## Tax Increment Reinvestment Zone #3 Request for Reimbursement

Project Name: STUBIO	21 Apartments	(RAOWA ds Shed	(iv 44)
Grant Program: 71KZ			
Type of Reimbursement:	One Time Re	-Occurring (First Payment	t)
Requestor: STONEWATER	PROPULIESate Reque	sted: 10/4/19	
Caraneahur	INC .	, ,	
Improvement  1. Down lop ment A	Estimated Cost (Per Agreement Exhibit C)	Actual Cost (Per Attached Documentation) 2.9M	Invoice Reference
2. 44 Apl. (Studio	7.0m	of it is	50.1550
3. Style Wits			
4.			
5.			
	4		
TOTAL			
Attached is the Follow	ring:		
1) Executed TIRZ #3 Reir	nbursement Agreement		
Certificate of Occupant		V	
Documentation of Explanation of			
3/ Documentation of Ex	W 40 T T W 40 W		
Signatures for Submit	talif	. /	14/1
Authorized Developer:	Stepl Perujar	Date:	10/4/19
Authorized General Contra	ictor:	Charle Date:	

An incomplete Request for Reimbursement will not be processed. Submit a hard copy and combined PDF version to <a href="mailto:iason@cctexasdmd.com">iason@cctexasdmd.com</a>. Upon receipt of Request, final inspection will be scheduled.

## Internal Office Use Only

Signatures for Approval Process	
Request Rec'd By DMD: Jan Alan	Date: 10/4/14
Documentation Complete: 10/4/19 Inspection of Project: 10/4/19	
Reimbursement Amount Requested: 4185 000	
Notes: Reimbursement is to be paid out over two consecutive	e years at
\$ 92,500/yr.	•
Reimbursement Approved by TIRZ #3 Board:	Date: