Dale Saunders.

Form 1120S

U.S. Income Tax Return for an S Corporation

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

2015

For calendar year 2015 or tax year beginning 2015, ending

A S election effective date 02/11/96	TYPE OR PRINT	Name DALE'S PROPERTIES & INVESTMENTS, INC.	D Employer identification number 65-0639916
B Business activity code number (see instructions) 531120		Number, street, and room or suite no. If a P.O. box, see instructions. 5604 NW 108thth Terr.	E Date incorporated 02/11/96
C Check if Schedule M-3 attached ☐		City or town, state or province, country, and ZIP or foreign postal code Pompano Beach FL 33076	F Total assets (see instructions) \$ 1,693,041.

G Is the corporation electing to be an S corporation beginning with this tax year? Yes ☐ No ☒ If 'Yes,' attach Form 2553 if not already filed

H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change
(4) ☐ Amended return (5) ☐ S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year 1

Caution. Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

INCOME	1 a Gross receipts or sales	1 a	
	b Returns and allowances	1 b	
	c Balance. Subtract line 1b from line 1a	1 c	
	2 Cost of goods sold (attach Form 1125-A)	2	
	3 Gross profit. Subtract line 2 from line 1c	3	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	
5 Other income (loss) (see instrs - att statement)	5	107,980.	
6 Total income (loss). Add lines 3 through 5.	6	107,980.	
DEDUCTIONS SEE INSTRUCTIONS	7 Compensation of officers (see instructions - attach Form 1125-E)	7	
	8 Salaries and wages (less employment credits)	8	
	9 Repairs and maintenance	9	34,334.
	10 Bad debts	10	0.
	11 Rents	11	
	12 Taxes and licenses	12	20,234.
	13 Interest	13	
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	56,197.
	15 Depletion (Do not deduct oil and gas depletion.)	15	
	16 Advertising	16	
	17 Pension, profit-sharing, etc, plans	17	
18 Employee benefit programs	18		
19 Other deductions (attach statement)	19		
20 Total deductions. Add lines 7 through 19	20	110,765.	
21 Ordinary business income (loss). Subtract line 20 from line 6	21	-2,785.	
TAX AND PAYMENTS	22 a Excess net passive income or LIFO recapture tax (see instructions)	22 a	
	b Tax from Schedule D (Form 1120S)	22 b	
	c Add lines 22a and 22b (see instructions for additional taxes)	22 c	
	23 a 2015 estimated tax payments and 2014 overpayment credited to 2015	23 a	
	b Tax deposited with Form 7004	23 b	0.
	c Credit for federal tax paid on fuels (attach Form 4136)	23 c	
	d Add lines 23a through 23c	23 d	0.
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐	24	
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25	0.
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26	
27 Enter amount from line 26 Credited to 2016 estimated tax ☐ Refunded ☐	27		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title **President**
☒ Yes ☐ No May the IRS discuss this return with the preparer shown below (see instructions)?

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature **John A Partica** Date **08/27/16** Check ☐ if self-employed PTIN **P00234749**
 Firm's name **DRJ 1040 NV, INC.** Firm's EIN **27-0819416**
 Firm's address **5303 East Twain Ave #156**
Las Vegas NV 89122 Phone no. **(888) 677-9445**

BAA For Paperwork Reduction Act Notice, see separate instructions.

SPSA0112 08/13/15

Form 1120S (2015)

Schedule B Other Information (see instructions)

					Yes	No
1 Check accounting method: a ☒ Cash b ☐ Accrual c ☐ Other (specify) ▶ _____						
2 See the instructions and enter the:						
a Business activity. ▶ <u>Real Estate</u> b Product or service. ▶ <u>Residential</u>						
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100% Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum % Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of restricted stock ▶ _____						
(ii) Total shares of non-restricted stock ▶ _____						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of stock outstanding at the end of the tax year ▶ _____						
(ii) Total shares of stock outstanding if all instruments were executed ▶ _____						
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ☐ If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$ _____						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$ _____						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000						X
If "Yes," the corporation is not required to complete Schedules L and M-1.						
11 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?						X
If "Yes," enter the amount of principal reduction \$ _____						
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13 a Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?						X
b If "Yes," did the corporation file or will it file required Forms 1099?						

Schedule K Shareholders' Pro Rata Share Items		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1 -2,785.
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	3b Expenses from other rental activities (attach statement)	3b
	3c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b
	c Unrecaptured section 1250 gain (attach statement)	8c
	9 Net section 1231 gain (loss) (attach Form 4797)	9
10 Other income (loss) (see instructions) Type ▶	10	
Deductions	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
	b Investment interest expense	12b
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c (2)
d Other deductions (see instructions) . . . Type ▶	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c
	d Other rental real estate credits (see instrs) Type ▶	13d
	e Other rental credits (see instrs) Type ▶	13e
	f Biofuel producer credit (attach Form 6478)	13f
	g Other credits (see instructions) Type ▶	13g
Foreign Transactions	14a Name of country or U.S. possession ▶	
	b Gross income from all sources	14b
	c Gross income sourced at shareholder level	14c
	Foreign gross income sourced at corporate level	
	d Passive category	14d
	e General category	14e
	f Other (attach statement)	14f
	Deductions allocated and apportioned at shareholder level	
	g Interest expense	14g
	h Other	14h
	Deductions allocated and apportioned at corporate level to foreign source income	
	i Passive category	14i
	j General category	14j
	k Other (attach statement)	14k
Other information		
l Total foreign taxes (check one): ☐ Paid ☐ Accrued	14l	
m Reduction in taxes available for credit (attach statement)	14m	
n Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a 0.
	b Adjusted gain or loss	15b
	c Depletion (other than oil and gas)	15c
	d Oil, gas, and geothermal properties — gross income	15d
	e Oil, gas, and geothermal properties — deductions	15e
	f Other AMT items (attach statement)	15f
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a
	b Other tax-exempt income	16b
	c Nondeductible expenses	16c
	d Distributions (attach stmt if required) (see instrs)	16d
	e Repayment of loans from shareholders	16e

Schedule K Shareholders' Pro Rata Share Items (continued)

Total amount

Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	-2,785.

Schedule L Balance Sheets per Books

Beginning of tax year

End of tax year

Assets		(a)	(b)	(c)	(d)
1	Cash		18,888.		103,255.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach stmt)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets	1,328,999.		1,645,983.	
b	Less accumulated depreciation	77,014.	1,251,985.	56,197.	1,589,786.
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach stmt)				
15	Total assets		1,270,873.		1,693,041.
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach stmt)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock		1,000.		1,000.
23	Additional paid-in capital		1,293,983.		1,718,936.
24	Retained earnings		-24,110.		-26,895.
25	Adjustments to shareholders' equity (att stmt)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity		1,270,873.		1,693,041.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note.** The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books	-2,785.	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 14l (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14l, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation . . \$	
b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3	-2,785.	8 Income (loss) (Schedule K, ln 18). Ln 4 less ln 7 . .	-2,785.

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-24,110.		
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	2,785.		
5 Other reductions			
6 Combine lines 1 through 5	-26,895.		
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	-26,895.		

SPSA0134 08/13/15

Form 1120S (2015)

Schedule K-1
(Form 1120S)

Department of the Treasury
Internal Revenue Service

2015

For calendar year 2015, or tax
year beginning _____, 2015
ending _____, 2015

☐ Final K-1

☐ Amended K-1

671113
OMB No. 1545-0123

Shareholder's Share of Income, Deductions, Credits, etc. ▶ See page 2 of form and separate instructions.

Part I Information About the Corporation	
A Corporation's employer identification number	65-0639916
B Corporation's name, address, city, state, and ZIP code	DALE'S PROPERTIES & INVESTMENTS, INC. 5604 NW 108thth Terr. Pompano Beach, FL 33076
C IRS Center where corporation filed return	Cincinnati, OH 45999-0013
Part II Information About the Shareholder	
D Shareholder's identifying number	592-12-5349
E Shareholder's name, address, city, state, and ZIP code	Dale Saunders 4351 NW 101st Dr Pompano Beach, FL 33065
F Shareholder's percentage of stock ownership for tax year.	100.00000 %

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items			
1	Ordinary business income (loss)	13	Credits
	-2,785.		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
		A	0.
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information

*See attached statement for additional information.

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

	Code	Report on
1 Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:	N Credit for employer social security and Medicare taxes	See the Shareholder's Instructions
Passive loss	O Backup withholding	
Passive income	P Other credits	
Nonpassive loss		
Nonpassive income		
2 Net rental real estate income (loss)		See the Shareholder's Instructions
3 Other net rental income (loss)		See the Shareholder's Instructions
Net income		Schedule E, line 28, column (g)
Net loss		Schedule E, line 28, column (h)
4 Interest income		Schedule E, line 28, column (j)
5a Ordinary dividends		Form 1040, line 8a
5b Qualified dividends		Form 1040, line 9a
6 Royalties		Form 1040, line 9b
7 Net short-term capital gain (loss)		Schedule E, line 4
8a Net long-term capital gain (loss)		Schedule D, line 5
8b Collectibles (28%) gain (loss)		Schedule D, line 12
8c Unrecaptured section 1250 gain		28% Rate Gain Worksheet, line 4 (Schedule D instructions)
9 Net section 1231 gain (loss)		See the Shareholder's Instructions
10 Other income (loss)		See the Shareholder's Instructions
Code		
A Other portfolio income (loss)		See the Shareholder's Instructions
B Involuntary conversions		See the Shareholder's Instructions
C Sec. 1256 contracts and straddles		Form 6781, line 1
D Mining exploration costs recapture		See Pub 535
E Other income (loss)		See the Shareholder's Instructions
11 Section 179 deduction		See the Shareholder's Instructions
12 Other deductions		See the Shareholder's Instructions
A Cash contributions (50%)		See the Shareholder's Instructions
B Cash contributions (30%)		See the Shareholder's Instructions
C Noncash contributions (50%)		See the Shareholder's Instructions
D Noncash contributions (30%)		See the Shareholder's Instructions
E Capital gain property to a 50% organization (30%)		See the Shareholder's Instructions
F Capital gain property (20%)		See the Shareholder's Instructions
G Contributions (100%)		See the Shareholder's Instructions
H Investment interest expense		Form 4952, line 1
I Deductions — royalty income		Schedule E, line 19
J Section 59(e)(2) expenditures		See the Shareholder's Instructions
K Deductions — portfolio (2% floor)		Schedule A, line 23
L Deductions — portfolio (other)		Schedule A, line 28
M Preproductive period expenses		See the Shareholder's Instructions
N Commercial revitalization deduction from rental real estate activities		See Form 8582 instructions
O Reforestation expense deduction		See the Shareholder's Instructions
P Domestic production activities information		See Form 8903 instructions
Q Qualified production activities income		Form 8903, line 7b
R Employer's Form W-2 wages		Form 8903, line 17
S Other deductions		See the Shareholder's Instructions
13 Credits		
A Low-income housing credit (section 42(j)(5)) from pre-2008 buildings		See the Shareholder's Instructions
B Low-income housing credit (other) from pre-2008 buildings		See the Shareholder's Instructions
C Low-income housing credit (section 42(j)(5)) from post-2007 buildings		See the Shareholder's Instructions
D Low-income housing credit (other) from post-2007 buildings		See the Shareholder's Instructions
E Qualified rehabilitation expenditures (rental real estate)		See the Shareholder's Instructions
F Other rental real estate credits		See the Shareholder's Instructions
G Other rental credits		See the Shareholder's Instructions
H Undistributed capital gains credit		Form 1040, line 73, box a
I Biofuel producer credit		See the Shareholder's Instructions
J Work opportunity credit		See the Shareholder's Instructions
K Disabled access credit		See the Shareholder's Instructions
L Empowerment zone employment credit		See the Shareholder's Instructions
M Credit for increasing research activities		See the Shareholder's Instructions
14 Foreign transactions		
A Name of country or U.S. possession		Form 1116, Part I
B Gross income from all sources		Form 1116, Part I
C Gross income sourced at shareholder level		Form 1116, Part I
Foreign gross income sourced at corporate level		
D Passive category		Form 1116, Part I
E General category		Form 1116, Part I
F Other		Form 1116, Part I
Deductions allocated and apportioned at shareholder level		
G Interest expense		Form 1116, Part I
H Other		Form 1116, Part I
Deductions allocated and apportioned at corporate level to foreign source income		
I Passive category		Form 1116, Part I
J General category		Form 1116, Part I
K Other		Form 1116, Part I
Other information		
L Total foreign taxes paid		Form 1116, Part II
M Total foreign taxes accrued		Form 1116, Part II
N Reduction in taxes available for credit		Form 1116, line 12
O Foreign trading gross receipts		Form 8873
P Extraterritorial income exclusion		Form 8873
Q Other foreign transactions		See the Shareholder's Instructions
15 Alternative minimum tax (AMT) items		
A Post-1986 depreciation adjustment		See the Shareholder's Instructions and the instructions for Form 6251
B Adjusted gain or loss		See the Shareholder's Instructions and the instructions for Form 6251
C Depletion (other than oil & gas)		See the Shareholder's Instructions and the instructions for Form 6251
D Oil, gas, & geothermal — gross income		See the Shareholder's Instructions and the instructions for Form 6251
E Oil, gas, & geothermal — deductions		See the Shareholder's Instructions and the instructions for Form 6251
F Other AMT items		See the Shareholder's Instructions and the instructions for Form 6251
16 Items affecting shareholder basis		
A Tax-exempt interest income		Form 1040, line 8b
B Other tax-exempt income		Form 1040, line 8b
C Nondeductible expenses		See the Shareholder's Instructions
D Distributions		See the Shareholder's Instructions
E Repayment of loans from shareholders		See the Shareholder's Instructions
17 Other information		
A Investment income		Form 4952, line 4a
B Investment expenses		Form 4952, line 5
C Qualified rehabilitation expenditures (other than rental real estate)		See the Shareholder's Instructions
D Basis of energy property		See the Shareholder's Instructions
E Recapture of low-income housing credit (section 42(j)(5))		Form 8611, line 8
F Recapture of low-income housing credit (other)		Form 8611, line 8
G Recapture of investment credit		See Form 4255
H Recapture of other credits		See the Shareholder's Instructions
I Look-back interest — completed long-term contracts		See Form 8867
J Look-back interest — income forecast method		See Form 8868
K Dispositions of property with section 179 deductions		See the Shareholder's Instructions
L Recapture of section 179 deduction		See the Shareholder's Instructions
M Section 453(l)(3) information		See the Shareholder's Instructions
N Section 453A(c) information		See the Shareholder's Instructions
O Section 1260(b) information		See the Shareholder's Instructions
P Interest allocable to production expenditures		See the Shareholder's Instructions
Q CCF nonqualified withdrawals		See the Shareholder's Instructions
R Depletion information — oil and gas		See the Shareholder's Instructions
S Reserved		See the Shareholder's Instructions
T Section 108(i) information		See the Shareholder's Instructions
U Net investment income		See the Shareholder's Instructions
V Other information		See the Shareholder's Instructions

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury
Internal Revenue Service

(99)

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.**2015**Attachment
Sequence No. **179**

Name(s) shown on return

DALE'S PROPERTIES & INVESTMENTS, INC.

Business or activity to which this form relates

Identifying number

65-0639916

Form 1120S Line 21

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2015.	17	15,818.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B – Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property	01/15	316,954.	39 yrs	MM	S/L	40,379.

Section C – Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20 a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations – see instructions	22	56,197.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812 10/27/15

Form **4562** (2015)

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No									24b If 'Yes,' is the evidence written? . . . ☐ Yes ☐ No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25		
26 Property used more than 50% in a qualified business use:										
27 Property used 50% or less in a qualified business use:										
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29		

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?						
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2015 tax year (see instructions):					
43 Amortization of costs that began before your 2015 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

OMB No. 1545-0233

► File a separate application for each return.

► Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.**Print
or
Type**

Name

Identifying number

DALE'S PROPERTIES & INVESTMENTS, INC.**65-0639916**

Number, street, and room or suite number. (If P.O. box, see instructions.)

5604 NW 108thth Terr.

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).

Pompano Beach**FL 33076****Note.** File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.**Part I Automatic 5-Month Extension****1 a** Enter the form code for the return that this application is for (see below)

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate other than a bankruptcy estate)	04
Form 8804	31	Form 1041 (trust)	05

Part II Automatic 6-Month Extension**b** Enter the form code for the return that this application is for (see below)**25**

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065-B	10	Form 1120-SF	26
Form 1066	11	Form 3520-A	27
Form 1120	12	Form 8612	28
Form 1120-C	34	Form 8613	29
Form 1120-F	15	Form 8725	30
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐**3** If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐

If checked, attach a statement, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

Part III All Filers Must Complete This Part**4** If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐**5 a** The application is for calendar year 20 15, or tax year beginning _____, 20 __, and ending _____, 20 __**b Short tax year.** If this tax year is less than 12 months, check the reason:☐ Change in accounting period☐ Consolidated return to be filed☐ Initial return☐ Final return☐ Other (see instructions — attach explanation)**6** Tentative total tax **6** 0.**7** Total payments and credits (see instructions) **7** 0.**8** Balance due. Subtract line 7 from line 6 (see instructions) **8** 0.**BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.**Form **7004** (Rev 12-2012)

Form 7004 Electronic Filing Information Worksheet

2015

Name DALE'S PROPERTIES & INVESTMENTS, INC.	Social Security Number 65-0639916
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Prepare Form 7004 for Electronic Filing

Extension accepted (will be blanked if extension not previously transmitted) ☒

Signature of Officer

Officer's Name
Officer's Title
Signature Date

Electronic Funds Withdrawal - Amount paid with Form 7004

NOTE - A Practitioner PIN is required for Form 7004 efile if using electronic funds withdrawal

Enter the payment date to withdraw tax payment

Practitioner PIN information for Form 7004

NOTE - A Practitioner PIN is required for Form 7004 efile if using electronic funds withdrawal

Please indicate how the Officer PIN is entered into the program.

Officer entered PIN ☐
ERO entered Officer's PIN ☐

ERO's Practitioner PIN (EFIN followed by any 5 numbers) EFIN _____ Self-Select PIN _____

ERO Declaration: I certify that the above numeric entry is my PIN, which is my signature to authorize submission of the electronic application for extension and electronic funds withdrawal for the corporation indicated above. I confirm that I am submitting application for extension in accordance with the requirements of the Practitioner PIN method and Publications 4163, *Modernized e-File Information for Authorized IRS e-file Providers*, and 3112, *IRS e-file Application and Participation*.

