



## ECONOMIC DEVELOPMENT INCENTIVES APPLICATION

### COMPANY INFORMATION

Company Name: \_\_\_\_\_

Headquarters Address: \_\_\_\_\_

Country: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Contact Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Business Description (attach separate page if necessary):

Federal Tax ID: \_\_\_\_\_ NAICS: \_\_\_\_\_

Date Business Established: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Years at Current Location: \_\_\_\_\_

Business Type:  Corporation – Date of origin: \_\_\_\_\_ State of Origin: \_\_\_\_\_

Limited Liability Company – Date of origin: \_\_\_\_\_ State of Origin: \_\_\_\_\_

Partnership  Sole Proprietorship  Other: \_\_\_\_\_

Registered to Conduct Business in the State of Texas:  YES  NO

Number of Texas Locations: \_\_\_\_\_ US Locations: \_\_\_\_\_ Global Locations: \_\_\_\_\_

Has the business, or any member of the management team, faced any litigation relating to the operations of this organization in the past 10 years:  YES  NO

If yes, please explain (attach separate page if necessary):

Is this business current on all tax liabilities (state, federal, and local) in the jurisdictions where you currently maintain operations:  YES  NO

If no, please explain (attach separate page if necessary):

## BUSINESS REFERENCES

**Bank Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Accounting Firm:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Law Firm:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Other Business Reference:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## PROJECT INFORMATION

New business/project in ORN:  YES  NO

Expanding business/project in ORN:  YES  NO

Please describe the Project (attach separate page if necessary):

Is the company considering other Texas locations:  YES  NO

Is the company considering other US locations:  YES  NO

Is the company considering other global locations:  YES  NO

Market for Product:  Local  State  US  Global

Location of Planned Investment (address or description):

Project Expected Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Land Acreage: \_\_\_\_\_

Building Square Feet: \_\_\_\_\_

Real Property:  PURCHASE  LEASE

If Lease, Property Owner: \_\_\_\_\_

Representative: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## FINANCIAL INFORMATION

*Committed Level of Financing:*

Applicant: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Government Incentive (all sources): \_\_\_\_\_

Grants: \_\_\_\_\_

Other: \_\_\_\_\_

Total: \_\_\_\_\_

*10-year Investment Schedule (attach as separate page if preferred)*

<u>Year</u>	<u>Land</u>	<u>Building</u>	<u>FF&amp;E</u>	<u>Taxable Inventory</u>	<u>Labor</u>	<u>Total</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*(Continued next pg.)*

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
TOTALS	_____	_____	_____	_____	_____	_____

PROJECT TOTAL \_\_\_\_\_

**Year-End Financials for existing businesses for the previous three fiscal years must be included with this document.**

**New businesses must submit their Detailed Business Plan citing industry benchmarks and examples.**

*Depreciation Schedule*

	Years	% per Year
Machinery/Equipment:	_____	_____ %
Building:	_____	_____ %
Other:	_____	_____ %

**JOB CREATION**

*Schedule of initial workforce (wages exclude benefits):*

	<u># of Jobs</u>	<u>Avg. Annual Wage</u>	<u>Percent Locally Hired</u>
Executive	_____	_____	_____ %
Manager	_____	_____	_____ %
Supervisor	_____	_____	_____ %
Staff (FT)	_____	_____	_____ %
Staff (PT)	_____	_____	_____ %

What is the expected average wage for the lowest paid 10% of local workers? \_\_\_\_\_



## SERVICE REQUIREMENTS

### *Electric*

Peak Monthly Demand in Kilowatts (KW): \_\_\_\_\_

Average Monthly Usage in Kilowatt Hours (kWh): \_\_\_\_\_

Average Monthly Load Factor: \_\_\_\_\_

Dual Feed Required:             YES             NO

Current Rate (cents per kWh): \_\_\_\_\_

### *Gas*

Monthly Usage (specify Ccf or Mcf): \_\_\_\_\_

Current Rate (specify per Ccf or Mcf): \_\_\_\_\_

### *Water/Wastewater*

Average Monthly Water Usage: \_\_\_\_\_ Meter Size: \_\_\_\_\_

Average Monthly Wastewater Discharge: \_\_\_\_\_

### *Solid Waste Disposal*

Monthly Requirement (in cf): \_\_\_\_\_

Current Rate: \_\_\_\_\_

### *Telecommunications*

Please detail the requirements for telecommunications services (attach separate sheet if necessary):

Current Rate (may be included on detail attachment above):

## ECONOMIC IMPACT

Will the Property Generate:

Additional Property Tax:	<input type="radio"/> YES	<input type="radio"/> NO
Land:	<input type="radio"/> YES	<input type="radio"/> NO
Building:	<input type="radio"/> YES	<input type="radio"/> NO
FF&E:	<input type="radio"/> YES	<input type="radio"/> NO

If yes, indicate below the increase in estimated taxable value of property in the first year after completion:

Land: \_\_\_\_\_

Building: \_\_\_\_\_

FF&E: \_\_\_\_\_

TOTAL: \_\_\_\_\_

Percent of inventory eligible for Freeport Exemption: \_\_\_\_\_%

Sales tax generating sales of products or services:  YES  NO

If yes, please include at least one of the following:

- 1) If a relocation within Texas, the previous three years of sales tax reports to the Texas Comptroller;
- 2) If an expansion or additional location of a Texas business, previous three years of sales tax reports to the Texas Comptroller from a similar location;
- 3) If an expansion or additional location of a business from outside Texas, either three previous years of sales tax reports to the sales tax collection entity in the specified state, OR extrapolate the taxable sales from year-end financials for the previous three years;
- 4) If a new business, highlight estimated taxable sales in your business plan citing industry benchmarks and examples.

Estimated Sales Tax Generating Sales from this location: \_\_\_\_\_

Please list any other factors that the City and EDC Board of Directors should consider in determining an incentive package for this business. This may include purchasing from other ORN businesses, increased traffic that would positively impact other ORN businesses, etc.



**Statement Regarding Undocumented Workers**  
(Required by Chapter 2264, Texas Government Code)

By signing and submitting this application you certify that the company, its branches, divisions, and departments (company) do not and will not knowingly employ an undocumented worker. An agreement with the company will require the company to repay the total amount of the public benefit received with interest at the rate and according to the terms of the agreement if the company is convicted of a violation under 8 U.S.C. Section 1324a (f). Repayment will be due no later than the 120<sup>th</sup> day after the City notifies the company of the violation as provided in the agreement.

An undocumented worker is an individual who, at the time of employment is not:

- 1) Lawfully admitted for permanent residence to the United States; or
- 2) Authorized under law to be employed in that manner in the United States.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

***Please note that the City of Oak Ridge North and Oak Ridge North Economic Development Corporation reserve the right to request additional information or supporting documents to make a determination regarding incentives.***