

PETITION TO ESTABLISH THE CEDAR RAPIDS MEDICAL SELF-SUPPORTED MUNICIPAL IMPROVEMENT DISTRICT PURSUANT TO CHAPTER 386, CODE OF IOWA (the “Act”)

We, the undersigned, being at least 25 percent of all owners of property within the proposed Cedar Rapids Medical Self-Supported Municipal Improvement District (hereinafter referred to as “Medical District”), and being owners of property within the proposed District having an assessed value of at least 25 percent of the assessed value of all the property in the proposed District, hereby petition the City Council of Cedar Rapids, Iowa, pursuant to the provisions of Chapter 386 of the Code of Iowa (the “Act”), as follows:

1. To establish the boundaries of the self-supported municipal improvement district in the City of Cedar Rapids, Linn County, Iowa, as follows:
 - (a) The name of the proposed district shall be the “Cedar Rapids Medical Self-Supported Municipal Improvement District”
 - (b) The purposes of the Medical District shall be the undertaking of actions and the design and construction of any and all improvements authorized by the Act and the performance of administration, redevelopment, and revitalization of the Medical District, as authorized by the Act, any and all of which actions and improvements are intended to benefit the property within the Medical District,
 - (c) A description of the Medical District boundary is as follows:

The proposed boundary generally encompasses the area bounded by Interstate 380 on the northwest from 8th Ave north to Coe Rd NE, then southeast along Coe Rd NE to 1st Ave E and proceed northeast to 13th St SE then proceed southeast on 13th St SE to the alley between 2nd Ave SE and 3rd Ave SE, then proceed southwest along the alley to 12th St SE, then proceed southeast on 12th St SE to a point 110ft southeast of the intersection of 12th St SE and 4th Ave SE then proceeding southwest 50 ft along the property line between OUT LOT 9 NW 110' Lot 11 and OUT LOT 9 SE 40' Lot 11 southwest to a point then proceeding southeast along property line to 5th Ave SE, then proceeding southwest on 5th Ave SE to McKinley St SE, then proceeding southeast on McKinley St SE to McKinley Middle School then proceeding southwest to 10th St SE, then proceeding southeast along 10th St SE to Mt Vernon Road SE, then proceeding east on Mt Vernon Road to 9th Ave SE, then proceeding south west on 9th Ave SE to 7th St SE, then northwest on 7th St SE to 8th Ave SE, then proceeding southwest on 8th Ave SE to 5th St SE, then proceeding northwest on 5th St SE to 6th Ave SE, then proceeding northeast on 6th Ave SE to 6th St SE, then proceeding northwest on 6th St SE to A Ave NE, then proceeding northeast on A Ave NE to 8th St NE, then proceeding northwest on 8th St NE to Interstate 380.

A map of the district is attached to this Petition for reference.

2. To maintain a fund to be known as the “Cedar Rapids Medical Self-Supported Municipal Improvement District Fund” (hereinafter referred to as “Fund”) for the purposes of: (a) paying the administrative expenses of the Medical District, as defined and authorized in the Act, or (b) paying part or all of the Medical District services as defined and outlined in the Act, for a period of 20 years, commencing with the levy of taxes for collection in the fiscal year beginning July 1, 2012, and continuing for 19 additional years; with the first year’s rate of assessment to be \$3.75 per thousand dollars of taxable valuation (not to exceed \$3.75 per thousand dollars of taxable valuation during the lifetime of the Medical District).

3. To disburse annually revenues collected in the Fund for one or more of the following purposes, at such times, in such amounts and under such conditions as shall be recommended to the City Council by the Cedar Rapids Medical SSMID Board of Directors composed of representatives of the owners of property within the Medical District:

a. Medical District Economic Development Programs including:

- Retain, attract and incubate businesses
- Support existing businesses to help them grow
- Attract new investment and appropriate development
- Create investor marketing information specific to Medical District including real estate database
- Consumer marketing, promotions and special events
- Market research

b. Communications and Advocacy including:

- Manage media relations to project a positive image
- Maintain Cedar Rapids Medical District website
- Promote a positive image with public relations initiatives
- Advocate to advance policies and attract additional resources to improve Cedar Rapids Medical District

c. Capital Improvements including:

- Cosmetic improvements such as seasonal banners and decorations
- Gateways, signage and public art
- Special projects to improve and beautify public spaces
- Street beautification

d. Enhanced Maintenance including:

- Ongoing maintenance of Cedar Rapids Medical SSMID-financed improvements that are deemed to be beyond the City’s base level of services
- Enhanced services that would not be expected from the City.

e. Enhanced personal and property security

- Enhanced security services that would not be expected from the City.