Perjury Statement: Under penalties of perjury, I declare that I have been authorized by the above taxpayer to make this authorization and that I have examined a copy of the taxpayer's electronic extension (Form 7004) for the tax period indicated above and to the best of my knowledge and belief, it is true, correct, and complete.

Consent to disclosure: I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Electronic Funds Withdrawal Consent (if applicable): I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's Federal taxes owed on Form 7004, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I certify that I have the authority to execute this consent on behalf of the organization. I am signing this Disclosure Consent by entering my self-selected PIN below.

Date
Officer's PIN (enter any 5 numbers)

Form **8879-S****IRS e-file Signature Authorization for Form 1120S**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

- **Do not send to the IRS. Keep for your records.**
- Information about Form 8879-S and its instructions is at www.irs.gov/form8879s.

2015

Name of corporation

DALE'S PROPERTIES & INVESTMENTS, INC.

Employer identification number

65-0639916

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1120S, line 1c)	1	
2	Gross profit (Form 1120S, line 3)	2	
3	Ordinary business income (loss) (Form 1120S, line 21)	3	-2,785.
4	Net rental real estate income (loss) (Form 1120S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120S, Schedule K, line 18)	5	-2,785.

Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2015 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☐ I authorize _____ to enter my PIN _____ as my signature
ERO firm name do not enter all zeros
on the corporation's 2015 electronically filed income tax return.

☒ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2015 electronically filed income tax return.

Officer's signature ► _____ Date ► _____ Title ► President

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN 88334082045
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub 3112**, IRS e-file Application and Participation, and **Pub 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ► _____ Date ► 08/27/16

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see instructions.Form **8879-S** (2015)

S Corporation Information Worksheet**2015**

► Keep for your records

Part I – Identifying Information

Employer Identification Number . . . 65-0639916 Date Incorporated 02/11/1996
Name DALE'S PROPERTIES & INVESTMENTS, INC.
Doing Business As _____
Address 5604 NW 108th Terr.
City Pompano Beach State FL ZIP Code 33076

Foreign Province/State _____ Foreign Postal Code . . . _____
Foreign Code _____ Foreign Country . . . _____

Telephone Number _____ Extension _____
Fax Number _____ E-Mail Address _____
Tax Shelter Registration Number _____

☐ Eligible for qualified disaster area tax relief benefits**Part II – Tax Year and Filing Information**

☒ Calendar year
☐ Fiscal year — Ending month _____
☐ Short year — Beginning date _____ Ending date _____

☒ Enrolled in the Electronic Federal Tax Payment System (EFTPS)
IRS Service Center where S Corporation return is filed Cincinnati, OH 45999-0013

Part III – 2015 1120S Corporation Estimated Tax Paid

Amount of 2014 overpayment credited to 2015 estimated tax			
Payment Quarters	Due Date	Date Paid	Amount Paid
First Quarter Payment	04/15/15		
Second Quarter Payment	06/15/15		
Third Quarter Payment	09/15/15		
Fourth Quarter Payment	12/15/15		
Additional Payment 1			
Additional Payment 2			
Additional Payment 3			
Additional Payment 4			

Part IV – K-1 Information**K-1 Rounding Options**

- ☒ Distribute the rounding difference to shareholder with the largest percentage.
☐ Distribute the rounding difference among shareholders.
☐ Do not distribute the rounding difference to any shareholder.

Print Schedules K-1 with tax return?

☒ Yes
☐ No

Include page 2 of Schedules K-1 (codes and descriptions) with tax return?

☒ Yes
☐ No

Part V – Electronic Filing Information**Electronic Filing:**

- ☒ Check this box to file the federal return electronically
☐ Check this box to file the state(s) electronically

* Select the state or states to file electronically. (Multiple states can be entered)

State(s) *

- ☐ File Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

Practitioner PIN program:

- ☒ Check this box to sign this return electronically using the Practitioner PIN
☐ ERO entered PIN

Officer's PIN (enter any 5 numbers) 82045

Date PIN entered 03/12/2016

Information required for Electronic Filing:

Officer's Name Dale Saunders

Officer's Name for EF Dale Saunders

QuickZoom to the Electronic Filing Information Worksheet ▶

Electronic Filing of Extensions:

- ☒ Check this box to file federal **Form 7004** (application for extension of time to file return) electronically
☐ Check this box to file the state extension(s) electronically:

(CT, FL, LA, MA, MD, NJ, NY, PA, TN & TX Extensions: UT Extension Payment)

* Select the state or states to file electronically. (Multiple states can be entered)

State(s) *

Electronic Filing of Estimated Payments:

- ☐ Check this box to file the state estimated payments electronically

* Select the estimated quarterly payment to file electronically. (Multiple quarters can be entered)

State(s) *

Electronic Filing of Amended Return:

- ☐ Check this box to file a federal **amended return** electronically
☐ Check this box to file the state and/or city amended return(s) electronically

* Select the state and/or city amended return(s) to file electronically.

State/City *

- ☐ File Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

Part VI — Direct Deposit or Electronic Funds Withdrawal Information

Yes	No	
☐	☐	Does client want to use direct deposit of any federal tax refund ?
☐	☐	Does client want to use electronic funds withdrawal of federal balance due (EF only)?
☐	☐	Does client want to use electronic funds withdrawal of Form 7004 balance due (EF only)?
☐	☐	Use electronic funds withdrawal of amended return balance due (EF only)?

If any options selected above, enter information below, **(Review transferred information for accuracy)**

Bank Information

Name of Financial Institution (optional) . . . _____

Check the appropriate box ☐ Checking ☐ Savings

Routing number _____

Account number _____

Payment Information

Enter the payment date to withdraw tax payment _____

Balance due amount from this return _____

Enter an amount to withdraw tax payment _____

If partial payment is made, the remaining balance due _____

QuickZoom here to Form 1120S, Pages 1 and 2 ►

QuickZoom here to Schedule K-1 Worksheet ►

QuickZoom here to Client Status ►

Name DALE'S PROPERTIES & INVESTMENTS, INC.		Employer Identification No. 65-0639916
1	Accounting	1
2	Amortization	2
3	Automobile and truck expense	3
4	Bank charges	4
5	Cleaning	5
6	Commissions	6
7	Computer services and supplies	7
8	Credit and collection costs	8
9	Delivery and freight	9
10	Discounts	10
11	Dues and subscriptions	11
12	Equipment rent	12
13	Gifts	13
14	Insurance	14
15	Janitorial	15
16	Laundry and cleaning	16
17	Legal and professional	17
18 a	Meals and entertainment, subject to 50% limit	18 a
b	Meals and entertainment, subject to 80% limit	b
c	Meals and entertainment, allowed at 100%	c
d	Less disallowed	d
e	Meals and entertainment, net	18 e
19	Miscellaneous	19
20	Office expense	20
21	Outside services/independent contractors	21
22	Parking fees and tolls	22
23	Permits and fees	23
24	Postage	24
25	Printing	25
26	Security	26
27	Supplies	27
28	Telephone	28
29	Tools	29
30	Training/continuing education	30
31	Travel	31
32	Uniforms	32
33	Utilities	33
34	Total farm expenses (Schedule F, Line 33)	34
35	Other (itemize): Pest control	35
36	Total to Form 1120S, page 1, line 19	36

► Keep for your records

Name
DALE'S PROPERTIES & INVESTMENTS, INC.

Employer Identification No.
65-0639916

Income Items:	Description	Per Books	Per Tax Return	Difference (Book - Tax)
<i>Permanent items (tax-exempt income):</i>				
Tax-exempt interest — in state:				
	Direct Entry From K-1s			
	Tax-exempt interest — out of state			
	Life insurance proceeds			
	Other permanent income items:			
	Gain (Loss) on disposition of Section 179 assets			
	Alcohol used as fuel credit included in income			
<i>Timing (temporary) items:</i>				
	Unearned rent income			
	Unearned income			
	Gain on sale of assets			
	Installment sale income			
	Fuels tax credit included in income			
	Other timing income items:			
	Total			
<i>Expense Items:</i>				
Description				
<i>Permanent items (nondeductible expenses):</i>				
	Disallowed meals and entertainment			
	Employment credits wage reduction			
	Federal underpayment penalty			
	State underpayment penalty			
	Other fines and penalties			
	Officers' life insurance premiums			
	Interest paid to carry tax-exempt investments			
	Payroll Taxes for Employer SS Tax on Tips Credit			
	Employee benefit reduction credit from Form 8845			
	Small employer pension plan startup costs credit from Form 8881			
	Credit for Small Employer Health Ins Premiums from Form 8941			
	Other expenses related to tax-exempt income			
	Other permanent expense items:			
	Lease inclusion amount - enter as a negative			
<i>Timing (temporary) items:</i>				
	Depreciation and Section 179 expense		56,197.	
	Amortization			
	Depletion other than oil and gas			
	Loss on sale of assets			
	Organizational costs			
	Bad debt expense		0.	
	Prepaid expenses			
	Other timing expense items:			
	Total		56,197.	

- Keep for your records

Name as Shown on Return

DALE'S PROPERTIES & INVESTMENTS, INC.

Employer Identification No.

65-0639916

Description	Accumulated adjustments account	Other adjustments account	Shareholders' undistributed taxable income	Accumulated tax/book timing differences	Retained earnings while a C Corporation	Total
Balance at beginning of year . .	-24110					-24110
Ordinary income (loss) . . .	-2785					
Schedule K additions (Income/Gains):						
Schedule K reductions (Losses/Deductions):						
Income – Tax exempt						
Deductions – Exempt related :						
Schedule M-1 additions:						
Schedule M-1 reductions:						
Net adjustment for year	-2785					
Net income(loss) per books . .						-2785
Subtotal	-26895					-26895
AAA without net negative adj. . .	-24110					
Distributions						
Dividends						
Balance at end of tax year . . .	-26895					-26895

2015

Tax Year: 2015

65-0639916

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
11 NW 8th Street Ftl Fl		03/15/12	435,000		100.00			435,000	27.50	SL/MM		15,818
SUBTOTAL PRIOR YEAR			435,000	0		0	0	435,000			0	15,818
TOTALS			435,000	0		0	0	435,000			0	15,818

Page 1 of 1

2015

65-0639916

[illegible]

Page 1 of 1

► Keep for your records.

Name of Corporation DALE'S PROPERTIES & INVESTMENTS, INC.				Employer Identification Number 65-0639916		
Ordinary Income (Loss)	2015		2014		Difference 2015- 2014	
	Amount	% of Total Income	Amount	% of Total Income	Amount	%
1 a Gross receipts or sales			207,628.		-207,628.	-100.00
b Less returns and allowances						
c Net receipts ►			207,628.		-207,628.	-100.00
2 Cost of goods sold (Form 1125-A)						
3 Gross profit ►			207,628.		-207,628.	-100.00
4 Net gain or loss (Form 4797)						
5 Other income	107,980.				107,980.	
6 Total income (loss) ►	107,980.	100.00	207,628.	100.00	-99,648.	-47.99
Deductions						
7 Compensation of officers		0.00		0.00		
8 Salaries and wages (less employment credits)		0.00		0.00		
9 Repairs and maintenance	34,334.	31.80	29,773.	14.34	4,561.	15.32
10 Bad debts	0.	0.00	3,100.	1.49	-3,100.	-100.00
11 Rents		0.00		0.00		
12 Taxes and licenses	20,234.	18.74	18,012.	8.68	2,222.	12.34
13 Interest		0.00		0.00		
14a Depreciation (Form 4562)	56,197.	52.04	29,091.	14.01	27,106.	93.18
b Depreciation on Schedule A and elsewhere		0.00		0.00		
c Net depreciation	56,197.	52.04	29,091.	14.01	27,106.	93.18
15 Depletion (not oil and gas)		0.00		0.00		
16 Advertising		0.00		0.00		
17 Pension, profit-sharing, etc, plans		0.00		0.00		
18 Employee benefit programs		0.00		0.00		
19 Other deductions		0.00	48,936.	23.57	-48,936.	-100.00
20 Total deductions ►	110,765.	102.58	128,912.	62.09	-18,147.	-14.08
21 Ordinary income (loss) from trade/business ►	-2,785.	-2.58	78,716.	37.91	-81,501.	-103.54
Tax						
22a Excess net passive income tax or LIFO recapture		0.00		0.00		
b Tax from Schedule D		0.00		0.00		
Additional taxes		0.00		0.00		
c Total tax ►		0.00		0.00		
Tax Payments and Credits						
23d Total payments and credits	0.	0.00	0.	0.00	0.	
24 Estimated tax penalty		0.00		0.00		
25 Tax due	0.	0.00	0.	0.00	0.	
26 Overpayment	0.	0.00	0.	0.00	0.	
Schedule K Items:						
Income (Loss)	2015		2014		Difference 2015 - 2014	
					Amount	%
1 Ordinary business income (loss)	-2,785.		78,716.		-81,501.	-103.54
2 Net rental real estate income (loss)						
3 Other net rental income (loss)						
4 Interest income						
5a Dividends — ordinary						
b Dividends — qualified						
6 Royalty income						
7 Net short-term capital gain (loss)						
8 Net long-term capital gain (loss)						
9 Net gain (loss) under section 1231						
10 Other income (loss)						

Schedule K Items (continued):

Deductions	2015	2014	Difference 2015 - 2014	
			Amount	%
11 Section 179 expense deduction				
12a Charitable contributions				
b Interest expense on investment debts				
c Section 59(e)(2) expenditures				
d Other deductions				

Credits

13a Low-income housing credit (section 42(j)(5))				
b Low-income housing credit (other)				
c Qualified rehabilitation expenditures (rental real estate)				
d Other rental real estate credits				
e Other rental credits				
f Credit for alcohol used as fuel				
g Other credits				

Foreign Taxes

14b Gross income from all sources				
c Gross income sourced at shareholder level				
<i>Foreign gross income sourced at corporate level:</i>				
d Passive				
e Listed categories				
f General limitation				
<i>Deductions allocated and apportioned at shareholder level:</i>				
g Interest expense				
h Other				
<i>Deductions allocated and apportioned at corporate level to foreign source income:</i>				
i Passive				
j Listed categories				
k General limitation				
l Foreign taxes paid or accrued				
m Reduction in taxes available for credit				

Alternative Minimum Tax (AMT) Items

15a Post-1986 depreciation adjustment	0.	0.	0.	
b Adjusted gain or loss				
c Depletion (other than oil and gas)				
d Oil, gas, and geothermal properties — gross income				
e Oil, gas, and geothermal properties — deductions				
f Other AMT items				

Items Affecting Shareholder Basis

16a Tax-exempt interest income				
b Other tax-exempt income				
c Nondeductible expenses				
d Property distributions				
e Repayment of loans from shareholders				

Other Information

17a Investment income				
b Investment expenses				
c Dividend distributions paid from E & P				
d Income (loss)	-2,785.	78,716.	-81,501.	-103.54

S Corporation Five Year Tax History

2015

► Keep for your records

Name as Shown on Return				Employer Identification No.	
DALE'S PROPERTIES & INVESTMENTS, INC.				65-0639916	
	2011	2012	2013	2014	2015
1 Gross receipts			99,989.	207,628.	
2 Cost of sales					
3 Gross profit			99,989.	207,628.	
4 Net 4797 gain (loss)					
5 Other income (loss)					107,980.
6 Total income (loss)			99,989.	207,628.	107,980.
7 Salaries					
8 Depreciation			47,923.	29,091.	56,197.
9 Other deductions			154,892.	99,821.	54,568.
10 Total deductions			-202,815.	-128,912.	-110,765.
11 Business income			-102,826.	78,716.	-2,785.
12 Passive investment income					
13 Passive investment expense					
14 Net passive investment income					
15 Excess net passive income tax					
16 Tax from Schedule D					
17 Additional taxes					
18 Tax liability					

IRS e-file Authentication Statement

2015

► Keep for your records

Name(s) Shown on Return DALE'S PROPERTIES & INVESTMENTS, INC.	Employer ID Number 65-0639916
---	---

A – Practitioner PIN Authorization

Please indicate how the taxpayer(s) PIN(s) are entered into the program.

Officer(s) entered PIN(s)	☒
ERO entered Officer's PIN	☐

B – Signature of Electronic Return Originator

ERO Declaration:

I declare that the information contained in this electronic tax return is the information furnished to me by the corporation. If the corporation furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the corporation. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury, I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

I am signing this Tax Return by entering my PIN below.

ERO's PIN (EFIN followed by any 5 numbers)	EFIN	883340	Self-Select PIN	82045
--	------	--------	-----------------	-------

C – Signature of Officer

Perjury Statement:

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2015 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete.

Consent to Disclosure:

I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) and acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Electronic Funds Withdrawal Consent (if applicable):

I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's Federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my self-selected PIN below.

Officer's PIN	82045
Date	03/12/2016

Electronic Filing Information Worksheet

► Keep for your records

2015

Name(s) shown on return

DALE'S PROPERTIES & INVESTMENTS, INC.

Identifying number

65-0639916

Part I – State Electronic Filing:Check this box to force state only filing for all states selected to be filed electronically ☐**Part II – Electronic Return Originator Information**

The ERO Information below will automatically calculate based on the preparer code entered on the return.

For returns that are prepared as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP)

enter the EFIN for the ERO that is responsible for this return ► 883340

For returns that are marked as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP)

enter a PIN for the ERO that is responsible for filing return ►

ERO Name

John A Partica Jr

ERO Electronic Filers Identification Number (EFIN)

883340

ERO Address

2175 W Southern Ave Lot 159

ERO Employer Identification Number

27-0819416

City

Apache Junction

State

AZ

ZIP Code

85120

ERO Social Security Number or PTIN

Country

Part III – Paid Preparer Information

Firm Name

DRJ 1040 NV, INC.

Preparer Social Security Number or PTIN

P00234749

Preparer Name

John A Partica

Employer Identification Number

27-0819416

Address

5303 East Twain Ave #156

Phone Number

(888) 677-9445

Fax Number

(888) 677-9445

City

Las Vegas

State

NV

ZIP Code

89122

Country

Preparer E-mail Address

Part IV – Amended Returns

Enter the payment date to withdraw tax payment ►

Amount you are paying with the amended return ►

☐ Check this box to file another federal amended return electronically☐ File another Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically☐ Check this box to file another state and/or city amended return electronically

* Select the state and/or city amended return(s) to file electronically.

