

DEKALB COUNTY ENTERPRISE ZONE APPLICATION

Project Information

Project Name: _____
(the exact legal name under which the business is applying for designation)

Street Address: _____
(location of the qualified business within the Enterprise Zone)

City/State/Zip: _____

Mailing Address: _____

City/State/Zip: _____

If constructing a new facility and address is not available, provide address to the Economic Development Office as soon as it is available. The address must be provided to the Office before the project is eligible for benefits.

Local Business Liaison
(Local Contact Person at
Qualified Business Site)

Primary Business Representative
(Primary Business Representative with
Signature Authority as Identified in
Corporate Resolution)

Name _____

Title _____

Organization _____

Street Address _____

Mailing Address _____

City/State/Zip _____

Telephone _____

Fax Number _____

TDD Number _____

Parent Company _____
(If applicable)

Street Address _____

Mailing Address _____

City/State/Zip _____

Complete	Incomplete		If Complete, Initial and Attach
_____	_____	Financial supporting documentation for example, bank commitment letters.	_____
_____	_____	Three years of financials (must include income statements and balance sheets).	_____
_____	_____	Ten (10) year Operating Proforma (including annual debt coverage ratio)	_____
_____	_____	Evidence of property access, i.e., copy of warranty deed or executed lease agreement (i.e., evidence of site control.)	_____
_____	_____	DeKalb County Business License or application.	_____
_____	_____	Statements from 2 or more lending institutions verifying that tax exemptions are necessary to the economic feasibility of the proposed project.	_____

Business Type:

Federal Tax ID Number: _____ NAICS (SIC) Code (4 Digits) _____

Business Type: _____
(Manufacturing, Service, Etc.)

Primary Product: _____

Business Characteristics: Check the Appropriate Box(es)

<p>Applicant Type</p> <p><input type="checkbox"/> New Job <input type="checkbox"/> Exporter</p> <p><input type="checkbox"/> Retained Jobs <input type="checkbox"/> Non-Exporter</p> <p><input type="checkbox"/> New & Retained Jobs <input type="checkbox"/> Importer</p>	<p>Benefit Type</p> <p><input type="checkbox"/> Renovate Existing Facility <input type="checkbox"/> New Facility</p> <p><input type="checkbox"/> Expand Existing Facility <input type="checkbox"/> Machinery/ Equipment</p>
<p>Recruitment Type (Out-of-State)</p> <p><input type="checkbox"/> Expansion <input type="checkbox"/> Consolidation</p> <p><input type="checkbox"/> Relocation <input type="checkbox"/> Start-Up</p>	<p>Retention Type (Local)</p> <p><input type="checkbox"/> Expansion <input type="checkbox"/> Relocation within Georgia</p> <p><input type="checkbox"/> Consolidation <input type="checkbox"/> Upgrade Process/Equipment</p>

Permits: (provide the status of all local, state, and federal permits)		No Permits Required <input type="checkbox"/>
If pending, the Issuing Agency	Status	Date Expected
_____	_____	_____
_____	<input type="checkbox"/> Current <input type="checkbox"/> Pending <input type="checkbox"/> N/A	_____
_____	<input type="checkbox"/> Current <input type="checkbox"/> Pending <input type="checkbox"/> N/A	_____
_____	<input type="checkbox"/> Current <input type="checkbox"/> Pending <input type="checkbox"/> N/A	_____
_____	<input type="checkbox"/> Current <input type="checkbox"/> Pending <input type="checkbox"/> N/A	_____

Note: Do not attach copies of permits.

Jobs for which you are applying for EZ Designation:

Jobs to be created for EZ Designation: *(Projected for 10-year Designation Period)*

Number of New Jobs _____

Total Amount of Payroll for New Jobs \$ _____

NOTE: Leased, contract, temporary, and construction employees do not qualify as new employees.

Number of Local Residents Hired: _____ **Number of Low/Moderate Income Hired:** _____

Permanent, Full-Time Jobs: _____

Job Title	Number of Positions	Estimated Wage Range per Job	Estimated Annual Wages
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Sub-Total, Full-Time Jobs: _____

Sub-Total, Permanent, Part-Time Jobs: _____

Sub-Total, Seasonal Jobs: _____

Sub-Total, Temporary Jobs: _____

GRAND TOTAL, ALL JOBS _____

**DeKalb County Enterprise Zone
Sources and Uses**

USES OF FUNDING FOR PROJECT:

Development Budget, Pre-Development Costs

Property Appraisal	_____
Market Study	_____
Environmental Report(s)	_____
Soil Borings	_____
Boundary and Topographical Survey	_____
Zoning/Site Plan Fees	_____
Other:	_____
Subtotal:	\$ _____

Acquisition:

Land	_____
Acquisition Legal Fees (if existing structures involved)	_____
Existing	_____
Subtotal:	\$ _____

Site Improvements

Demolition	_____
Site Preparation and Site Utilities	_____
Off-Site Improvements	_____
Site Drainage	_____
Subtotal:	\$ _____

Construction

Buildings	_____
Landscaping, Lighting, Signage	_____
Streets, Walks, Parking	_____
Accessory Building(s)	_____
Project Amenities	_____
Construction Contingency: Actual % =	_____

Contractor Services

Builder's Overhead	_____
Builder Profit	_____
General Requirements	_____
Subtotal:	\$ _____

Construction/Financing and Permanent Fees

Construction Loan Fee	_____
Construction Loan Interest	_____
Construction Insurance	_____
Permanent Loan Fees	_____
Title and Recording Fees	_____
As-Built Survey	_____
Other:	_____

Professional Services	Subtotal:	\$ _____
Architectural Fees		_____
Engineering Fees		_____
Attorney Fees		_____
Accounting		_____
	Subtotal:	\$ _____

Local Government Fees		
Building Permits		_____
Water Tap Fees		_____
Sewer Tap Fees		_____
	Subtotal:	\$ _____

Developer's Fee		
Developer's Overhead		_____
Consultant's Fee		_____
Short-term Reserves (held for less than life of loan)		_____
Developer's Fee		_____
	Subtotal:	\$ _____

Start –Up and Reserves		
Rent-up Reserve/Working Capital (longer than life of loan)		_____
Marketing		_____
Operating Deficit Reserve		_____
Replacement Reserve		_____
Other:		_____
Other:		_____
Other:		_____
	Subtotal:	\$ _____

Total Development Budget: \$ _____

SOURCES OF FUNDING FOR PROJECT:

Provide all sources of funding and supporting documents, (i.e., bank commitment letter, statement of any federal, state or local government funds committed to the project.)

Source (1)	_____	_____
Source (2)	_____	_____
Source (3)	_____	_____
Source (4)	_____	_____
Source (5)	_____	_____

Total Sources of Funding: **\$** _____

Additional Clarification (if necessary):

NOTE: *You may replicate this page on computer or substitute company documents and substitute the replicated page as part of the application. Please provide concise and informative answers.*

The Business. In narrative form, provide an introduction, history, and description of the qualified business, its products, services, total sales, number of employees, locations (international, national, and in Georgia), description of primary materials purchased, product transportation, etc.

Additional Economic Stimulus. In order to receive an Enterprise Zone designation, a qualifying business must “provide additional economic stimulus in the zone. The quantity and quality of such additional stimulus shall be determined on a case-by-case basis” (24-103(10) of the DeKalb County Enterprise Zone Ordinance) In narrative form please address the additional economic stimulus the proposed project brings to DeKalb County.