- f. Parking Management including:
- Encourage investment to update parking infrastructure and technology
 - Investigate options for improving mobility for all modes of transportation, including bicycles and transit
 - Investigate ways to support economic development efforts with the creative use of parking resources

4. The Cedar Rapids Medical SSMID shall be guided by a board of medical district business and property owners and should equitably represent the following interests:

- Large and small property ownership
- Diverse business types and sizes (healthcare, service, retail, restaurant, etc.,)

5. To require the Cedar Rapids Medical SSMID Board to submit to the Cedar Rapids City Council a budget showing, in general terms, proposed expenditures of SSMID funds for the fiscal year beginning on July 1, 2012. Once the budget has been approved by City Council and the assessment has been collected, the City will transfer the entire annual Cedar Rapids Medical SSMID allotment to the Cedar Rapids Medical SSMID Board who will oversee administration and allocation of those funds. An annual independent audit will be prepared by the Cedar Rapids Medical SSMID Board to account for the use of funds.

6. It is the intent of this Petition that the City of Cedar Rapids and the District will continue to work together to establish the roles of both organizations pursuant to a Memorandum of Agreement (MOA) which outlines current and future responsibilities of both organizations with regard to the District services, maintenance and operations described in this Petition.

The property is described as follows:

<u>Tax Property ID</u>	<u>Address</u>	<u>Description</u>
142235600400000	0 VACANT LAND SE	CARPENTER'S 4TH (SIMMONS, POPE & JONES REPLAT) SE 34.5' STR/LB 1 FR34
142810500400000	0 VACANT LAND SE	OUT LOT 23 DEWEY'S SUBDIV NE 20' SE 60' STR/LB 1
142117700200000	0 VACANT LAND NE	P.O.S. #694 PARCEL STR/LB A
142235600300000	0 VACANT LAND SE	
142810501100000	0 VACANT LAND SE	P.O.S. #1162 PARCEL STR/LB A
142140502000000	0 VACANT LAND NE	OUT LOT 2 NE 8' SW 38' NW 80' STR/LB 14
142235600500000	0 VACANT LAND SE	CARPENTER'S 4TH (SIMMONS, POPE & JONES REPLAT) NW 25.5' STR/LB 1 FR34

SIGNATURE OF OWNER(S) OR AUTHORIZED REPRESENTATIVE:

_____ Date: _____

_____ Date: _____

CORPORATE CERTIFICATE

I, the undersigned, the duly elected, qualified and/or acting _____ of _____, a corporation (the "Company"), hereby certify as follows:

I am an officer of the Company, and, by virtue of the authority delegated to me by the Board of Directors of the Company, its Bylaws, Articles of Incorporation, or other legally appropriate authority, have been authorized to execute the Petition To Establish the Cedar Rapids Medical Self-Supported Municipal Improvement District for and on behalf of the Company.

IN WITNESS WHEREOF, I have hereunto set my official signature this ____ day of _____, 201__ and I declare that this signature shall be considered to be my signature on said Petition.

(Name of Corporation)

By _____

(Print Name and Title)

TRUSTEE CERTIFICATE

I, the undersigned, do hereby certify that I am the duly qualified and acting Trustee of that certain Trust known as the _____ Trust, and that, as such Trustee, I am authorized to execute the Petition to Establish the Cedar Rapids Medical Self-Supported Municipal Improvement District for and on behalf of said Trust.

IN WITNESS WHEREOF, I have hereunto set my official signature this _____ day of _____, 201____, and I declare that this signature shall be considered to be my signature on said Petition.

(Name of Trust)
By _____

(Print Name and Title)

Guidelines to Follow in Securing Signatures for a Petition to Establish the Cedar Rapids Medical Self-Supported Municipal Improvement District

1. Chapter 386 of the Code of Iowa requires that the Petition be signed by property owners as shown in the transfer books in the County Auditor's office.

Therefore, if there is any question about ownership of a particular parcel, it should be resolved by referring to those transfer books.

2. If more than one natural person is shown as an owner of a parcel of property, each person must sign the Petition.

3. If property is held in the name of a corporation, the attached Corporate Certificate should be signed by a duly authorized representative of the corporation.

4. If property is held in trust, the attached Trustee Certificate should be signed.

5. If a property owner wants to designate someone else to sign the Petition on his behalf, there will need to be a separate certificate to reflect the designee has legal authority to sign on the owner's behalf, such as a sworn affidavit or power of attorney.