State/City *	
☐	California State S Corporation
☐	Georgia State S Corporation
☐	Maryland State S Corporation
☐	Massachusetts State S Corporation
☐	Michigan Business Tax
☐	New Jersey State S Corporation
☐	New Jersey State Fiscal S Corporation
☐	New Jersey State Corporation
☐	New Jersey State Fiscal Corporation
☐	New York State S Corporation
☐	New York State Corporation
☐	New York City Corporation
☐	North Carolina State S Corporation
☐	STMT

Part V – Name Control

Name Control, enter here to override default DALE

Form 1120S, Page 1, Line 5

Other Income (Loss)

6 month rental @ \$4500.00=	27,000.
FTL (MUD)	80,980.
Total	107,980.

Schedule K Reconciliation

Pro Rata Share Items

Lines 1 thru 18

Shareholder	-1- Ordinary Income	-15a- Deprec. Adjust.	-18- Total Income		
Dale Saunders (100.00%)	-2,785	0	-2,785		
Total	<u>-2,785</u>	<u>0</u>	<u>-2,785</u>		

Supporting Statement of:

Two Year Comparison/Line 10 - prior year

Description	Amount
EVICTIION COSTS	3,100.
Total	<u>3,100.</u>

DO NOT FILE

Electronic Info Wks

Amended Returns

☐	<u>Pennsylvania State S Corporation</u>
☐	<u>Tennessee State Corporation</u>
☐	<u>Vermont State S Corporation</u>
☐	<u>Virginia State S Corporation</u>
☐	<u>West Virginia State S Corporation</u>
☐	<u>Wisconsin Non-Combined Corporation</u>
☐	<u>Wisconsin State S Corporation</u>

DO NOT FILE

Form 1120S p1-2: Income Tax Return for an S Corporation

Taxes and Licenses Smart Worksheet

A	State franchise or income taxes	150.
B	Local property taxes	20,084.
C 1	Payroll taxes	
2	Less: Credit from Form 8846	
D	Other miscellaneous taxes	
E	Licenses	
F	Built-In Gains tax allocated to ordinary income — SEE TAX HELP	
	Click here → Enter amount from tax allocation wks here	

Form 1120S p1-2: Income Tax Return for an S Corporation

Depreciation Smart Worksheet

A	To enter assets, QuickZoom to Asset Entry Worksheet	→
B	To view a calculated report of all depreciation information, QuickZoom to Depreciation Reports.	→
C	QuickZoom to Form 4562	→
	Total Depreciation	56,197.
	Depreciation claimed on Form 1125-A and elsewhere on return.	

Form 1120S p3-5: Income Tax Return for an S Corporation

Schedule M-1 Smart Worksheet

To use optional M-1 items worksheet, **QuickZoom** here →
 Program will complete Schedule M-1, lines 2 through 8, from entries on M-1 items worksheet.

Computed Net Income (Loss) per books

A	Income (loss) per return from Schedule K, line 18	-2,785.
B	Income item tax/book differences from M-1 items worksheet	
C	Expense item tax/book differences from M-1 items worksheet	
D	Net tax/book differences (combine lines B and C)	
E	Computed net income (loss) per books (combine lines A and D)	-2,785.
F	Use amount on line E for Schedule M-1, line 1? ☒ Yes ☐ No	

Form 7004: Application for Automatic Extension

Filing Address Smart Worksheet

Minimum information needed to determine filing address:

Enter two letter state abbreviation for location of principal business, office, or agency. → FL

If this return is for a Corporation, an S Corporation, or a Partnership then, are total assets at the end of the tax year \$10 million or more? (If Fiduciary, answer 'No') → ☐ Yes ☒ No

Send Form 7004 to: Filed electronically - do not mail

Cincinnati, OH 45999-0045

August 27, 2016

Dale Saunders
4351 NW 101St Dr
Pompano Beach, FL 33065

Dear Dale Saunders,

Enclosed is your 2015 Schedule K-1 (Form 1120S), Shareholder's Share of Income, Credits, Deductions, etc., which has been filed with the 2015 Form 1120S U.S. Income Tax Return for an S Corporation for DALE'S PROPERTIES & INVESTMENTS, INC..

The amounts reported to you on lines 1-17 of the Schedule K-1 (Form 1120S), Shareholder's Share of Income, Credits, Deductions, etc., represent your share of income, credits, deductions, and other information to be reported on the appropriate lines of your tax return. The IRS uses codes on some lines of the Schedule K-1 to identify the item and provide reporting information. These codes are identified on page 2 of the K-1.

Should you have any questions regarding this information, please do not hesitate to call.

Sincerely,

DALE'S PROPERTIES & INVESTMENTS, INC.
5604 NW 108th Terr.
Pompano Beach, FL 33076

Schedule M-1 Items Worksheet

Schedule M-1 Display Options Smart Worksheet

Display book and tax return amounts on Schedule M-1 ☐

Display only difference amounts on Schedule M-1 ☒

Schedule M-1 Items Worksheet

Book Depreciation and Amortization Options Smart Worksheet

Are depreciation and amortization for book purposes the same
as depreciation and amortization for tax purposes? ☐ Yes ☒ No

If No, enter book amounts below ☐

Schedule M-1 Items Worksheet

Computed Net Income (Loss) Per Books Smart Worksheet

A Income(loss) per return (Schedule K, line 18) -2,785.

B Income item tax/book differences

C Expense item tax/book differences

D Net tax/book differences (combine lines B and C)

E Computed net income (loss) per books (combine lines A and D) -2,785.

Schedule M-2 / Retained Earnings Wks

Schedule M-2/Retained Earnings Memo Smart Worksheet**E&P memo information:**

A Dividends paid out of E&P

B Ending balance in Earnings and Profits account

Retained Earnings memo information:

C Beginning balance in Retained Earnings from Schedule L, Line 24, column b -24,110.

D Plus Net Income (Loss) -2,785.

E Less Dividends and Distributions

F Ending balance in Retained Earnings to Schedule L, Line 24, column d -26,895.

G Distributions in excess of Retained Earnings

Form **1120S****U.S. Income Tax Return for an S Corporation**

OMB No. 1545-0123

2016Department of the Treasury
Internal Revenue Service▶ Do not file this form unless the corporation has filed or is
attaching Form 2553 to elect to be an S corporation.▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

For calendar year 2016 or tax year beginning

, and ending

A Selection effective date 02/11/1996	Name DALE'S PROPERTIES & INVESTMENTS, INC.	D Employer identification number 65-0639916
B Business activity code number (see instructions) 531120	Number, street, and room or suite no. If a P.O. box, see instructions. 250 WEST SUNRISE BOULEVARD	E Date incorporated 02/11/1996
C Check if Sch. M-3 attached ☐	City or town, state or province, country, and ZIP or foreign postal code FORT LAUDERDALE, FL 33311	F Total assets (see instructions) \$ 2,825,101.

G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filedH Check if: (1) ☐ Final return (2) ☐ Name change (3) ☒ Address change (4) ☐ Amended return (5) ☐ S election termination or revocationI Enter the number of shareholders who were shareholders during any part of the tax year **1****Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.**

Income	1 a Gross receipts or sales	b Return and allowances	c Bal. Subtract line 1b from line 1a	1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
	5 Other income (loss) (attach statement)			5
	6 Total income (loss). Add lines 3 through 5			6
Deductions (See instructions for limitations)	7 Compensation of officers (see instrs. - attach Form 1125-E)			7
	8 Salaries and wages (less employment credits)			8
	9 Repairs and maintenance			9
	10 Bad debts			10
	11 Rents			11
	12 Taxes and licenses	STATEMENT 1		12 9,433.
	13 Interest			13 13,519.
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14 2,220.
	15 Depletion (Do not deduct oil and gas depletion.)			15
	16 Advertising			16
	17 Pension, profit-sharing, etc., plans			17
	18 Employee benefit programs			18
	19 Other deductions (attach statement)	STATEMENT 2		19 563.
	20 Total deductions. Add lines 7 through 19			20 25,735.
	21 Ordinary business income (loss). Subtract line 20 from line 6			21 -25,735.
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a		22c
	b Tax from Schedule D (Form 1120S)	22b		
	c Add lines 22a and 22b			
	23 a 2016 estimated tax payments and 2015 overpayment credited to 2016	23a		23d
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c			23d
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached			24
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed			25
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid			26
27 Enter amount from line 26 Credited to 2017 estimated tax		Refunded	27	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer **PRESIDENT** Date

May the IRS discuss this return with the preparer shown below (see instr.)?

☒ Yes ☐ No

Print/Type preparer's name EDWARD F. SMITH III, JD	Preparer's signature 	Date 1/26/17	Check if self-employed ☐	PTIN P01086155
Firm's name MORRISON, BROWN, ARGIZ & FARRA, LLC	Firm's EIN 01-0720052	Phone no. (561) 909-2100		
Firm's address 225 NE MIZNER BLVD., SUITE 685 BOCA RATON, FL 33432				

JWA For Paperwork Reduction Act Notice, see separate instructions.

Form **1120S** (2016)

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) ☒ Cash (b) ☐ Accrual (c) ☐ Other (specify) _____						
2 See the instructions and enter the: (a) Business activity REAL ESTATE (b) Product or service RESIDENT & COMMERC						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation _____					X	
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below _____					X	
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below _____					X	
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? _____ If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock _____						
(ii) Total shares of non-restricted stock _____						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? _____ If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year _____						
(ii) Total shares of stock outstanding if all instruments were executed _____						
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide info. on any reportable transaction? _____						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ☐ _____ If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years _____ \$ _____						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year _____ \$ _____						
10 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000 _____ b The corporation's total assets at the end of the tax year were less than \$250,000 _____ If "Yes," the corporation is not required to complete Schedules L and M-1						X
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? _____ If "Yes," enter the amount of principal reduction _____ \$ _____						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions _____						X
13a Did the corporation make any payments in 2016 that would require it to file Form(s) 1099? _____						X
b If "Yes," did the corporation file or will it file all required Forms 1099? _____						

Form 1120S (2016)

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-25,735.
	2 Net rental real estate income (loss) (attach Form 8825) STATEMENT 3	2	133,849.
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶	12c(2)	
	(2) Amount ▶	12d	
Credits	d Other deductions (see instructions) Type ▶		
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
Foreign Transactions	g Other credits (see instructions) Type ▶	13g	
	14a Name of country or U.S. possession ▶	14b	
	b Gross income from all sources	14c	
	c Gross income sourced at shareholder level		
	Foreign gross income sourced at corporate level	14d	
	d Passive category	14e	
	e General category	14f	
	f Other (attach statement)		
	Deductions allocated and apportioned at shareholder level	14g	
	g Interest expense	14h	
	h Other		
	Deductions allocated and apportioned at corporate level to foreign source income	14i	
	i Passive category	14j	
	j General category	14k	
k Other (attach statement)			
Other information	14l		
l Total foreign taxes (check one): ☐ Paid ☐ Accrued	14m		
m Reduction in taxes available for credit (attach statement)			
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	343.
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i	18	108,114.

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		103,255.		465,349.
2 a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10 a	Buildings and other depreciable assets	1,645,983.		1,693,557.	
b	Less accumulated depreciation	56,197.	1,589,786.	148,305.	1,545,252.
11 a	Depletable assets				
b	Less accumulated depletion				242,000.
12	Land (net of any amortization)				
13 a	Intangible assets (amortizable only)				
b	Less accumulated amortization				572,500.
14	Other assets (att. stmt.)	STATEMENT 4			2,825,101.
15	Total assets		1,693,041.		
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				47,577.
18	Other current liabilities (att. stmt.)	STATEMENT 5			
19	Loans from shareholders				187,942.
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				1,000.
22	Capital stock		1,000.		2,507,363.
23	Additional paid-in capital		1,718,936.		81,219.
24	Retained earnings	STATEMENT 6	-26,895.		
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock		()		()
27	Total liabilities and shareholders' equity		1,693,041.		2,825,101.

JWA

Form 1120S (2016)

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books	108,114.	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):			
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14l (itemize): a Depreciation \$ b Travel and entertainment \$		6 Deductions included on Schedule K, lines 1 through 12 and 14l, not charged against book income this year (itemize): a Depreciation \$	
4 Add lines 1 through 3	108,114.	7 Add lines 5 and 6	
		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	108,114.

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-26,895.		
2 Ordinary income from page 1, line 21			
3 Other additions STATEMENT 7	133,849.		
4 Loss from page 1, line 21	(25,735.)		
5 Other reductions	()	()	
6 Combine lines 1 through 5	81,219.		
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	81,219.		

JWA

Form 1120S (2016)

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

OMB No. 1545-1186

▶ See instructions on page 2.
▶ Attach to Form 1065, Form 1065-B, or Form 1120S.

Name **DALE'S PROPERTIES & INVESTMENTS, INC.** Employer identification number **65 0639916**

1 Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A 100 NW 8 STREET FORT LAUDERDALE, FL 33311	2	365	
B 2070 BRAMAN AVENUE FORT MYERS, FL 33901	2	365	
C 300 W SUNRISE BOULEVARD FORT LAUDERDALE, FL 33311	4	365	
D			

		Properties			
		A	B	C	D
Rental Real Estate Income					
2 Gross rents	2	85,637.	133,765.	153,679.	
Rental Real Estate Expenses					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5	3,863.	2,520.	6,124.	
6 Commissions	6				
7 Insurance	7	6,382.	5,830.	19,423.	
8 Legal and other professional fees	8	650.	2,910.	1,500.	
9 Interest	9				
10 Repairs	10	24,605.	18,600.	17,827.	
11 Taxes	11	11,289.	17,192.		
12 Utilities	12	5,374.	7,378.	7,292.	
13 Wages and salaries	13				
14 Depreciation (see instructions)	14	14,236.	11,945.	26,620.	
15 Other (list) ▶ STMT 8	15	9,731.			
SEE STATEMENT 9			14,424.		
SEE STATEMENT 10				3,517.	
16 Total expenses for each property. Add lines 3 through 15	16	76,130.	80,799.	82,303.	
17 Income or (Loss) from each property. Subtract line 16 from line 2	17	9,507.	52,966.	71,376.	
18a Total gross rents. Add gross rents from line 2, columns A through H	18a				373,081.
b Total expenses. Add total expenses from line 16, columns A through H	18b				(239,232.)
19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19				
20a Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a				
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed:					
(1) Name	(2) Employer identification number				
21 Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on:	21				133,849.
• Form 1065 or 1120S: Schedule K, line 2, or					
• Form 1065-B: Part I, line 4					

1 Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days
E			
F			
G			
H			

		Properties			
		E	F	G	H
Rental Real Estate Income					
2	Gross rents				
Rental Real Estate Expenses					
3	Advertising				
4	Auto and travel				
5	Cleaning and maintenance				
6	Commissions				
7	Insurance				
8	Legal and other professional fees				
9	Interest				
10	Repairs				
11	Taxes				
12	Utilities				
13	Wages and salaries				
14	Depreciation (see instructions)				
15	Other (list) ▶				
16	Total expenses for each property. Add lines 3 through 15				
17	Income or (Loss) from each property. Subtract line 16 from line 2				

Allowable Codes for Type of Property

- 1 - Single Family Residence
- 2 - Multi-Family Residence
- 3 - Vacation or Short-Term Rental
- 4 - Commercial
- 5 - Land
- 6 - Royalties
- 7 - Self-Rental
- 8 - Other (include description with the code on Form 8825 or on a separate statement)

Form 8825 (12-2010)

JWA

Depreciation and Amortization
(Including Information on Listed Property) **OTHER**
▶ Attach to your tax return.

OMB No. 1545-0172

2016

Attachment
Sequence No. 179

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

DALE'S PROPERTIES & INVESTMENTS, INC.

OTHER DEPRECIATION

65-0639916

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	501.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	1,647.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2016 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		501.	7 YRS.	HY	200DB	72.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	2,220.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

26 Property used more than 50% in a qualified business use:

	:	:	%					
	:	:	%					
	:	:	%					

27 Property used 50% or less in a qualified business use:

	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	------------------------------	------------------------	---	--------------------------------------

42 Amortization of costs that begins during your 2016 tax year:

	:	:			
	:	:			

43 Amortization of costs that began before your 2016 tax year **43**

44 Total. Add amounts in column (f). See the instructions for where to report **44**

2016 DEPRECIATION AND AMORTIZATION REPORT

OTHER DEPRECIATION

OTHER

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
13	COMPUTERS	05/15/15	200DB	5.00		HY17	3,388.				3,388.	678.		1,084.	1,762.
14	FURNITURE	05/15/15	200DB	7.00		HY17	2,300.				2,300.	329.		563.	892.
20	DESK	01/15/16	200DB	7.00		HY19C	1,002.			501.	501.			573.	72.
	* TOTAL OTHER DEPRECIATION						6,690.			501.	6,189.	1,007.		2,220.	2,726.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						5,688.		0.	0.	5,688.	1,007.			2,654.
	ACQUISITIONS						1,002.		0.	501.	501.	0.			72.
	DISPOSITIONS						0.		0.	0.	0.	0.			0.
	ENDING BALANCE						6,690.		0.	501.	6,189.	1,007.			2,726.

628111 04-01-16

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

COMMERCIAL - 300 W SUNRISE BOULEVARD

R- 3

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
5	BUILDING	05/15/15	SL	39.00		MM17	940,500.				940,500.	10,767.		24,115.	34,882.
6	LAND	05/15/15	L				104,500.				104,500.			0.	
7	IMPROVEMENTS	05/15/15	150DB	15.00		HY17	26,367.				26,367.	1,318.		2,505.	3,823.
	* TOTAL RENTAL DEPRECIATION						1,071,367.				1,071,367.	12,085.		26,620.	38,705.

628111 04-01-16

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

MULTI-FAMILY RESIDENCE - 100 NW 8 STRE

R- 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	BUILDING	12/28/11	SL	27.50	MM	17	391,500.				391,500.	42,756.		14,236.	56,992.
2	LAND	12/28/11	L				43,500.				43,500.			0.	
	* TOTAL RENTAL DEPRECIATION						435,000.				435,000.	42,756.		14,236.	56,992.

