



## Economic Development Incentive Inquiry Form

### I. Organization/Corporation Requesting Incentive

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Organization/Corporation Name: \_\_\_\_\_

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

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

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

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

Phone Number: \_\_\_\_\_

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

Name of Owner: \_\_\_\_\_

Parent Company (If Applicable): \_\_\_\_\_

### II. Primary Contact for Yearly Compliance Reports

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

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

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

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

Phone Number: \_\_\_\_\_

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

### III. Description of Project

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Project Location/Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Brief Description of Project:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



*Current Assessed Value (AV) of the Property:*

- 1. Land \_\_\_\_\_
- 2. Building \_\_\_\_\_
- 3. Inventory \_\_\_\_\_
- 4. Equipment \_\_\_\_\_

Have building permits been applied for (if applicable): Yes  No

Has equipment been installed (if applicable): Yes  No

**IV. Required Attachments (As Identified at Time of Initial Meeting)\***

- Legal Description of Property
- Survey / Site Plan
- Company Financial Statement
- Job and Wage Description Information Sheet
- Summary of Benefits (if applicable)
- Employment Phase-In Schedule
- Company Investment Timetable
- Compliance Affidavit

**V. Type of Incentive to be Requested**

MicroLoan  Facade Grant  Economic Development Grant  Other

*Project Details*

Project Size (square feet): \_\_\_\_\_ Size of Site (acres): \_\_\_\_\_

Type of Building:

Multiple Tenants (leased)  Single Tenant (leased)  Owner Occupied  Corporate Headquarters

*Capital Investment:*

- 1. Land value: \_\_\_\_\_
- 2. Total building/improvement costs: \_\_\_\_\_
- 3. Personal property capital investment:
  - a. New Personal Property \_\_\_\_\_
  - b. Existing Personal Property: \_\_\_\_\_
- 4. Total capital investment for proposed project: \_\_\_\_\_

*Jobs Created and/or Retained*

- 1. Estimated number of full time jobs created by the proposed project: \_\_\_\_\_
- 2. Estimated number of full time jobs retained as a direct result of the proposed project: \_\_\_\_\_



3. Total number of full time jobs upon project completion: \_\_\_\_\_

*Wages Created and Retained*

- 1. Average hourly wage rate for new jobs (w/o benefits) \_\_\_\_\_
- 2. Average hourly wage rate for jobs retained (w/o benefits) \_\_\_\_\_

Total anticipated public incentive as % of total project cost \_\_\_\_\_

Please explain why the incentive is necessary to the project. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VI. Company Information**

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How long has the company been in existence? \_\_\_\_\_

Current address of company headquarters and duration at that address:

\_\_\_\_\_

\_\_\_\_\_

Additional business/ operational experience of business owner(s):

\_\_\_\_\_

\_\_\_\_\_

Approximate percentage of employees at current location who live in the Town of Zionsville and/or Boone County: \_\_\_\_\_

Have you ever received an economic development incentive at your current location? Yes  No

If yes, when and for what term?

\_\_\_\_\_

\_\_\_\_\_

\*In addition to answering these questions, please provide required Attachments identified in Section IV.

CONSIDERATION / DISPOSITION FLOW CHART

