

**DESOTO COUNTY
ECONOMIC DEVELOPMENT INCENTIVE
PROGRAM**

APPLICATION FORM

APPLICANT: _____

DESOTO COUNTY APPLICATION NO.: 2015 - _____

The DeSoto County incentives summarized in this application are not intended to be a binding contract or final statement. The final incentive package will be determined when all qualifications and requirements have been identified and factored into the financial calculations. All incentives are subject to approval by the administrative agency or elected body responsible for the allocation of funds.

Applicants are encouraged to review the summary of incentives and related Ordinances. Applicants are welcome to engage legal representation to review the Application, Contracts and/or Agreements related to the DeSoto County Economic Development Incentive Programs.

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Part I -- Applicant Information

Application completed by: _____
(Name/Title)

(Signature)

(Date)

Primary Contact: _____

Title: _____

Mailing Address:

Phone Number:

Fax Number:

Email Address: _____

Company Website: _____

Applicant's Actual Name (if fictitious name is utilized): _____

Form of Enterprise: _____

(e.g. sole proprietorship, general partnership, corporation, limited partnership or limited liability company)

Parent Company: _____

Applicant's EID Number: _____

State of Formation and Charter Number if Applicant is a corporation, limited partnership or a limited liability company:

State and County of Domicile if Applicant is a sole proprietorship or a general partnership:

Describe primary business activities currently performed at the Applicant's DeSoto County location (if any):

Major Standard Industrial Classification (NAICS or SIC): _____

Business Geography:

- Existing Business - Expansion at Current Site in DeSoto County

- Existing Business - Expansion at New Site in DeSoto County

- Business Relocation to DeSoto County FROM _____

- New Business - New Facility for Existing Company

- Startup - New Company

- Other (Please Describe)

Type of Business:

Check as many as apply below. Identify industry sector (if applicable):

- Wholesale/Distribution Manufacturing Professional Services Construction
- Agriculture Other (explain) _____

Are you considering areas other than DeSoto County: Yes No

What role will this Incentive Program play in the Applicant's decision to locate or expand in DeSoto County?

Part II -- Anticipated Program Benefits

A. Anticipated commencement date of Applicant's DeSoto County operations (relocation or expansion):

B. Anticipated duration of Applicant's Program Participation, in years, if any:

E. Estimated sales derived from outside DeSoto County.

 %

F. Land - Building - Construction - Equipment Values:

1. Value of land to be purchased

2. Value of building to be purchased

3. Value of building or addition to be constructed

4. Value of new capital equipment being purchased

5. Value of capital equipment being transferred to DeSoto County

6. Value of related clustering businesses anticipated to co-locate

Total Capital Investment as will be reflected on property tax rolls (real & personal)

Part IV -- Authorizations and Attachments.

Applicant hereby authorizes DeSoto County to contact credit reporting agencies, and other sources for the purpose of verifying information set forth herein or at any time furnished to County by Applicant. By execution hereof, Applicant represents to County that the information in this Application is true and accurate to the best of Applicant's knowledge and belief.

Signature/Date

Please include the following documents as attachments to this form:

Pro Forma for proposed project and the company's most recent interim period financial statement.

Bank References

Business Plan