628111 04-01-16

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

MULTI-FAMILY RESIDENCE - 2070 BRAMAN A

R--

2

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
3	BUILDING	06/23/09	SL	27.50	MM	17	328,500.				328,500.	37,436.		11,945.	49,381.
4	LAND	06/23/09	L				36,500.				36,500.			0.	
	* TOTAL RENTAL DEPRECIATION						365,000.				365,000.	37,436.		11,945.	49,381.

628111 04-01-16

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Dale's Properties & Investments, Inc.
250 West Sunrise Boulevard
Fort Lauderdale, FL 33311

Employer Identification Number: 65-0639916

For the Year Ending December 31, 2016

Dale's Properties & Investments, Inc. is making the de minimis
safe harbor election under Reg. Sec. 1.263(a)-1(f).

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
DESCRIPTION		AMOUNT	
PROPERTY TAXES		9,433.	
TOTAL TO FORM 1120S, PAGE 1, LINE 12		9,433.	

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
DESCRIPTION		AMOUNT	
INSURANCE EXPENSE		563.	
TOTAL TO FORM 1120S, PAGE 1, LINE 19		563.	

SCHEDULE K	NET RENTAL REAL ESTATE INCOME (LOSS)	STATEMENT	3
DESCRIPTION	INCOME	EXPENSES	NET AMOUNT
COMMERCIAL - 300 W SUNRISE BOULEVARD	153,679.	82,303.	71,376.
MULTI-FAMILY RESIDENCE - 100 NW 8 STREET	85,637.	76,130.	9,507.
MULTI-FAMILY RESIDENCE - 2070 BRAMAN AVENUE	133,765.	80,799.	52,966.
TOTAL NET AMOUNT TO SCHEDULE K, LINE 2	373,081.	239,232.	133,849.

SCHEDULE L	OTHER ASSETS	STATEMENT	4
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
INVESTMENT REAL ESTATE		572,500.	
TOTAL TO SCHEDULE L, LINE 14		572,500.	

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT	5
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
DUE TO - DALE'S WHEELS AND TIRES, INC		47,577.	
TOTAL TO SCHEDULE L, LINE 18		47,577.	

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	6
DESCRIPTION		AMOUNT	
BALANCE AT BEGINNING OF YEAR		-26,895.	
NET INCOME PER BOOKS		108,114.	
DISTRIBUTIONS		0.	
OTHER INCREASES (DECREASES)			
BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)		81,219.	

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT - OTHER ADDITIONS	STATEMENT	7
DESCRIPTION		AMOUNT	
NET RENTAL REAL ESTATE INCOME		133,849.	
TOTAL TO SCHEDULE M-2, LINE 3 - COLUMN (A)		133,849.	

	OTHER RENTAL EXPENSES	STATEMENT	8
--	-----------------------	-----------	---

MULTI-FAMILY RESIDENCE

PROPERTY: 100 NW 8 STREET
LOCATION: 100 NW 8 STREET, FORT LAUDERDALE, FL 33311

DESCRIPTION	AMOUNT
BANK CHARGES	34.
LICENSES AND PERMITS	364.
MANAGEMENT FEES	8,000.
SMALL APPLIANCES	1,333.
TOTAL TO RENTAL SCHEDULE, LINE 15	9,731.

OTHER RENTAL EXPENSES

STATEMENT 9

MULTI-FAMILY RESIDENCE

PROPERTY: 2070 BRAMAN AVENUE

LOCATION: 2070 BRAMAN AVENUE, FORT MYERS, FL 33901

DESCRIPTION

AMOUNT

BANK CHARGES

51.

LICENSES AND PERMITS

50.

OFFICE SUPPLIES

862.

MANAGEMENT FEES

13,000.

SMALL APPLIANCES

461.

TOTAL TO RENTAL SCHEDULE, LINE 15

14,424.

OTHER RENTAL EXPENSES

STATEMENT 10

COMMERCIAL

PROPERTY: 300 W SUNRISE BOULEVARD

LOCATION: 300 W SUNRISE BOULEVARD, FORT LAUDERDALE, FL 33311

DESCRIPTION

AMOUNT

BANK CHARGES

68.

INTERNET AND TELEPHONE

3,228.

OFFICE SUPPLIES

221.

TOTAL TO RENTAL SCHEDULE, LINE 15

3,517.

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No.	Description	Date Acquired	AMT Method	AMT Life	AMT Cost Or Basis	AMT Accumulated	Regular Depreciation	AMT Depreciation	AMT Adjustment
13	COMPUTERS	051515	150DB	5.00	3,388.	508.	1,084.	864.	220.
14	FURNITURE	051515	150DB	7.00	2,300.	246.	563.	440.	123.
20	DESK	011516	200DB	7.00	1,002.	0.	573.	573.	0.
1	BUILDING	122811	SL	27.50	391,500.	57,539.	14,236.	14,236.	0.
3	BUILDING	062309	SL	27.50	328,500.	78,143.	11,945.	11,945.	0.
5	BUILDING	051515	SL	39.00	940,500.	15,072.	24,115.	24,115.	0.
7	IMPROVEMENTS	051515	150DB	15.00	26,367.	1,318.	2,505.	2,505.	0.
	TOTALS				1,693,557.	152,826.	55,021.	54,678.	343.
	MACRS AMT ADJUSTMENT							343.	

Schedule K-1
(Form 1120S)

Department of the Treasury
Internal Revenue Service

For calendar year 2016, or tax
year beginning _____
ending _____

2016

☐ Final K-1

☐ Amended K-1

OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) -25,735.	13	Credits
2	Net rental real estate inc (loss) 133,849.		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured sec 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15 A	Alternative min tax (AMT) items 343.
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information
*See attached statement for additional information.			

Shareholder's Share of Income, Deductions, Credits, etc. ▶ See separate instructions.

► See separate instructions.

Part I Information About the Corporation

A	Corporation's employer identification number 65-0639916
B	Corporation's name, address, city, state, and ZIP code DALE'S PROPERTIES & INVESTMENTS, INC. 250 WEST SUNRISE BOULEVARD FORT LAUDERDALE, FL 33311
C	IRS Center where corporation filed return E-FILE

Part II Information About the Shareholder

D	Shareholder's identifying number	
	592-12-5349	
E	Shareholder's name, address, city, state and ZIP code	
	DALE SAUNDERS	
	5604 NW 108 TERRACE	
	CORAL SPRINGS, FL 33076	
F	Shareholder's percentage of stock ownership for tax year	100.000000%

For IRS Use Only

*See attached statement for additional information.

Schedule of Activities

For calendar year 2016, or tax year beginning _____, 2016, and ending _____.

Name: **DALE'S PROPERTIES & INVESTMENTS, INC.**

I.D. Number: **65-0639916**

For: **DALE SAUNDERS**

592-12-5349

Description of Activity	Activity Number	100% Disposed	Publicly Traded Partnership	Type Code *	Description
	1			2	100 NW 8 STREET
	2			2	2070 BRAMAN AVENUE
	3			4	300 W SUNRISE BOULEVARD

	Activity - 1	Activity - 2	Activity - 3
Ordinary business income (loss)			
Net rental real estate income (loss)	9,507.	52,966.	71,376.
Other net rental income (loss)			
Interest income			
Dividends - Ordinary dividends			
- Qualified dividends			
Royalties			
Net short-term capital gain (loss)			
Net long-term capital gain (loss)			
- Collectibles (28%) gain (loss)			
- Unrecaptured Section 1250 gain			
Net section 1231 gain (loss)			
Other portfolio income			
Section 1256 contracts and straddles			
Other income			
Section 179 deduction			
Charitable contributions			
Portfolio deductions			
Investment interest expense			
Section 59(e)(2) expenditures			
Other deductions			
Net earnings from self-employment			
Gross farming or fishing income			
Gross nonfarm income			
LIH credit - Section 42(j)(5) partnerships			
- Other			
Qualified rehabilitation expenditures related to rental real estate			
Other rental credits			
Credits related to other rental activities			
Recapture of LIH credit - Section 42(j)(5) partnerships			
- Other			
Other credits			
Post-1986 depreciation adjustment			
Adjusted gain or loss			
Portion of adjusted gain/loss allocable to short-term gain/loss			
Portion of adjusted gain/loss allocable to long-term gain/loss			
Portion of adjusted gain/loss allocable to section 1231 gain/loss			
Depletion (other than oil and gas)			
Oil, gas and geothermal properties - gross income			
Oil, gas and geothermal properties - deductions			
Other AMT items			
Investment income			
Investment expenses			

- * 1 - Single Family Residence 5 - Land
 2 - Multi-Family Residence 6 - Royalties
 3 - Vacation or Short-Term Rental 7 - Self-Rental
 4 - Commercial 8 - Other

**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**
▶ File a separate application for each return.

OMB No. 1545-0233

▶ Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.

Print or Type	Name	Identifying number
	DALE'S PROPERTIES & INVESTMENTS, INC.	65-0639916
	Number, street, and room or suite no. (If P.O. box, see instructions.)	
	250 WEST SUNRISE BOULEVARD	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).	
	FORT LAUDERDALE, FL 33311	

Note: File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic Extension for C Corporations With Tax Years Ending December 31. See instructions.

1a Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part II Automatic Extension for Certain Estates and Trusts. See instructions.

b Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1041 (estate other than a bankruptcy estate)	04	Form 1041 (trust)	05

Part III Automatic Extension for Entities Not Using Part I, II, or IV. See instructions.

c Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065	09	Form 1120-SF	26
Form 1065-B	10	Form 3520-A	27
Form 1066	11	Form 8612	28
Form 1120	12	Form 8613	29
Form 1120-C	34	Form 8725	30
Form 1120-F	15	Form 8804	31
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

Part IV Automatic Extension for C Corporations With Tax Years Ending June 30. See instructions.

d Enter the form code for the return listed below that this application is for

Application Is For:	Form Code	Application Is For:	Form Code
Form 1120	12	Form 1120-ND (section 4951 taxes)	20
Form 1120-C	34	Form 1120-PC	21
Form 1120-F	15	Form 1120-POL	22
Form 1120-FSC	16	Form 1120-REIT	23
Form 1120-H	17	Form 1120-RIC	24
Form 1120-L	18	Form 1120-SF	26
Form 1120-ND	19		

Part V All Filers Must Complete This Part

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐
If checked, attach a statement listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐
- 5a The application is for calendar year 2016, or tax year beginning _____, and ending _____
- b **Short tax year.** If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (see instructions - attach explanation)

6	Tentative total tax	6	0.
7	Total payments and credits (see instructions)	7	0.
8	Balance due. Subtract line 7 from line 6 (see instructions)	8	0.

Form 7004 (Rev. 12-2016)

For the year Jan. 1–Dec. 31, 2014, or other tax year beginning _____, 2014, ending _____, 20

Your first name and initial **Dale** Last name **Saunders** See separate instructions.
Your social security number **[REDACTED]**

If a joint return, spouse's first name and initial **Linda** Last name **Dupoux** Spouse's social security number **[REDACTED]**

Home address (number and street). If you have a P.O. box, see instructions. **4351 NW 101st Dr** Apt. no. **[REDACTED]**
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **Pompano Beach FL 33065**

Foreign country name _____ Foreign province/state/county _____ Foreign postal code _____

▲ Make sure the SSN(s) above and on line 6c are correct.

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status

1 ☐ Single

2 ☒ Married filing jointly (even if only one had income)

3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶

4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 ☐ Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a

b ☒ Spouse

c **Dependents:**

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ☒ if child under age 17 qualifying for child tax credit (see instructions)
[REDACTED]				
[REDACTED]				
[REDACTED]				
[REDACTED]				

If more than four dependents, see instructions and check here ☐

d Total number of exemptions claimed

Boxes checked on 6a and 6b
No. of children on 6c who:
• lived with you
• did not live with you due to divorce or separation (see instructions)
Dependents on 6c not entered above
Add numbers on lines above ▶ **[REDACTED]**

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 **7** **81,090.**

8a Taxable interest. Attach Schedule B if required **8a** **43.**

b Tax-exempt interest. Do not include on line 8a **8b** **30,180.**

9a Ordinary dividends. Attach Schedule B if required **9a** **5,379.**

b Qualified dividends **9b** **4,867.**

10 Taxable refunds, credits, or offsets of state and local income taxes **10**

11 Alimony received **11**

12 Business income or (loss). Attach Schedule C or C-EZ **12** **14,949.**

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ **13** **109,941.**

14 Other gains or (losses). Attach Form 4797 **14**

15a IRA distributions **15a** **15b**

16a Pensions and annuities **16a** **16b**

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E **17** **196,383.**

18 Farm income or (loss). Attach Schedule F **18**

19 Unemployment compensation **19**

20a Social security benefits **20a** **20b**

21 Other income. List type and amount **21**

22 Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶ **22** **407,785.**

Adjusted Gross Income

23 Educator expenses **23**

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ **24**

25 Health savings account deduction. Attach Form 8889 **25**

26 Moving expenses. Attach Form 3903 **26**

27 Deductible part of self-employment tax. Attach Schedule SE **27** **1,057.**

28 Self-employed SEP, SIMPLE, and qualified plans **28**

29 Self-employed health insurance deduction **29**

30 Penalty on early withdrawal of savings **30**

31a Alimony paid b Recipient's SSN ▶ **31a**

32 IRA deduction **32**

33 Student loan interest deduction **33**

34 Tuition and fees. Attach Form 8917 **34**

35 Domestic production activities deduction. Attach Form 8903 **35**

36 Add lines 23 through 35 **36** **1,057.**

37 Subtract line 36 from line 22. This is your **adjusted gross income** ▶ **37** **406,728.**

www.irs.gov/form1040

SCHEDULE B
(Form 1040A or 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074

2014

Attachment
Sequence No. **08**

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040A or 1040.
▶ Information about Schedule B and its instructions is at www.irs.gov/scheduleb.

Name(s) shown on return

Your social security number

Dale Saunders & Linda Dupoux

Part I

Interest

(See instructions on back and the instructions for Form 1040A, or Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions on back and list this interest first. Also, show that buyer's social security number and address ▶
BOA
Kinder Morgan Energy Partners, LP
- 2 Add the amounts on line 1
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

Amount

41.
2.

1

2

3

4

43.

43.

Note. If line 4 is over \$1,500, you must complete Part III.

Amount

Part II

Ordinary Dividends

(See instructions on back and the instructions for Form 1040A, or Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 5 List name of payer ▶ Wells Fargo
Wells Fargo
Kinder Morgan Energy Partners, LP
- 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

2,985.
2,392.
2.

5

6

5,379.

Note. If line 6 is over \$1,500, you must complete Part III.

Part III
Foreign Accounts and Trusts

(See instructions on back.)

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2014, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
- If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements
- b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶
- 8 During 2014, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back

Yes No

X

X

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

Information about Schedule C and its separate instructions is at www.irs.gov/schedulec.
Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2014

Attachment
Sequence No. 09

Name of proprietor
Dale Saunders

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)
Tires

B Enter code from instructions

4 4 1 3 0 0

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN), (see instr.)

E Business address (including suite or room no.) **4351 NW 101st Dr**
City, town or post office, state, and ZIP code **Pompano Beach, FL 33065**

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) **▶**

G Did you "materially participate" in the operation of this business during 2014? If "No," see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2014, check here ☐

I Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

J If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐	1	36,000.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	36,000.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	36,000.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	36,000.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8 Advertising	8		18 Office expense (see instructions)	18	
9 Car and truck expenses (see instructions)	9		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest: SEE STMT			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a	6,211.	a Travel	24a	
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17		25 Utilities	25	
			26 Wages (less employment credits)	26	
			27a Other expenses (from line 48)	27a	15,600.
			b Reserved for future use	27b	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a	28	21,811.			
29 Tentative profit or (loss). Subtract line 28 from line 7	29	14,189.			
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30				
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	14,189.			
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a ☐ All investment is at risk. 32b ☐ Some investment is not at risk.		

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation 35
36	Purchases less cost of items withdrawn for personal use 36
37	Cost of labor. Do not include any amounts paid to yourself 37
38	Materials and supplies 38
39	Other costs 39
40	Add lines 35 through 39 40
41	Inventory at end of year 41
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 42

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶ _____
44	Of the total number of miles you drove your vehicle during 2014, enter the number of miles you used your vehicle for:
a	Business _____
b	Commuting (see instructions) _____
c	Other _____
45	Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No
46	Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No
47a	Do you have evidence to support your deduction? ☐ Yes ☐ No
b	If "Yes," is the evidence written? ☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8–26 or line 30.

Out of pocket expenses for corporations	15,600.
48 Total other expenses. Enter here and on line 27a	48 15,600.

SCHEDULE C-EZ
(Form 1040)

Net Profit From Business
(Sole Proprietorship)

OMB No. 1545-0074

2014
Attachment
Sequence No. **09A**

Department of the Treasury
Internal Revenue Service (99)

► Partnerships, joint ventures, etc., generally must file Form 1065 or 1065-B.
► Attach to Form 1040, 1040NR, or 1041. ► See instructions on page 2.

Name of proprietor

Linda Dupoux

Social security number (SSN)

[REDACTED]

Part I General Information

**You May Use
Schedule C-EZ
Instead of
Schedule C
Only If You:**

- Had business expenses of \$5,000 or less.
- Use the cash method of accounting.
- Did not have an inventory at any time during the year.
- Did not have a net loss from your business.
- Had only one business as either a sole proprietor, qualified joint venture, or statutory employee.

And You:

- Had no employees during the year.
- Are not required to file **Form 4562**, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, to find out if you must file.
- Do not deduct expenses for business use of your home.
- Do not have prior year unallowed passive activity losses from this business.

A Principal business or profession, including product or service
comission

B Enter business code (see page 2)

9 9 9 9 9 9

C Business name. If no separate business name, leave blank.

D Enter your EIN (see page 2)

E Business address (including suite or room no.). Address not required if same as on page 1 of your tax return.

4351 NW 101st Dr

City, town or post office, state, and ZIP code

Pompano Beach, FL 33065

F Did you make any payments in 2014 that would require you to file Form(s) 1099? (see the Schedule C instructions)

☐ Yes ☒ No

G If "Yes," did you or will you file required Forms 1099?

☐ Yes ☐ No

Part II Figure Your Net Profit

1 Gross receipts. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see <i>Statutory employees</i> in the instructions for Schedule C, line 1, and check here	☐	1	760.
2 Total expenses (see page 2). If more than \$5,000, you must use Schedule C		2	
3 Net profit. Subtract line 2 from line 1. If less than zero, you must use Schedule C. Enter on both Form 1040, line 12, and Schedule SE, line 2, or on Form 1040NR, line 13 and Schedule SE, line 2 (see instructions). (Statutory employees do not report this amount on Schedule SE, line 2.) Estates and trusts, enter on Form 1041, line 3		3	760.

