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**URBAN INVESTMENT FUND Expression of Interest (4th Call)**

1. **APPLICANT DETAILS**

NB: The applicant must be the key contact to discuss all details of this application

|  |  |
| --- | --- |
| Full Name |  |
| Address Line 1 |  |
| Address Line 2 |  |
| Address Line 3 |  |
| County |  |
| Post Code |  |
| Tel No  |  |  |
| Email address |  |
| Relationship to Property (tick) | Owner  | Tenant (How many years lease?) | Other (Please State)Currently in negotiations to secure the lease |

1. **PROPERTY OWNER DETAILS**

**Same as above**

|  |  |
| --- | --- |
| Registered Property Owner Name |  |
| Address Line 1 |  |
| Address Line 2 |  |
| Address Line 3 |  |
| County |  |
| Post Code |  |
| Tel No  | Landline: | Mobile: |
| Email address |  |
|  |
| If there are multiple registered property owners, please provide all property owner details? |
| Property Owner Name |  |
| Address Line 1 |  |
| Address Line 2 |  |
| Address Line 3 |  |
| County |  |
| Post Code |  |
| Tel No  | Landline: | Mobile: |
| Do you have other properties in the City Centre?  | YES □ | NO □ |

*Additional owner details should be supplied in appendices to this application form.*

1. **BASIC ELIGIBILITY SELECTION**

|  |  |  |
| --- | --- | --- |
| **3a** | Property Address Line 1 |  |
| Property Address Line 2 |  |
| Property Address Line 3 |  |
| County |  |
| Post Code |  |
| **3b** | Is your vacant property or existing business located in Lisburn City Centre, Carryduff or Dundonald? | YES □ | NO □  |
| **3c** | If the property has been vacant. How long has this been for?  | Vacant: Time Vacant:  |

1. **PROPERTY BACKGROUND QUESTIONS (Please complete all questions)**

|  |  |  |  |
| --- | --- | --- | --- |
| **4a** | What was/is your building used for?E.g. retail, offices, residential, industrial etc. | Basement |  |
| Ground Floor |  |
| 1st Floor |  |
| 2nd Floor |  |
| **4b** | Provide a detailed description of the ***external***condition of the property or the area earmarked for repurposing if this relates to your project.*(Please attach supporting photographs)* |   |
| **4c** | Provide a detailed description of the ***internal*** condition of the vacant property or the area earmarked for repurposing if this relates to your property.*(Please attach supporting photographs)* |  |
| **4d** | What is the nature of the proposed business? |  |
| **4e** | Is the property completely vacant or partially vacant? Is the area to be repurposed currently unused? |  |
| **4f** | What are the current annual rates for the property? (£) |  |
| **4g** | What is the current NAV (non-domestic net annual value) for the property?  |  |
| **4h** | Is your property a listed building?  | YES □ NO □ |
| **4i** | Is your property in the Conservation Area of Lisburn City Centre? | YES □ NO □ |
| **4j** | Is your property structurally safe to enter for assessment purposes? | YES □ NO □ |

1. **PROPERTY PROJECT DETAIL**

|  |  |
| --- | --- |
| **5a** | Please provide details of the proposed project.*(Supporting information e.g. photographs, images, drawings, material specification)* |
|  |
| **5b** | Does your project require statutory consent?   | **Planning permission** YES □ NO □**Building Control**YES □NO □**Listed Building Consent**YES □ NO □ |
| **5c** | Have you lodged applications for any required consent? | **Planning permission** YES □ NO □**Building Control**YES □ NO □**Listed Building Consent**YES □ NO □*Please quote planning reference number:* |

1. **FINANCIAL DETAILS**

|  |  |
| --- | --- |
| **6a** | Please detail anticipated budget/costs for the work listed above in 5a. Costs should be based on quotations received from reputable suppliers. |
|  |
| 6b | Please confirm the required 10% match funding is in place and confirm the source of the funding. |  |

1. **APPLICATION PRE-REQUISITES**

|  |  |  |
| --- | --- | --- |
| I can confirm I will arrange access to the property in order to allow Council officers and the Quantity Surveyor to assess the property | **YES** | **NO** |

1. **DECLARATIONS**

I declare that the information given above is true and correct to the best of my knowledge.

I we understand that Council may ask for additional information at any stage of the process.

|  |  |  |
| --- | --- | --- |
| I confirm I have included internal and external photographs | **YES**  |  |
| I confirm I have included supporting information for question 5a  | **YES**  |  |

|  |  |
| --- | --- |
| **Signed**  |  |
| **Date** |  |

Please return the Expression of Interest form no later than **Monday 15th April 2024 at 12 noon** to Melanie Finn email: Melanie.finn@lisburncastlereagh.gov.uk or to 11-13 Market Square, Lisburn, BT28 1AE.
Any queries or additional information please phone 028 9244 7542.