



## APPLICATION FOR FINANCIAL ASSISTANCE

### ① Company/Enterprise Info

Contact & Title: \_\_\_\_\_ Type of Entity: \_\_\_\_\_  
 Company: \_\_\_\_\_ NAICS #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
 Principal Owner(s) or Officer(s) of Company: \_\_\_\_\_

### ② Project Info

Project Address: \_\_\_\_\_ PPN: \_\_\_\_\_

Nature of commercial/industrial activity (manufacturing, warehousing, office, retail, other) to be conducted at the site: \_\_\_\_\_

Will the business purchase, lease or construct the facility?  Purchase  Lease  Construct

Building square footage: \_\_\_\_\_ Site acreage: \_\_\_\_\_

Project Description – business reasons for project, type of operations, products/services, etc.

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Anticipated project start and end dates for new employment, land and building, machinery/equipment and furniture/fixtures

	New Employment	Building	M/E & F/F
Start Date			
Completion Date			

Does Project involve a consolidation?  Yes  No If yes, describe components of consolidation (location, assets, jobs and associated payroll to be transferred) \_\_\_\_\_

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### ③ Application Info

Type of assistance requested:

Job Creation Grant     Job Retention Grant     Community Reinvestment Area (CRA) Property Tax Abatement

Other, specify: \_\_\_\_\_

Has the company previously received or are they currently receiving any incentives (CRA, Enterprise Zone, grants, tax credits, etc.) from another community in Ohio?     Yes     No

If yes, list communities, date(s) and term(s) for each incentive received \_\_\_\_\_

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### ④ Employment Info

Employment/Jobs

	Previous Year End (12/31)	Current	Projected Year 1	Projected Year 2	Projected Year 3
Ohio:					
Full-time					
Part-time					
Subtotal					
Project Site:					
Full-time					
Part-time					
Subtotal					

Payroll

	Previous Year End (12/31)	Current	Projected Year 1	Projected Year 2	Projected Year 3
Ohio:					
Full-time					
Part-time					
Subtotal					
Project Site:					
Full-time					
Part-time					
Subtotal					

Will the project involve the relocation of employment positions and/or assets from another location in Ohio?     Yes     No

If yes, list location(s) from which jobs and/or assets will be relocated and include detailed information about projected impact of relocation, including number and type of jobs to be relocated, associated annual payroll, assets, impact on current company facilities, etc. \_\_\_\_\_

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### ⑤ Liabilities

Does the company owe any delinquent taxes to the State of Ohio or a political subdivision of the state?     Yes     No

Does the company owe any monies to the State or a state agency for the administration or enforcement of any environmental laws of the State?     Yes     No