Part III Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 2.

4 When did you place your vehicle in service for business purposes? (month, day, year) ►

5 Of the total number of miles you drove your vehicle during 2014, enter the number of miles you used your vehicle for:

a Business **b** Commuting (see page 2) **c** Other

6 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

7 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

8a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

SCHEDULE D
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2014Attachment
Sequence No. **12**

Name(s) shown on return

Dale Saunders & Linda Dupoux

Your social security number

Part I Short-Term Capital Gains and Losses—Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 .				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7

Part II Long-Term Capital Gains and Losses—Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	1,440,637.	1,343,036.		97,601.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13 12,340.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back				15 109,941.

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	109,941.
• If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.		
17 Are lines 15 and 16 both gains? ☒ Yes. Go to line 18. ☐ No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions . . . ▶	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions . . . ▶	19	46.
20 Are lines 18 and 19 both zero or blank? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below. ☒ No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) }	21	()
Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). ☐ No. Complete the rest of Form 1040 or Form 1040NR.		

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Dale Saunders & Linda Dupoux

Social security number or taxpayer identification number

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☐ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Wells Fargo statement mixed	various	12/13/14	34,247.	33,656.			591.
	Wells Fargo statement mixed	various	12/31/14	1,406,390.	1,309,380.			97,010.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				1,440,637.	1,343,036.			97,601.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/schedulee.

OMB No. 1545-0074

2014

Attachment
Sequence No. **13**

Name(s) shown on return

Dale Saunders & Linda Dupoux

Your social security number

Part I **Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

B If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

1a Physical address of each property (street, city, state, ZIP code)

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days		QJV
			A	B	A	B	
A	6						☐
B							☐
C							☐

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received	3			
4 Royalties received	4	3 .		
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20			
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	3 .		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	() () ()		
23a Total of all amounts reported on line 3 for all rental properties	23a			
b Total of all amounts reported on line 4 for all royalty properties	23b	3 .		
c Total of all amounts reported on line 12 for all properties	23c			
d Total of all amounts reported on line 18 for all properties	23d			
e Total of all amounts reported on line 20 for all properties	23e			
24 Income. Add positive amounts shown on line 21. Do not include any losses	24			3 .
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	()		
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			3 .

For Paperwork Reduction Act Notice, see the separate instructions.

BAA REV 12/31/14 PRO

Schedule E (Form 1040) 2014

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

Dale Saunders & Linda Dupoux

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is **not** at risk, you **must** check the box in column (e) on line 28 and attach **Form 6198**. See instructions.

- 27 Are you reporting any loss not allowed in a prior year due to the at-risk, excess farm loss, or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section. ☐ Yes ☒ No

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	Kinder Morgan Energy Partners, LP	P	☐	76-0380342	☐
B	PTP-Enterprisde Products Partners LP	P	☐	76-0568219	☐
C	PTP-Oneok Partners, LP	P	☐	93-1120873	☐
D	See line 28 information		☐		☐

Passive Income and Loss			Nonpassive Income and Loss		
	(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A	0.				
B	0.				
C	0.				
D					196,380.
29a Totals					196,380.
b Totals	0.				
30 Add columns (g) and (j) of line 29a				30	196,380.
31 Add columns (f), (h), and (i) of line 29b				31	(0.)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32	196,380.

Part III Income or Loss From Estates and Trusts

33		(a) Name		(b) Employer identification number	
A					
B					
Passive Income and Loss				Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1		(e) Deduction or loss from Schedule K-1	
(f) Other income from Schedule K-1					
A					
B					
34a	Totals				
b	Totals				
35	Add columns (d) and (f) of line 34a				35
36	Add columns (c) and (e) of line 34b				36 ()
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below				37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) — Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39	

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18 ▶	41	196,383.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code V; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

SCHEDULE SE
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Self-Employment Tax**► Information about Schedule SE and its separate instructions is at www.irs.gov/schedulese.

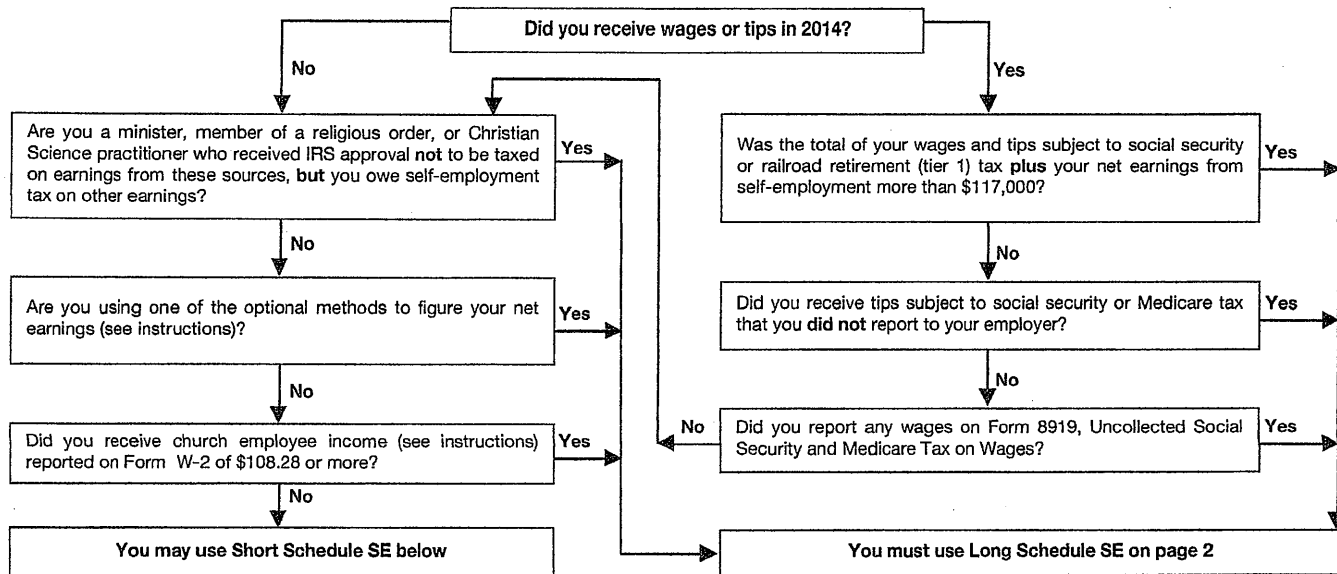
► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2014
Attachment
Sequence No. **17**

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR)

Dale Saunders

Social security number of person
with self-employment income ►**Before you begin:** To determine if you must file Schedule SE, see the instructions.**May I Use Short Schedule SE or Must I Use Long Schedule SE?****Note.** Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* in the instructions.**Section A—Short Schedule SE. Caution.** Read above to see if you can use Short Schedule SE.

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b ()	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report	2	14,189.
3 Combine lines 1a, 1b, and 2	3	14,189.
4 Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b ► Note. If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4	13,104.
5 Self-employment tax. If the amount on line 4 is: • \$117,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 57, or Form 1040NR, line 55 • More than \$117,000, multiply line 4 by 2.9% (.029). Then, add \$14,508 to the result. Enter the total here and on Form 1040, line 57, or Form 1040NR, line 55	5	2,005.
6 Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	6	1,003.

For Paperwork Reduction Act Notice, see your tax return instructions. **BAA**

REV 10/29/14 PRO

Schedule SE (Form 1040) 2014

**SCHEDULE SE
(Form 1040)**

Self-Employment Tax

OMB No. 1545-0074

2014

Attachment
Sequence No. **17**

Department of the Treasury
Internal Revenue Service (99)

► Information about Schedule SE and its separate instructions is at www.irs.gov/schedulese.

► Attach to Form 1040 or Form 1040NR.

Name of person with self-employment income (as shown on Form 1040 or Form 1040NR)

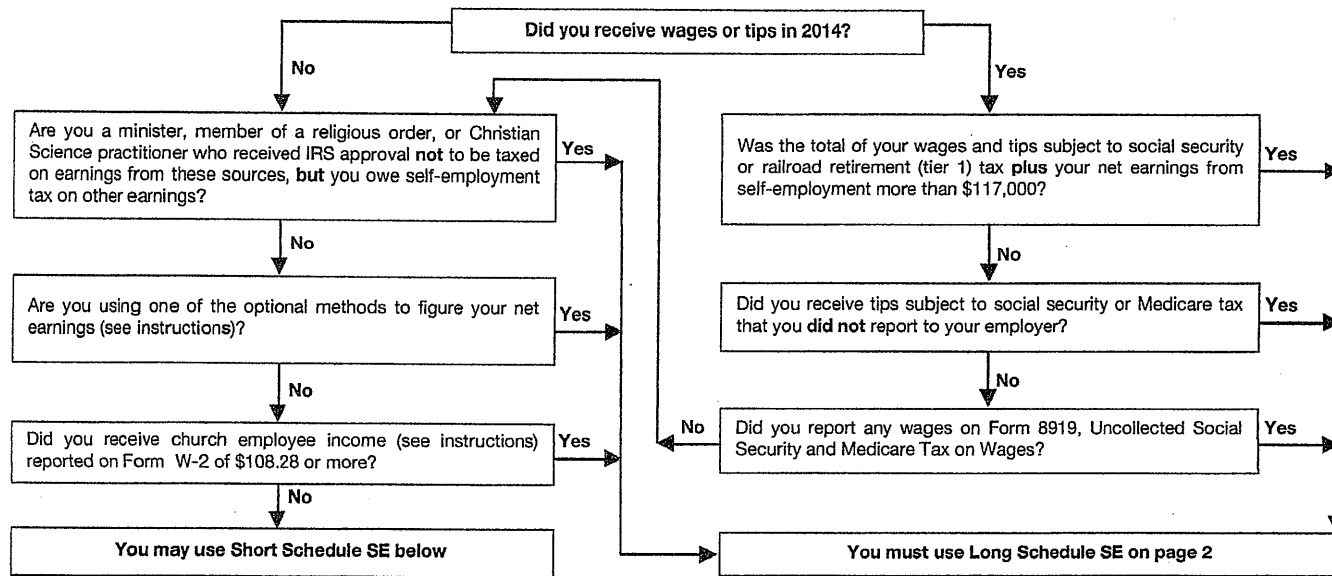
Social security number of person
with self-employment income ►

Linda Dupoux

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* in the instructions.



Section A—Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b	()
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report	2	760.
3	Combine lines 1a, 1b, and 2	3	760.
4	Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b ►	4	702.
Note.	If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
5	Self-employment tax. If the amount on line 4 is: • \$117,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 57, or Form 1040NR, line 55 • More than \$117,000, multiply line 4 by 2.9% (.029). Then, add \$14,508 to the result. Enter the total here and on Form 1040, line 57, or Form 1040NR, line 55	5	107.
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	6	54.

Department of the Treasury
Internal Revenue Service (99)► Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.

► Attach to Form 1040 or Form 1040NR.

2014
Attachment
Sequence No. **32**

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

Dale Saunders & Linda Dupoux

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	406,728.
2	Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3	Taxes from Schedule A (Form 1040), line 9	3	
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If Form 1040, line 38, is \$152,525 or less, enter -0-. Otherwise, see instructions	6	(0.)
7	Tax refund from Form 1040, line 10 or line 21	7	()
8	Investment interest expense (difference between regular tax and AMT)	8	
9	Depletion (difference between regular tax and AMT)	9	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11	Alternative tax net operating loss deduction	11	()
12	Interest from specified private activity bonds exempt from the regular tax	12	
13	Qualified small business stock (7% of gain excluded under section 1202)	13	0.
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	0.
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	0.
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	()
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$242,450, see instructions.)	28	406,728.

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2014, see instructions.) IF your filing status is . . . AND line 28 is not over . . . THEN enter on line 29 . . . Single or head of household . . . \$117,300 . . . \$52,800 Married filing jointly or qualifying widow(er) . . . 156,500 . . . 82,100 Married filing separately . . . 78,250 . . . 41,050 If line 28 is over the amount shown above for your filing status, see instructions.	29	19,543.
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	387,185.
31	• If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 64 here. • All others: If line 30 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result.	31	89,842.
32	Alternative minimum tax foreign tax credit (see instructions)	32	318.
33	Tentative minimum tax. Subtract line 32 from line 31	33	89,524.
34	Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any foreign tax credit from Form 1040, line 48. If you used Schedule J to figure your tax on Form 1040, line 44, refigure that tax without using Schedule J before completing this line (see instructions)	34	84,116.
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35	5,408.

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions for line 31	36	387,185.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	114,762.
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	46.
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 37. Otherwise, add lines 37 and 38, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	114,808.
40	Enter the smaller of line 36 or line 39	40	114,808.
41	Subtract line 40 from line 36	41	272,377.
42	If line 41 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result ▶	42	72,616.
43	Enter: • \$73,800 if married filing jointly or qualifying widow(er), • \$36,900 if single or married filing separately, or • \$49,400 if head of household.	43	73,800.
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0-. If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	44	276,722.
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.
46	Enter the smaller of line 36 or line 37	46	114,762.
47	Enter the smaller of line 45 or line 46. This amount is taxed at 0%	47	0.
48	Subtract line 47 from line 46	48	114,762.
49	Enter: • \$406,750 if single • \$228,800 if married filing separately • \$457,600 if married filing jointly or qualifying widow(er) • \$432,200 if head of household	49	457,600.
50	Enter the amount from line 45	50	0.
51	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0-. If you are filing Form 2555 or Form 2555-EZ, see instructions for the amount to enter	51	276,676.
52	Add line 50 and line 51	52	276,676.
53	Subtract line 52 from line 49. If zero or less, enter -0-	53	180,924.
54	Enter the smaller of line 48 or line 53	54	114,762.
55	Multiply line 54 by 15% (.15) ▶	55	17,214.
56	Add lines 47 and 54	56	114,762.
	If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.		
57	Subtract line 56 from line 46	57	0.
58	Multiply line 57 by 20% (.20) ▶	58	0.
	If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.		
59	Add lines 41, 56, and 57	59	387,139.
60	Subtract line 59 from line 36	60	46.
61	Multiply line 60 by 25% (.25) ▶	61	12.
62	Add lines 42, 55, 58, and 61	62	89,842.
63	If line 36 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result	63	104,762.
64	Enter the smaller of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	64	89,842.

**Net Investment Income Tax—
Individuals, Estates, and Trusts**

OMB No. 1545-2227

2014Attachment
Sequence No. **72**Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Information about Form 8960 and its separate instructions is at www.irs.gov/form8960.

Name(s) shown on your tax return

Your social security number or EIN

Dale Saunders & Linda Dupoux

Part I Investment Income

- ☐ Section 6013(g) election (see instructions)
☐ Section 6013(h) election (see instructions)
☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)		1	43.
2	Ordinary dividends (see instructions)		2	5,379.
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a 196,383.		
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b -196,380.		
c	Combine lines 4a and 4b		4c	3.
5a	Net gain or loss from disposition of property (see instructions)	5a 109,941.		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		5d	109,941.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)		6	
7	Other modifications to investment income (see instructions)		7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	115,366.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions)	9b		
c	Miscellaneous investment expenses (see instructions)	9c		
d	Add lines 9a, 9b, and 9c		9d	
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13–17. Estates and trusts complete lines 18a–21. If zero or less, enter -0-		12	115,366.
Individuals:				
13	Modified adjusted gross income (see instructions)	13 406,728.		
14	Threshold based on filing status (see instructions)	14 250,000.		
15	Subtract line 14 from line 13. If zero or less, enter -0-	15 156,728.		
16	Enter the smaller of line 12 or line 15		16	115,366.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and include on your tax return (see instructions)		17	4,384.
Estates and Trusts:				
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here and include on your tax return (see instructions)		21	

Passive Activity Loss Limitations

OMB No. 1545-1008

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1041.

▶ Information about Form 8582 and its instructions is available at www.irs.gov/form8582.**2014**Attachment
Sequence No. **88**

Name(s) shown on return

Dale Saunders & Linda Dupoux

Identifying number

Part I 2014 Passive Activity Loss**Caution:** Complete Worksheets 1, 2, and 3 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** in the instructions.)**1a** Activities with net income (enter the amount from Worksheet 1, column (a))**1a****b** Activities with net loss (enter the amount from Worksheet 1, column (b))**1b** ()**c** Prior years unallowed losses (enter the amount from Worksheet 1, column (c))**1c** ()**d** Combine lines 1a, 1b, and 1c**1d****Commercial Revitalization Deductions From Rental Real Estate Activities****2a** Commercial revitalization deductions from Worksheet 2, column (a)**2a** ()**b** Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)**2b** ()**c** Add lines 2a and 2b**2c** ()**All Other Passive Activities****3a** Activities with net income (enter the amount from Worksheet 3, column (a))**3a** 0.**b** Activities with net loss (enter the amount from Worksheet 3, column (b))**3b** (50.)**c** Prior years unallowed losses (enter the amount from Worksheet 3, column (c))**3c** ()**d** Combine lines 3a, 3b, and 3c**3d**

-50.

4 Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used**4**

-50.

If line 4 is a loss and:

• Line 1d is a loss, go to Part II.

• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.**Part II Special Allowance for Rental Real Estate Activities With Active Participation****Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.**5** Enter the **smaller** of the loss on line 1d or the loss on line 4**5****6** Enter \$150,000. If married filing separately, see instructions**6****7** Enter modified adjusted gross income, but not less than zero (see instructions)**7****Note:** If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.**8** Subtract line 7 from line 6**8****9** Multiply line 8 by 50% (.5). **Do not** enter more than \$25,000. If married filing separately, see instructions**9****10** Enter the **smaller** of line 5 or line 9**10**

0.

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities**Note:** Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.**11** Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions**11****12** Enter the loss from line 4**12****13** Reduce line 12 by the amount on line 10**13****14** Enter the **smallest** of line 2c (treated as a positive amount), line 11, or line 13**14****Part IV Total Losses Allowed****15** Add the income, if any, on lines 1a and 3a and enter the total**15**

0.

16 **Total losses allowed from all passive activities for 2014.** Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return**16**

0.

Caution: The worksheets must be filed with your tax return. Keep a copy for your records.

Worksheet 1 – For Form 8582, Lines 1a, 1b, and 1c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶					

Worksheet 2 – For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b ▶			

Worksheet 3 – For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
Kinder Morgan Energy Partners, LP	0.	50.			50.
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶	0.	50.			

Worksheet 4 – Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total ▶			1.00		

Worksheet 5 – Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Kinder Morgan Energy Partners, LP	Various	50.	1.00000000	50.
Total ▶		50.	1.00	50.

Worksheet 6—Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
Total				

Worksheet 7—Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Kinder Morgan Energy Partners, LP					
Form or schedule and line number to be reported on (see instructions): E Ln 28A					
1a Net loss plus prior year unallowed loss from form or schedule ▶	44 .				
b Net income from form or schedule ▶	0 .				
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶		44 .	0.88000000	44 .	0 .
Form or schedule and line number to be reported on (see instructions): 4797 Pt I					
1a Net loss plus prior year unallowed loss from form or schedule ▶	6 .				
b Net income from form or schedule ▶	0 .				
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶		6 .	0.12000000	6 .	0 .
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total ▶		50 .	1.00	50 .	0 .

Line 16a

Mortgage Interest on Form 1098

Nationstar Mortgage loan #0611818576 Business DalesWheels

Continuation Statement

Partnership and S Corporations										Continuation Statement
	Name	Code	Foreign	EIN	Not At Risk	Passive Loss Allowed Amt	Passive Income Amt	Nonpassive Loss Amt	Sec 179 Expense Dedn Amt	Nonpassive Income Amt
D	Dale's Wheel's & Tires, Inc.	S		27-1032492						117,664.
E	Dale's Properties & Investments	S		65-0639916						78,716.
Total										196,380.

For the year Jan. 1-Dec. 31, 2015, or other tax year beginning						, 2015, ending		, 20		See separate instructions.	
Your first name and initial Dale				Last name Saunders				Your social security number [REDACTED]			
If a joint return, spouse's first name and initial Linda				Last name Dupoux				Spouse's social security number [REDACTED]			
Home address (number and street). If you have a P.O. box, see instructions. 5604 NW 108 Terr.								Apt. no.		▲ Make sure the SSN(s) above and on line 6c are correct.	
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Coral Springs FL 33076								Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse			
Foreign country name				Foreign province/state/country				Foreign postal code			
Filing Status											
1 ☐ Single											
2 ☒ Married filing jointly (even if only one had income)											
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶											
4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶											
5 ☐ Qualifying widow(er) with dependent child											
Exemptions											
6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a											
b ☒ Spouse											
c Dependents:											
(i) First name		Last name		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)					
[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]					
[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]					
[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]					
[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]					
d Total number of exemptions claimed											
Income											
7 Wages, salaries, tips, etc. Attach Form(s) W-2											
8a Taxable interest. Attach Schedule B if required											
b Tax-exempt interest. Do not include on line 8a 8b [REDACTED]											
9a Ordinary dividends. Attach Schedule B if required											
b Qualified dividends 9b 12,910.											
10 Taxable refunds, credits, or offsets of state and local income taxes											
11 Alimony received											
12 Business income or (loss). Attach Schedule C or C-EZ											
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐											
14 Other gains or (losses). Attach Form 4797											
15a IRA distributions 15a [REDACTED] b Taxable amount 15b [REDACTED]											
16a Pensions and annuities 16a [REDACTED] b Taxable amount 16b [REDACTED]											
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E											
18 Farm income or (loss). Attach Schedule F											
19 Unemployment compensation											
20a Social security benefits 20a [REDACTED] b Taxable amount 20b [REDACTED]											
21 Other income. List type and amount											
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶											
23 Educator expenses 23 [REDACTED]											
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24 [REDACTED]											
25 Health savings account deduction. Attach Form 8889 25 [REDACTED]											
26 Moving expenses. Attach Form 3903 26 [REDACTED]											
27 Deductible part of self-employment tax. Attach Schedule SE 27 9,413.											
28 Self-employed SEP, SIMPLE, and qualified plans 28 [REDACTED]											
29 Self-employed health insurance deduction 29 [REDACTED]											
30 Penalty on early withdrawal of savings 30 [REDACTED]											
31a Alimony paid b Recipient's SSN ▶ 31a [REDACTED]											
32 IRA deduction 32 [REDACTED]											
33 Student loan interest deduction 33 [REDACTED]											
34 Tuition and fees. Attach Form 8917 34 [REDACTED]											
35 Domestic production activities deduction. Attach Form 8903 35 [REDACTED]											
36 Add lines 23 through 35 36 9,413.											
37 Subtract line 36 from line 22. This is your adjusted gross income 37 463,022.											

ITEM VIII

SISTRUNK OFF-STREET PARKING

[illegible]

Plan



Lot 1: NW 19th Ave Budget

Design:

Engineering Permit Design	\$ 15,000.00
---------------------------	--------------

Construction:

NW 19 th Ave	\$220,000.00
-------------------------	--------------

Management (Est. 10%)	\$ 22,000.00
-----------------------	--------------

Total:	<u>\$257,000.00</u>
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Cost not included:

- Permitting Fees for both Engineering permit and Construction Permit
- Construction Management Cost may varies
- Construction Cost may varies due to changes in design from different agency comments



Lot 1: NW 19th Ave

Time Line

Design:

Engineering Permit Design

3 months

Bid Phase:

Advertise, Vendor and Award

2 months

Construction:

Duration

6 months

Inspection:

Duration

1 month

Total:

12 months

Cost not included:

- Permitting time frame may be differ



CITY OF FORT LAUDERDALE

Central Beach Alliance Concept Plan

Plan



Lot 2: NW 17th Ave Budget

Design:

Engineering Permit Design	\$ 15,000.00
---------------------------	--------------

Construction:

NW 17 th Ave	\$345,000.00
-------------------------	--------------

Management (Est. 10%)	\$ 34,500.00
-----------------------	--------------

Total:	<u>\$394,500.00</u>
--------	---------------------

Cost not included:

- Permitting Fees for both Engineering permit and Construction Permit
- Construction Management Cost may varies
- Construction Cost may varies due to changes in design from different agency comments



Lot 2: NW 17th Ave

Time Line

Design:

Engineering Permit Design

3 months

Bid Phase:

Advertise, Vendor and Award

2 months

Construction:

Duration

6 months

Inspection:

Duration

1 month

Total:

12 months

Cost not included:

- Permitting time frame may be differ



CITY OF FORT LAUDERDALE

Central Beach Alliance Concept Plan

12' ALLEY



Lot 3: NW 12th Ave Budget

Design:

Engineering Permit Design	\$ 15,000.00
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Construction:

NW 19 th Ave	\$286,000.00
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Management (Est. 10%)	\$ 28,600.00
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Total:	<u>\$329,600.00</u>
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Cost not included:

- Permitting Fees for both Engineering permit and Construction Permit
- Construction Management Cost may varies
- Construction Cost may varies due to changes in design from different agency comments



Lot 3: NW 12th Ave

Time Line

Design:

Engineering Permit Design

3 months

Bid Phase:

Advertise, Vendor and Award

2 months

Construction:

Duration

6 months

Inspection:

Duration

1 month

Total:

12 months

Cost not included:

- Permitting time frame may be differ



CITY OF FORT LAUDERDALE

Central Beach Alliance Concept Plan

ITEM IX

DRAFT RFP RIVER GARDENS

SECTION I – INTRODUCTION AND INFORMATION

1.1 Purpose

The Fort Lauderdale Community Redevelopment Agency (CRA) is seeking proposals from qualified and, experienced Proposers or real estate developers (sometimes referred to as “Developers” or “Proposer”) to construct single family detached homes on a total of twelve lots in the River Gardens neighborhood on CRA owned property in the Northwest Progresso Flagler Heights Community Redevelopment Area (NPF CRA), in accordance with the terms, conditions, and specifications contained in this Request for Proposals (RFP) issued by the City of Fort Lauderdale on behalf of the CRA.

1.2 Submission Deadline

Sealed proposals shall be delivered during the City’s normal business hours in a sealed envelope and addressed to the City of Fort Lauderdale Procurement Services Division, 100 N. Andrews Avenue, #619, Fort Lauderdale, FL 33301 (City Hall) no later than the date and time specified, at which time and place the proposals will be publicly opened and the names of the firms will be read. After the deadline, proposals will not be accepted. Proposers are responsible for making certain that their proposal is received at the location specified by the due date and time. Neither the City of Fort Lauderdale nor CRA is responsible for delays caused by any mail, package or courier service, including the U.S. mail, or caused by any other occurrence or condition. The City’s normal business hours are Monday through Friday, 8:00 a.m. through 5:00 p.m. excluding holidays observed by the City.

1.3 Pre-proposal Conference and Site Visit

There will be a pre-proposal conference scheduled for this Request for Proposal. It is strongly suggested that all Proposers attend the pre-proposal conference.

It will be the sole responsibility of the Proposer to attend the pre-proposal conference to inspect the property available for development of single family homes and all information attached hereto prior to submitting a proposal. No variation in price or conditions shall be permitted based upon a claim of ignorance. Submission of a proposal will be considered evidence that the proposer has familiarized themselves with the nature and extent of the work, equipment, materials, and labor required.

1.4 BidSync

The City of Fort Lauderdale uses BidSync (www.bidsync.com) to administer the competitive solicitation process, including but not limited to soliciting proposals, issuing addenda, posting results and issuing notification of an intended decision. There is no charge to register and download the RFP from BidSync. Proposers are strongly encouraged to read the various vendor Guides and Tutorials available in BidSync well in advance of their intention of submitting a proposal to ensure familiarity with the use of BidSync. The City shall not be responsible for a Proposers inability to submit a Proposal by the end date and time for any reason, including issues arising from the use of BidSync.

1.5 Point of Contact

For information concerning [procedures for responding to this solicitation](#), contact Senior Procurement Specialist AnnDebra Diaz at (954) 828-5949 or email at adiaz@fortlauderdale.gov. Such contact shall be for clarification purposes only.

For information concerning technical specifications, please utilize the question and answer feature provided by BidSync at www.bidsync.com. Questions of a material nature must be received prior to the cut-off date specified in the RFP Schedule. Material changes, if any, to the scope of services or bidding procedures will only be transmitted by written addendum. (See addendum section of BidSync Site). Proposers please note: Proposals shall be submitted as stated in PART IV – Submittal Requirements. No part of your proposal can be submitted via FAX. No variation in price or conditions shall be permitted based upon a claim of ignorance. Submission of a proposal will be considered evidence that the Proposer has familiarized themselves with the nature and extent of the work, and the equipment, materials, and labor required. The entire proposal must be submitted in accordance with all specifications contained in this solicitation. The questions and answers submitted in BidSync shall become part of any contract that is created from this RFP.

END OF SECTION

SECTION II - SPECIAL TERMS AND CONDITIONS

2.1 General Conditions

RFP General Conditions (Form G-107, Rev. 02/15) are included and made a part of this RFP.

2.2 Addenda, Changes, and Interpretations

It is the sole responsibility of each firm to notify the Buyer utilizing the question / answer feature provided by BidSync and request modification or clarification of any ambiguity, conflict, discrepancy, omission or other error discovered in this competitive solicitation. Requests for clarification, modification, interpretation, or changes must be received prior to the Question and Answer (Q & A) Deadline. Requests received after this date may not be addressed. Questions and requests for information that would not materially affect the scope of services to be performed or the solicitation process will be answered within the question / answer feature provided by BidSync and shall be for clarification purposes only. Material changes, if any, to the scope of services or the solicitation process will only be transmitted by official written addendum issued by the City and uploaded to BidSync as a separate addendum to the RFP. Under no circumstances shall an oral explanation given by any City official, officer, staff, or agent be binding upon the City and should be disregarded. All addenda are a part of the competitive solicitation documents and each firm will be bound by such addenda. It is the responsibility of each to read and comprehend all addenda issued.

2.3 Changes and Alterations

Proposer may change or withdraw a Proposal at any time prior to Proposal submission deadline; however, no oral modifications will be allowed. Modifications shall not be allowed following the Proposal deadline.

2.4 Proposer's Costs

The City shall not be liable for any costs incurred by proposers in responding to this RFP.

2.5 Pricing/Delivery (Not applicable)

2.6 Invoices/Payment (Not applicable)

2.7 Related Expenses/Travel Expenses (Not applicable)

2.8 Payment Method (Not applicable)

2.9 Mistakes

The Proposer shall examine this RFP carefully. The submission of a Proposal shall be prima facie evidence that the Proposer has full knowledge of the scope, nature, and quality of the work to be performed; the detailed requirements of the specifications; and the conditions under which the work is to be performed. Ignorance of the requirements will not relieve the Proposer from liability and obligations under the Contract.

2.10 Acceptance of Proposals / Minor Irregularities

2.10.1 The City reserves the right to accept or reject any or all proposals, part of proposals, and to waive minor irregularities or variances to specifications contained in proposals which do not make the proposal conditional in nature and minor irregularities in the solicitation process. A minor irregularity shall be a variation from the solicitation that does not affect the price of the contract or does not give a respondent an advantage or benefit not enjoyed by other respondents, does not adversely impact the interests of

other firms or, does not affect the fundamental fairness of the solicitation process. The City also reserves the right to reissue a Request for Proposal.

2.10.2 The City reserves the right to disqualify Proposer during any phase of the competitive solicitation process and terminate for cause any resulting contract upon evidence of collusion with intent to defraud or other illegal practices on the part of the Proposer.

2.11 Modification of Services (Not applicable)

2.12 No Exclusive Contract

Proposer agrees and understands that the contract shall not be construed as an exclusive arrangement and further agrees that the City or the CRA may, at any time, secure similar or identical services from another vendor at the City's or CRA's sole option.

2.13 Sample Contract Agreement

A sample of the formal agreement template, which may be required to be executed by the awarded vendor can be found at our website:

<http://fortlauderdale.gov/purchasing/general/contractsample021412.pdf>

2.14 Responsiveness

In order to be considered responsive to the solicitation, the Proposer's proposal shall fully conform in all material respects to the solicitation and all of its requirements, including all form and substance.

2.15 Responsibility

In order to be considered as a responsible Proposer, Proposer shall be fully capable to meet all of the requirements of the solicitation and subsequent contract, must possess the full capability, including financial and technical, to perform as contractually required, and must be able to fully document the ability to provide good faith performance.

2.16 Minimum Qualifications

Proposers shall be in the business of home building as a licensed contractor or real estate developer and must possess sufficient financial support, equipment and organization to ensure that it can satisfactorily perform the services if awarded a Contract. Proposers must demonstrate that they, or the key staff assigned to the project, have successfully provided services with similar magnitude to those specified in the scope of services to at least one entity similar in size and complexity to the City of Fort Lauderdale or can demonstrate they have the experience with large scale private sector clients and the managerial and financial ability to successfully perform the work.

Proposers shall satisfy each of the following requirements cited below. Failure to do so may result in the proposal being deemed non-responsive.

2.16.1 Proposer's firm or principals shall have relevant experience in new construction, marketing and sales of single family homes in the State of Florida. Project manager assigned to the work must have experience in new construction, marketing and sale of single family homes in the State of Florida and have served as project manager on similar projects.

2.16.2 Before awarding a contract, the City or CRA reserves the right to require that a Proposer submit such evidence of qualifications as the City or CRA may deem

necessary. Further, the City or CRA may consider any evidence of the financial, technical, and other qualifications and abilities of a firm or principals, including previous experiences of same with the City and performance evaluation for services, in making the award in the best interest of the City.

2.16.3 Proposer's firm or principals shall have no record of judgments, pending lawsuits against the City or CRA or criminal activities involving moral turpitude and not have any conflicts of interest that have not been waived by the City Commission or the CRA Board of Commissioners.

2.16.4 Neither Proposer's firm nor any principal, officer, or stockholder shall be in arrears or in default of any debt or contract involving the City or CRA, (as a party to a contract, or otherwise); nor have failed to perform faithfully on any previous contract with the City or CRA.

2.17 Lobbying Activities

ALL PROPOSERS PLEASE NOTE: Any Proposer submitting a response to this solicitation must comply, if applicable, with City of Fort Lauderdale Ordinance No. C-11-42 & Resolution No. 07-101, Lobbying Activities. Copies of Ordinance No. C-11-42 and Resolution No. 07-101 may be obtained from the City Clerk's Office on the 7th Floor of City Hall, 100 N. Andrews Avenue, Fort Lauderdale, Florida. The ordinance may also be viewed on the City's website at <http://www.fortlauderdale.gov/home/showdocument?id=6036>.

2.18 Local Business Preference

2.18.1 Section 2-186, Code of Ordinances of the City of Fort Lauderdale, provides for a local business preference. In order to be considered for a local business preference, a proposer must include the Local Business Preference Certification Statement of this RFP, as applicable to the local business preference class claimed at the time of Proposal submittal:

2.18.2 Upon formal request of the City, based on the application of a Local Business Preference the Proposer shall within ten (10) calendar days submit the following documentation to the Local Business Preference Class claimed:

- a. Copy of City of Fort Lauderdale current year business tax receipt, or Broward County current year business tax receipt, and
- b. List of the names of all employees of the proposer and evidence of employees' residence within the geographic bounds of the City of Fort Lauderdale or Broward County, as the case may be, such as current Florida driver license, residential utility bill (water, electric, telephone, cable television), or other type of similar documentation acceptable to the City.

2.18.3 Failure to comply at time of Proposal submittal shall result in the Proposer being found ineligible for the local business preference.

2.18.4 The complete local business preference ordinance may be found on the City's web site at the following link: <http://fortlauderdale.gov/home/showdocument?id=6422>

2.18.5 Definitions

The term "Business" shall mean a person, Proposer, corporation or other business entity which is duly licensed and authorized to engage in a particular work in the State of Florida. Business shall be broken down into four (4) types of classes:

1. Class A Business – shall mean any Business that has established and agrees to maintain a permanent place of business located in a non-residential zone and staffed with full-time employees within the limits of the City and shall maintain a staffing level of the prime Proposer for the proposed work of at least fifty percent (50%) who are residents of the City.
2. Class B Business - shall mean any Business that has established and agrees to maintain a permanent place of business located in a non-residential zone and staffed with full-time employees within the limits of the City or shall maintain a staffing level of the prime Proposer for the proposed work of at least fifty percent (50%) who are residents of the City.
3. Class C Business - shall mean any Business that has established and agrees to maintain a permanent place of business located in a non-residential zone and staffed with full-time employees within the limits of Broward County.
4. Class D Business – shall mean any Business that does not qualify as either a Class A, Class B, or Class C business.

2.19 Protest Procedure

2.19.1 Any Proposer or Bidder who is not recommended for award of a contract and who alleges a failure by the city to follow the city's procurement ordinance or any applicable law may protest to the director of procurement services division (director), by delivering a letter of protest to the director within five (5) days after a notice of intent to award is posted on the city's web site at the following link:
<http://www.fortlauderdale.gov/departments/finance/procurement-services/notices-of-intent-to-award>.

2.19.2 The complete protest ordinance may be found on the city's web site at the following link: <http://www.fortlauderdale.gov/purchasing/protestordinance.pdf>

2.20 Public Entity Crimes

Proposer, by submitting a proposal attests she/he/it has not been placed on the convicted vendor list. A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a proposal on a contract to provide any goods or services to a public entity, may not submit a proposal on a contract with a public entity for the construction or repair of a public building or public work, may not submit proposals on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, Florida Statutes, for Category Two for a period of 36 months from the date of being placed on the convicted vendor list.

2.21 Subcontractors (Not applicable)

2.22 Proposal Security (Not applicable)

2.23 Payment and Performance Bond The Proposer shall furnish a statutory payment and performance bond conforming to Chapter 713 and Section 255.05, Florida Statutes, as applicable, written by a surety acceptable to the City and CRA and project lender in an

amount at least equal to the cost of site work and vertical construction, to be performed by the Developer, guaranteeing the project lender, the City and the CRA, the completion of site work and vertical construction of the Project, as well as full payment of all suppliers, material men, all laborers and subcontractors employed to provide services to complete the project. As an alternative to the Payment and Performance Bond, the Developer may with the consent of the City and CRA, obtain and furnish an irrevocable letter of credit.

2.24 Insurance Requirements

2.24.1 The Proposer shall furnish proof of insurance requirements as indicated below. The coverage is to remain in force at all times during the contract period. The following minimum insurance coverage is required. The City and CRA is to be added as an "additional insured" with relation to General Liability Insurance. This MUST be written in the description section of the insurance certificate, even if you have a check-off box on your insurance certificate. Any costs for adding the City and CRA as "additional insured" will be at the Proposer's expense.

2.24.2 The City of Fort Lauderdale and CRA shall be given notice 10 days prior to cancellation or modification of any stipulated insurance. The insurance provided shall be endorsed or amended to comply with this notice requirement. In the event that the insurer is unable to accommodate, it shall be the responsibility of the Proposer to provide the proper notice. Such notification will be in writing by registered mail, return receipt requested and addressed to the Procurement Services Division.

2.24.3 The Proposer's insurance must be provided by an A.M. Best's "A-" rated or better insurance company authorized to issue insurance policies in the State of Florida, subject to approval by the City's Risk Manager. Any exclusions or provisions in the insurance maintained by the Proposer that precludes coverage for work contemplated in this RFP shall be deemed unacceptable, and shall be considered breach of contract.

Workers' Compensation and Employers' Liability Insurance

Limits: Workers' Compensation – Per Florida Statute 440
Employers' Liability - \$500,000

Any Proposer performing work on behalf of the City of Fort Lauderdale and CRA must provide Workers' Compensation insurance. Exceptions and exemptions will be allowed by the City's Risk Manager, if they are in accordance with Florida Statute. For additional information contact the Department of Financial Services, Workers' Compensation Division at (850) 413-1601 or on the web at www.fldfs.com.

Commercial General Liability Insurance

Covering premises-operations, products-completed operations, independent Proposers and contractual liability.

Limits: Combined single limit bodily injury/property damage \$1,000,000. This coverage must include, but not limited to:

- a.** Coverage for the liability assumed by the Proposer under the indemnity provision of the contract.

- b. Coverage for Premises/Operations
- c. Products/Completed Operations
- d. Broad Form Contractual Liability
- e. Independent Proposers

Automobile Liability Insurance

Covering all owned, hired and non-owned automobile equipment.

Limits: Bodily injury	\$250,000 each person \$500,000 each occurrence
Property damage	\$100,000 each occurrence

Builders Risk

2.24.4 A copy of **ANY** current Certificate of Insurance should be included with your proposal.

2.24.5 In the event that you are the successful Proposer, you will be required to provide a certificate naming the City and Fort Lauderdale Community Redevelopment Agency as an “additional insured” for General Liability. Certificate holder should be addressed as follows:

City of Fort Lauderdale Procurement Services Division 100 N. Andrews Avenue, Room 619 Fort Lauderdale, FL 33301	Fort Lauderdale Community Redevelopment Agency 914 NW 6 th Street, Suite 200 Fort Lauderdale, FL 33311
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2.25 Award of Contract

A Contract (the “Agreement”) may be awarded by the Board of Commissions of the Fort Lauderdale Community Redevelopment Agency (CRA). The CRA reserves the right to execute or not execute, as applicable, a contract with the Developer that is determined to be in the CRA’s best interests. The CRA reserves the right to award a contract to more than one Proposer, at the sole and absolute discretion of the CRA.

2.26 Unauthorized Work

The Successful Developer shall not begin work until a development agreement has been awarded by the CRA.

2.27 Damage to Public or Private Property

Extreme care shall be taken to safeguard all existing facilities, site amenities, irrigation systems, vehicles, etc. on or around the job site. Damage to public and/or private property shall be the responsibility of the Developer and shall be repaired and/or replaced at no additional cost to the City or CRA.

2.28 Safety

The Developer shall adhere to the Florida Department of Transportation’s Uniform manual on Traffic Control for construction and maintenance work zones when working on or near a roadway. It will be the sole responsibility of the Developer to make themselves and their employees fully aware of these provisions, especially those applicable to safety.

2.29 Uncontrollable Circumstances ("Force Majeure")

The CRA and Developer will be excused from the performance of their respective obligations under this agreement when and to the extent that their performance is delayed or prevented by any circumstances beyond their control including, fire, flood, explosion, strikes or other labor disputes, act of God or public emergency, war, riot, civil commotion, malicious damage, act or omission of any governmental authority, delay or failure or shortage of any type of transportation, equipment, or service from a public utility needed for their performance, provided that:

2.29.1 The non performing party gives the other party prompt written notice describing the particulars of the Force Majeure including, but not limited to, the nature of the occurrence and its expected duration, and continues to furnish timely reports with respect thereto during the period of the Force Majeure;

2.29.2 The excuse of performance is of no greater scope and of no longer duration than is required by the Force Majeure;

2.29.3 No obligations of either party that arose before the Force Majeure causing the excuse of performance are excused as a result of the Force Majeure; and

2.29.4 The non performing party uses its best efforts to remedy its inability to perform. Notwithstanding the above, performance shall not be excused under this Section for a period in excess of two (2) months, provided that in extenuating circumstances, the CRA may excuse performance for a longer term. Economic hardship of the Developer will not constitute Force Majeure. The term of the agreement shall be extended by a period equal to that during which either party's performance is suspended under this Section.

2.30 Canadian Companies

The CRA may enforce in the United States of America or in Canada or in both countries a judgment entered against the Developer. The Developer waives any and all defenses to the CRA's enforcement in Canada, of a judgment entered by a court in the United States of America. All monetary amounts set forth in this Contract are in United States dollars.

2.31 News Releases/Publicity

News releases, publicity releases, or advertisements relating to this contract or the tasks or projects associated with the project shall not be made without prior City and CRA approval.

2.32 Manufacturer/Brand/Model Specific Request (Not applicable)

2.33 Contract Period

The contract term shall commence upon date of award by the CRA or upon full execution of a development agreement, whichever is later, and shall expire as provided in the development agreement. The CRA reserves the right to extend the contract providing all terms conditions and specifications remain the same, both parties agree to the extension, and such extension is approved by the CRA.

2.34 Cost Adjustments (Not applicable)

2.35 Service Test Period (Not applicable)

2.36 Contract Coordinator

The CRA may designate a Contract Administrator whose principal duties shall be Liaison to the Developer.

2.37 Proposer Performance Reviews and Ratings (Not applicable)

The City Contract Coordinator may develop a Developer performance evaluation report. This report shall be used to periodically review and rate the Developer's performance under the contract with performance rating as follows:

Excellent	Far exceeds requirements.
Good	Exceeds requirements
Fair	Just meets requirements.
Poor	Does not meet all requirements and contractor is subject to penalty provisions under the contract.
Non-compliance	Either continued poor performance after notice or a performance level that does not meet a significant portion of the requirements. This rating makes the Contractor subject to the default or cancellation for cause provisions of the contract.

The report shall also list all discrepancies found during the review period. The Developer shall be provided with a copy of the report, and may respond in writing if he takes exception to the report or wishes to comment on the report. Developer performance reviews and subsequent reports will be used in determining the suitability of contract extension.

2.38 Substitution of Personnel (Not applicable)

2.39 Insurance for Collection of Credit Card Payments (Not applicable)

2.40 Ownership of Work

The CRA and City shall have full ownership and the right to copyright, otherwise limit, reproduce, modify, sell, or use all of the work or product produced under this contract without payment of any royalties or fees to the Developer above the agreed hourly rates and related costs.

2.41 Condition of Trade-In Equipment (Not applicable)

2.42 Conditions of Trade-In Shipment and Purchase Payment (Not applicable)

2.43 Verification of Employment Status (Not applicable)

2.44 Service Organization Controls (Not applicable)

2.45 Warranties of Usage (Not applicable)

END OF SECTION

SECTION III - TECHNICAL SPECIFICATIONS/SCOPE OF SERVICES

3.1 Purpose:

The purpose of this solicitation is to further the implementation of the Community Redevelopment Plan for the Northwest Progresso Flagler Heights Community - Redevelopment (NPF CRA) Area by providing for the conveyance of certain lots owned by the Fort Lauderdale Community Redevelopment Agency (CRA) to the selected Developer for the development and construction of detached single family homes for sale to Eligible Persons to remove conditions of slum and blight, increase the tax base, enhance the quality of life, improve the aesthetics and useful enjoyment of the redevelopment area and promote the health safety, morals and welfare of the residents of the NPF CRA and the City. The CRA is a distinct legal entity created for the purpose of eliminating slum and blighted conditions within prescribed geographic boundaries and the NPF CRA is a distinct area created pursuant to Chapter 163, Part II Florida Statutes. The Board of Commissioners of the CRA is the City Commission of the City of Fort Lauderdale. The NPF CRA was created in 1995 pursuant to Chapter 163, Part II, Florida Statutes. The CRA is empowered through the Community Redevelopment Act to undertake a broad range of activities designed to eliminate slum and blighted conditions including the purchase and disposition of property and receive incremental ad valorem tax revenues from designated taxing authorities in order to fund its activities. The activities are conducted in accordance with the Community Redevelopment Plan (as amended) for the NPF CRA approved by Resolution 95-170 of the City Commission on November 7, 1995 (**Attachment 18**).

3.2 Objective:

The CRA is soliciting proposals from qualified Developers to participate in the construction of nine to eleven market rate single family detached homes on a total of twelve lots in the Sweeting Estates-River Gardens neighborhood for sale to Eligible Person. The Developer is responsible for implementation of the entire project from planning and development approvals, marketing, qualifying and securing homebuyers, contracting with a homebuyer for construction of a home, permitting and construction of homes, arranging and securing all financing for the project and completing the entire project within 20 months. The CRA will provide marketable title for the twelve lots and offer to Eligible Person under the CRA Purchase Assistance Program (PAP) up to \$45,000 for down payment and closing cost. Eligible Person under the PAP are end buyers with incomes up to 160% area median income. The CRA owned lots will be conveyed to the Developer for construction of homes on speculation or as model homes. The CRA will require protective covenants and restrictions in order that the homes remain single family and to protect and preserve the integrity, environmental quality, and amenities of the development. The CRA owned lots will be conveyed in "As Is" condition, subject only to the terms and conditions for conveyance contained in the development agreement.

The information contained herein is intended to be a general guide for the Developer. The Developer is to use his/her expertise in generating a proposal that is most suitable to this River Garden infill development project. Upon selection, the Developer and the CRA will enter into an agreement with specified development terms and conditions.

3.3 Project Site:

The Project Site is located between NW 22 Avenue and the Florida East Coast Railroad tracks, just north of NW 4th Street. The project site is comprised of nine contiguous platted lots, and one platted lot north of the contiguous lots; and two contiguous platted lots east and

north of the nine contiguous lots; all lots located within the same two block area: Eight lots approximately 50 feet wide by 150 feet deep, one lot approximately 40 feet wide by 150 feet deep, and three lots approximately 50 feet wide by 170 feet deep. The CRA owns all lots within the Project Site. The Project site will be conveyed to the selected Developer as vacant lots in "As Is" condition . The Project site is legally described as follows:

PARCEL 1

Lots 9 through 17 of Block 3 of RIVER GARDENS, according to the Plat thereof, as recorded in Plat Book 19, Page 23 of the Public Records of Broward County, Florida

PARCEL 2

Lot 4 of Block 3 of RIVER GARDENS, according to the Plat thereof, as recorded in Plat Book 19, Page 23 of the Public Records of Broward County, Florida

PARCEL 3

Lot 4 and Lot 5 of Block 1 RIVER GARDENS, according to the Plat thereof, as recorded in Plat Book 19, Page 23 of the Public Records of Broward County, Florida

PARCEL 4

Lots 9, 10, 11, 12, 13, 14, 15, 16 and 17, Block 3, RIVER GARDENS, according to the Plat thereof, as recorded in Plat Book 19, Page 23, of the Public Records of Broward County, Florida.

LOCATION MAP



The Property is owned by the CRA and was appraised by Callaway & Price, Inc. as of July 14, 2017as follows:

Summary of Market Value Conclusions				
Parcel	Address	Property I.D.	Sq.Ft.	Market Value
1	536 NW 21 Terrace	5042-05-07-0021	7,499	\$32,000
2	530 NW 21 Terrace	5042-05-07-0030	7,499	\$32,000
3	431 NW 21 Terrace	5042-05-07-0430	8,499	\$36,000
4	411 NW 21 Terrace	5042-05-07-0480	8,499	
		5042-05-07-0490	7,587	
		5042-05-07-0500	7,544	
		5042-05-07-0510	7,500	
		5042-05-07-0515	5,968	
		5042-05-07-0520	7,421	
		5042-05-07-0530	7,378	
		5042-05-07-0540	6,745	
		<u>5042-05-07-0550</u>	<u>8,499</u>	
		Total	67,141	\$600,000
			(1.54 Acres)	

Please refer to surveys by Exacta Commercial Surveyors, Inc. for square footage of parcels, attached as **Attachments 1, 2, 3 and 4.**

Copies of the appraisal report are attached as **Attachments 5.**

The Property was purchased by the CRA between 2003 and 2004 as improved property at a total cost of \$ 2,450,859, including the purchase price, closing cost, environmental and demolition related charges for each parcel are as follows:

Parcel 1 and 2:	\$415,000 as part of a larger parcel purchase of approx. 28,950 square feet.
Parcel 3:	\$ 131,309
Parcel 4	\$ 1,904,550

When purchased by the CRA, the use of Parcel 1 and 2 was mixed use consisting of retail, warehouse and single family use. The use of Parcel 3 was a duplex and the use of Parcel 4 was a one story 118 bed nursing home facility called Henry's Retirement Center. All sites have since been cleared of surface structures.

Warranty Deeds and existing Title Policies for the sites are attached as **Attachments 6 (Parcel 1 and 2) 7 (Parcel 3) , and 8 (Parcel 4)** Environmental Assessments performed at time of purchase are attached as **Attachments 9 (Phase I Environmental Assessment – Parcel 1 & 2), 10 (Phase II Environmental Assessment – Parcel 1 & 2), 11 (Tank Closure Report – Parcel 1 & 2), 12 (Phase I Environmental Assessment – Parcel 3), 13 (Phase I Environmental Assessment – Parcel 4), 14 (Phase II Environmental Assessment – Parcel 4) and 15 (Tank Closure Report – Parcel 4).**

3.5 Home Construction:

The construction of these homes is a “Turn Key” operation. The selected Developer will be required to submit for a building permit within 90 days following execution of a Development Agreement with the CRA, and close on project financing within 180 days of execution of the Development Agreement, with commence construction within 60 days thereafter and Final Certificates of Occupancy for all homes issued within one year of commencement of construction. The Developer is responsible for completion of every item necessary for a homebuyer to move into their home, including coordination of connection of all utilities to the home. The Developer will be responsible for marketing these homes and contracting with a homebuyers for purchase of these homes.

3.6 Required Amenities, Design and Development Plan

The following amenities are required in every home:

- 3.6.1** CBS Construction
- 3.6.2** Builders Warranty
- 3.6.3** Minimum two (2) full baths
- 3.6.4** High Efficient Central A/C system
- 3.6.5** Double Kitchen Sink
- 3.6.7** Sod/automated in-ground sprinkler system
- 3.6.8** Better than minimum required landscaping, number of trees, tree size and exterior planting
- 3.6.9** Interior to be a knockdown finish with satin enamel or semi-gloss paint
- 3.6.10** Minimum two-car garage
- 3.6.11** High Efficient Impact windows and doors
- 3.6.12** R-30 Insulation or better
- 3.6.13** Mini-blinds or better
- 3.6.14** Stamped, solid concrete driveway or decorative pavers
- 3.6.15** Flat tile, better or equivalent roof (no asphalt shingles)
- 3.6.16** Ceramic tile or better (entryway, kitchen, and baths) and carpet
- 3.6.17** All appliances including washer and dryer or better than minimum standard
- 3.6.18** Energy efficiency features
- 3.6.19** Other available upgrades/options

3.6.20 All home and site designs shall be compatible with creating an improved residential community and enhance the existing neighborhood. The Project Site is currently zoned RMs-15 which permits single family development. All home designs shall use an architectural style that has local significance and contain historical precedence. The Developer shall use creativity in developing an overall plan for the project subject to requirements of the City's

Uniform Land Development Regulations (ULDR). Developer shall provide more than one model option and a detailed list of all standard amenities.

3.6.21 The Developer is responsible for insuring compliance with the City and other applicable codes prior to construction. It is recommended that prior to submittal of the proposed project, the applicant visit the site and the City Planning and Design office and either meet with Planning staff for a preliminary review or file an application for a Pre-DRC review to determine the projects compliance with City's code requirements. The Developer is responsible for cost of the application and all related cost. The CRA as owner of the property will sign off on the application, as applicable to allow for such review. By doing so, it is not an endorsement of the proposed project or does not confer any rights to the Developer to the property.

3.6.22 This Project Site was previously approved and under contract for a single family project in 2006. The impact of Hurricane Wilma in 2005 and the decline of the real estate single family housing market in 2008 resulted in this project not moving forward. A copy of the Final DRC Site Plan of March 29, 2006 is attached as **Attachment 16**. It is provided for informational purposes only and not as an endorsement of the proposed plan.

3.7 Housing Buyer Preference:

There is a homebuyer preference for the following occupational categories:

3.7.1 Police officers

3.7.2 Fire Fighters

3.7.3 Teachers

3.7.4 Professional

3.7.5 Retirees

3.7.6 Medical Employees

3.7.7 Buyers are not limited to these preferences. However Developers are asked to target these buyers.

3.8 CRA Purchase Assistance Program:

As approved in the CRA Incentive Plan for the Purchase Assistance Program (PAP) approved by the CRA Board on June 6, 2016, below is a description of a target client, limits of benefits and terms/obligations for individuals and families that will this program:

3.8.1 Target Client: Eligible individuals and/or families that are purchasing a property they will occupy as their primary and homesteaded residence.

3.8.2 Basis/Limits of Benefits: PAP will provide down payment and closing cost assistance to the Eligible Person. Assistance to the Eligible Person from the CRA cannot exceed \$45,000 and is based on affordability needs.

3.8.3 Terms and Obligations: The program reward will require an application and review process. The PAP award will have ongoing obligations, which include, but are not limited to a forgivable loan secured by a promissory note and mortgage lien on the property and restrictive covenants. The property must be owner occupied and the maximum household income of

individuals or families assisted in the program cannot exceed 160% of the Area Median Income (AMI)

3.8.4 **Application:** A copy of the program application for the CRA Purchase Assistance Program is attached as **Attachment 17**.

END OF SECTION

SECTION IV – SUBMITTAL REQUIREMENTS

4.1 Instructions

- 4.1.1** Although proposals are accepted 'hard copy', the City of Fort Lauderdale uses BidSync (www.bidsync.com) to administer the competitive solicitation process, including but not limited to soliciting proposals, issuing addenda, responding to questions / requests for information. There is no charge to register and download the RFP from BidSync. Developers are strongly encouraged to read the various vendor Guides and Tutorials available in BidSync well in advance of their intention of submitting a proposal to ensure familiarity with the use of BidSync. The City shall not be responsible for a Developer's inability to submit a proposal by the end date and time for any reason, including issues arising from the use of BidSync.
- 4.1.2** Careful attention must be given to all requested items contained in this RFP. Proposers are invited to submit proposals in accordance with the requirements of this RFP. Please read entire solicitation before submitting a proposal. Developers must provide a response to each requirement of the RFP. Developers should be prepared in a concise manner with an emphasis on completeness and clarity. Notes, exceptions, and comments may be rendered on an attachment, provided the same format of this RFP text is followed.
- 4.1.3** All information submitted by Developer shall be typewritten or provided as otherwise instructed to in the RFP. Developers shall use and submit any applicable or required forms provided by the City and attach such to their proposal. Failure to use the forms may cause the proposal to be rejected and deemed non-responsive.
- 4.1.4** Proposals shall be submitted by an authorized representative of the Proposer. Proposals must be submitted in the business entities name by the President, Partner, Officer or Representative authorized to contractually bind the business entity. Proposals shall include an attachment evidencing that the individual submitting the proposal, does in fact have the required authority stated herein.
- 4.1.5** All proposals will become the property of the City and CRA. The Developer's response to the RFP is a public record pursuant to Florida law, which is subject to disclosure by the City under the State of Florida Public Records Law, Florida Statutes Chapter 119.07 ("Public Records Law"). The City and CRA shall permit public access to all documents, papers, letters or other material submitted in connection with this RFP and the Contract to be executed for this RFP, subject to the provisions of Chapter 119.07 of the Florida Statutes. Any language contained in the Developer's response to the RFP purporting to require confidentiality of any portion of the Developer's response to the RFP, except to the extent that certain information is in the City's opinion a Trade Secret pursuant to Florida law, shall be void. If a Developer submits any documents or other information to the City which the Developer claims is Trade Secret information and exempt from Florida Statutes Chapter 119.07 ("Public Records Laws"), the Developer shall clearly designate that it is a Trade Secret and that it is asserting that the document or information is exempt. The Developer must specifically identify the exemption being claimed under Florida Statutes 119.07. The City shall be the final arbiter of whether any information contained in the Developer's response to the RFP constitutes a Trade Secret. The city's determination of whether an exemption applies shall be final, and the Developer agrees to defend, indemnify, and hold harmless the city and the city's officers, employees, and agent, against any loss or damages

incurred by any person or entity as a result of the city's treatment of records as public records. In the event of Contract award, all documentation produced as part of the Contract shall become the exclusive property of the City and CRA.

IF THE DEVELOPER HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE DEVELOPER'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT. CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT: (954-828-5002, PRRCONTRACT@FORTLAUDERDALE.GOV, CITY CLERK'S OFFICE, 100 NORTH ANDREWS AVENUE, FORT LAUDERDALE, FLORIDA 33301)

- 4.1.6** One original and twenty copies plus five electronic (soft) copies (Flash Drive) of your proposal shall be delivered in a sealed package with the RFP number, due and open date, and RFP title clearly marked on the outside by the due date and time (deadline) to the address specified in Section I, 1.2 – Submission Deadline. It is the sole responsibility of the respondent to ensure their proposal is received on or before the date and time stated, in the specified number of copies and in the format stated herein.
- 4.1.7** By submitting a response Developer is conProposering that the Proposer has not been placed on the convicted vendors list as described in Section §287.133 (2) (a) Florida Statutes; that the only person(s), company or parties interested in the proposal as principals are named therein; that the proposal is made without collusion with any other person(s), company or parties submitting a proposal; that it is in all respects fair and in good faith, without collusion or fraud; and that the signer of the proposal has full authority to bind the Proposer.

4.2 Contents of the Proposal

The City and CRA deems certain documentation and information important in the determination of responsiveness and for the purpose of evaluating proposals. Proposals should seek to avoid information in excess of that requested, must be concise, and must specifically address the issues of this RFP. The City prefers that proposals be no more than 50 pages double-sided, be bound in a soft cover binder, and utilize recyclable materials as much as practical. Elaborate binders are neither necessary nor desired. Please place the labeled Flash Drive in an envelope or paper sleeve. The proposals shall be organized and divided into the sections indicated herein. These are not inclusive of all the information that may be necessary to properly evaluate the proposal and meet the requirements of the scope of work and/or specifications. Additional documents and information should be provided as deemed appropriate by the respondent in proposal to specific requirements stated herein or through the RFP.

4.2.1 Table of Contents

The table of contents should outline in sequential order the major areas of the submittal, including enclosures. All pages should be consecutively numbered and correspond to the Table of Contents.

4.2.2 Executive Summary

Developer must submit a written, site specific development proposal with an executive summary that summarizes the key elements of the proposal. Indicate whether you propose to build the project on spec or whether you have qualified homebuyers interested in purchasing the home.

4.2.3 Company Information

Detailed company information including at a minimum the following

- a. Company address, phone number, fax number, E-Mail address, web site, contact person(s), federal tax identification number (if applicable), etc. Description of the principal; business and activities of the firm. Include the number of years the firm has been in operation and any other names under which it operated. Whether the company qualifies as a local, minority or woman owned business (if applicable).

Minority/Women (M/WBE) Participation

If your firm is a certified minority business enterprise as defined by the Florida Small and Minority Business Assistance Act of 1985, provide copies of your certification(s). If your firm is not a certified M/WBE, describe your company's previous efforts, as well as planned efforts in meeting M/WBE procurement goals under Florida Statutes 287.09451.

- b. Background, experience and qualification of key staff and principals.
- c. Names and addresses of consultants that you plan to use for the project
- d. Indicate business structure, IE: Corp., Partnership, LLC. Firm should be registered as a legal entity in the State of Florida; provide a copy of the firm's certificate of incorporation (if applicable)
- e. Proof that the Proposer is licensed in the State of Florida and Broward County. Relative size of the Proposer, including management, technical and support staff; licenses and any other pertinent information shall be submitted. Whether the Proposer is a local, minority or woman owned business (if applicable);
- f. Proposed initiatives to provide employment opportunities to local residents (if applicable)
- g. References from vendors and/or companies doing business with your firm. Provide at least three references, preferably government agencies, for projects with similar scope as listed in this RFP. Information should include:
 - Client Name, address, contact person telephone and E-mail addresses.
 - Description of work.
 - Year the project was completed.
 - Total cost of the project, estimated and actual.

Note: Do not include City of Fort Lauderdale work or staff as references to demonstrate your capabilities. The Committee is interested in work experience and references other than the City of Fort Lauderdale.

- h. Detailed company experience including a list of and description of similar projects, successfully completed. Indicate the firm's number of years of experience in providing the professional services as it relates the work contemplated. Provide details of past projects for agencies of similar size and scope successfully completed including information on your firm's ability to meet time and budget requirements.
- i. Indicate the firm's initiatives towards its own sustainable business practices that demonstrate a commitment to conservation. Provide examples of

projects completed demonstrating same.

4.2.4 Reserved

4.2.5 Financial Information

- a. Demonstrated proof of financial capacity indicating the financial position of the - Developer for the past three years including annual income statements prepared by an independent, licensed CPA, or for a newly formed entity, current income statements prepared by an independent CPA for all principals covering the past three years. Additional information may include financial references, including the name of the bank, financial institution or individual used as a reference and their names and phone number.
- b. A comprehensive financial pro-forma for the proposed project including detailed development cost and a source and use statement identifying all hard and soft costs, cost of construction, projected income, debt service, square foot costs and developers profit. Indicate the amount proposed to be paid for the land in the pro-forma. Describe the ability to finance the project, funding sources, the amount of finance to be requested, application and deadlines. Provide a proposed Financing plan describing all proposed sources of financing, probable conditions, equity injections, financial capacity of the Developer including proof of adequate line-of-credit or access to funds for construction of multiple units during the same time period, funding commitments-, type of security for completion of development, guarantees and bonding capacity.
- c. An indication of the financial involvement of the CRA, if any. (ie. Incentives requested/ CRA Purchase Assistance to qualified homebuyers, expedited permitting-, impact fee waivers, public subsidies, etc)

Note: The only CRA program approved for use is the Purchase Assistance Program (PAP) for Eligible Person.

4.2.6 Project Plans and Information

- a. A site specific, Schematic Development Site Plan as per RMs-15 zoning code, or determination of what regulatory approval may be required to construct the homes.
- b. Landscape plan and a summary of how the landscape plan exceeds minimum requirements
- c. Floor plan for a one or two-story, three bedroom/two bath single family home with a minimum air conditioned square footage of 1,500 SF that will comply with the zoning regulations and include a covered porch and garage recessed from the front elevation.
- d. Floor plan for a one or two-story, four bedroom/two bath single family home with a minimum air conditioned square footage of 1,700 SF that will comply with the zoning regulations and include a covered porch and garage recessed from the front elevation
- e. Two (2) front elevations per floor plan
- f. Front, side and rear elevations for each floor plan
- g. List of amenities/standard material features with prices for each standard model
- h. List of optional materials and features with itemized price list.
- i. Detailed list of all sustainable and energy efficiency features and whether the homes will qualify for Leadership in Energy and Environmental Design (LEED) Certification by USGBC.
- j. Proof of Builders Home Warranty
- k. Proposed ownership and/or management structure of the proposed project.

- l. Narrative Marketing Plan providing a detailed description on how the Developer intends to market the homes.
- m. A projected Timetable for Development indicating the major milestones and activities that will take place through project completion. It is the desire of the CRA to have the project completed without delays and in a timely manner.
- n. Graphic perspective/views that realistically depict the project at street level.

4.2.7 Homebuyer Information

- a. Letters of intent or Contracts to Purchase from prospective home buyers (If Applicable)
- b. Housing Buyer occupational categories to be targeted by the Developer.
- c. State whether you propose to use the CRA Purchase Assistance Program.

4.2.8 Minority/Women (M/WBE) Participation

If your Proposer is a certified minority business enterprise as defined by the Florida Small and Minority Business Assistance Act of 1985, provide copies of your certification(s). If your Proposer is not a certified M/WBE, describe your company's previous efforts, as well as planned efforts in meeting MBE/WBE procurement goals under Florida Statutes 287.09451.

4.2.9 Subcontractors (Not applicable)

4.2.10 Required Forms

A. Proposal Certification

Complete and attach the Proposal Certification provided herein.

B. Purchase Offer Proposal

Provide the proposed purchase offer for the Property and terms of purchase (if applicable)

C. Non-Collusion Statement

This form is to be completed, if applicable, and inserted in this section.

D. Local Business Preference (LBP)

This form is to be completed, if applicable, and inserted in this section

E. Non Discrimination Certification Form

This form must be completed and inserted in this section.

F. Sample Insurance Certificate

Demonstrate your firm's ability to comply with insurance requirements. Provide a previous certificate or other evidence listing the Insurance Companies names for the required coverage and limits.

4.2.11 All proposal submissions and material become the property of the City and CRA public record and shall not be returned.

END OF SECTION

SECTION V – EVALUATION AND AWARD

5.1 Intent

It is the intent of the CRA to select a Developer who submits a development proposal that:

- a. Is in the best interest and in furtherance of the purposes of the Community Redevelopment Plan for the area
- b. Is most responsive to the redevelopment goals of the project area and the RFP.
- c. Demonstrates the financial capacity and development experience, qualifications and ability best suited to carry out the proposal.
- d. Demonstrates high quality design, construction and features.
- e. Only development proposals that are non-tax exempt will be considered. The proposals will be reviewed by CRA staff for completeness. CRA staff has the right to reject any and all proposal and has the right to determine if material/information submitted is acceptable or if information not submitted allows the proposal to be deemed sufficient. Proposals that do not include all the information and materials requested may be deemed non-responsive.

5.2 Evaluation Procedure

5.2.1 Bid Tabulations/Intent to Award

Notice of Intent to Award Contract/Bid, resulting from the City's Formal solicitation process, requiring City Commission action, may be found at:

<http://www.fortlauderdale.gov/departments/finance/procurement-services/notices-of-intent-to-award>. Tabulations of receipt of those parties responding to a formal solicitation may be found at:

<http://www.fortlauderdale.gov/departments/finance/procurement-services/bid-results>, or any interested party may call the Procurement Services Division at 954-828-5933.

5.2.2 Evaluation of proposals will be conducted by an Evaluation Committee, consisting of a minimum of three members of City Staff, or other persons selected by the City Manager or designee. All committee members must be present at scheduled evaluation meetings. Proposals shall be evaluated based upon the information and references contained in the responses as submitted.

5.2.3 The Committee may short list Proposals, that it deems best satisfy the weighted criteria set forth herein. The committee may then conduct interviews and/or require oral presentations from the short listed Proposers. The Evaluation Committee shall then re-score and re-rank the short listed Proposers in accordance with the weighted criteria.

5.2.4 The City may require visits to the Proposer's facilities to inspect record keeping procedures, staff, facilities and equipment as part of the evaluation process.

5.2.5 The final ranking and the Evaluation Committee's recommendation may then be reported to the NPF CRA Redevelopment Advisory Board. The NPF CRA Redevelopment Advisory Board will have the right to request oral presentations from Developers and to pass on the recommendation of the Evaluation Committee, and/or approve, disapprove or re-rank the recommendations provided by the Evaluation Committee. The CRA Executive Director will bring the recommendations to the CRA

Board of Commissioners (CRA Board) for consideration of contract award.

The Developer of the top ranked proposal so selected by the CRA Board will have the right to negotiate directly with the Executive Director of the CRA or his designee for the purpose of entering into a Development Agreement with the CRA. The CRA reserves the right to terminate negotiations and then negotiate with the next ranked Developer if satisfactory progress toward an agreement is not being achieved. The selected Developer will be required to enter into a development agreement with the CRA that may include, but not be limited to restrictions on use and structures, conditions for conveyance of property by the CRA, insurance, indemnification, guarantees for completion of project and other conditions that are in the best interest of the public and the CRA. The CRA Board also reserves the right to reject all proposals.

5.3 Evaluation Criteria

5.3.1 The CRA uses a mathematical formula to determine the scoring for each individual responsive and responsible firm based on the weighted criteria stated herein. Each evaluation committee member will rank each firm by criteria, giving their first ranked firm a number 1, the second ranked firm a number 2, and so on. The City shall multiply that average ranking by the weighted criterion identified herein to determine the total the points for each proposer. The lowest average final ranking score will determine the recommendation by the evaluation committee to the CRA Executive Director.

5.3.2 Weighted Criteria

In the Best Interest of the CRA Plan and Most Responsive to the Goals of the Project Area and RFP	25%
High Quality Design, Construction and Features.	25%
Development Experience, Financial Capacity and Ability Best Suited to Carry Out the Proposal	25%
Homebuyers Preference	5%
Energy Efficiency/Sustainable Features/LEED Certification	10%
Purchase Offer for Property	10%
TOTAL PERCENT AVAILABLE:	100%

5.4 Contract Award

The CRA reserves the right to award a contract to that Developer who will best serve the interest of the City and CRA. The City and CRA reserves the right, based upon its deliberations and in its opinion, to accept or reject any or all proposals. The City and CRA also reserves the right to waive minor irregularities or variations of the submittal requirements and RFP process.

END OF SECTION

SECTION VI - PURCHASE PROPOSAL PAGE

Developer Name: _____

Developer agrees to purchase the property at the prices bid below in accordance with the terms, conditions and specifications contained in this RFP.

The Developer acknowledges and understands that Section 163.380(2) Florida Statutes of the Community Redevelopment Act requires that the CRA shall not sell, lease or otherwise transfer it's real property or interest at less than fair value. The Developer shall provide the CRA with all pertinent data, analysis or method deemed necessary and appropriate by the CRA in determining the fair value of the property to be sold to the Developer.

1. Parcel 1 Purchase Offer

\$ _____
2. Parcel 2 Purchase Offer

\$ _____
3. Parcel 3 Purchase Offer

\$ _____
4. Parcel 4 Purchase Offer

\$ _____

Submitted by:

Name (printed)

Signature

Date

Title