

Application for Tax Incentives

Defiance County Economic Development Office
1300 East Second Street, Suite 201
Defiance, Ohio 43512

DEFIANCE COUNTY ENTERPRISE ZONE PROGRAM

This application is the basis of a proposed agreement between **Defiance County** and;

Company Name:

Contact Person:

Address:

Phone #:

City:

Zip:

Fax #:

Project Site Location (if different than above):

Name and title of person authorized to sign agreement:

Name:

Title:

Form of business or enterprise: Corporation Partnership Proprietorship Other

Type of business activity: (Circle all that apply)

Manufacturing

Warehousing Distribution

Headquarters

R&D

SIC Code(s):

Is this project a consolidation? Yes No

If yes, what are the components? (Itemize location(s), assets and employment positions to be transferred on a separate sheet).

Principal **Owners or Officers** of Business:

Name and Title Name and Title CEO

Name and Title Name and Title VP of Pricing & Employee Development

Is the Business seasonal in nature: Yes No

Project Description:**Employment Information:**Current employment in **Ohio**:

Full Time PartTime Permanent Temporary

Current employment level at the proposed project site? _____**Relocation Information****(If not relocating, disregard this section.)****Will the project involve the relocation of employment positions or assets from one Ohio location to another?****YES****NO**

Note: In-State relocation projects are restricted in *non-distress-based* Ohio Enterprise Zones including Defiance County. A waiver from the Director of the Ohio Department of Development is available for special limited circumstances. Advise your Enterprise Zone Manager if you are proposing an in-state relocation, and you are desirous of a waiver from the Department of Development.

If this is an in-state relocation project, identify the location from which employment positions or assets will be relocated, and the location where the employment positions or assets will be relocated to.

From:**To:****Employment at each facility affected by the relocation of employment positions or assets:****Location:****Jobs:****On a separate page, detail the number and type of employment positions or assets to be relocated.**Project will begin: /
(month, year)Completion Date: /
(month, year)

Estimated number of **new employees** the business intends to hire at the facility that is the project site:

Full Time _____ Part Time _____ Permanent _____ Temporary _____

Time frame for proposed new employment hiring: _____ Years.

Estimate the amount of **annual payroll** the **new employees** will add:

Full Time	Part Time	Permanent	Temporary
\$ _____	\$ _____	\$ _____	\$ _____

How many current employment positions will be maintained?

Full Time	Part Time	Permanent	Temporary
_____	_____	_____	_____

*See attached statement regarding employment.

Indicate total payroll relating to **job retention** claims made by the project? _____

Market value of the existing facility as determined for real property taxation. \$ _____
(from County Auditor's office)

Business's current personal property tax value as of this submission? \$ _____
(from personal property tax return)

Value of on-site inventory required to be listed in the personal property tax return of the enterprise in the return for the tax years (stated in average \$ value per most recent twelve-month period) in which the agreement is entered into (baseline inventory). \$ _____

Estimates of amounts to be invested by the enterprise to establish, expand, renovate, or occupy a facility:

A.	Acquisition of Buildings:	\$
B.	Additions/New Construction:	\$
C.	Improvements to Existing Buildings:	\$
D.	Machinery & Equipment	\$
E.	Furniture & Fixtures:	\$
F.	Inventory:	\$
	Total New Project Investment:	\$

Will any machinery and /or equipment in this project be leased? YES NO

Business requests the following tax incentives:

___% for _____ years for real property improvements.

___% for _____ years for personal property improvements.

___% for _____ years for inventory.

Reasons for requesting tax incentives:

Does Company owe: 1) any delinquent taxes to the State of Ohio or a political subdivision of the State, 2) any moneys to the State or a state agency for the administration or enforcement of any environmental laws of the State; and 3) any other moneys to the State, a state agency or a political subdivision of the State that are past due, whether the amounts owed are being contested in a court of law or not.

Yes

No

Applicant agrees to provide additional information upon request of the Enterprise Zone Manager.

Applicant believes that the information contained in, and submitted with, this application is complete and correct.

Name of Enterprise:

Date:

Signature: _____

NOTE: A copy of this proposal must be forwarded by the Enterprise Zone Manager to the affected local Board of Education and include notice of the meeting date on which the local governments will review the proposal. Notice must be given a minimum of fourteen (14) days prior to the scheduled meeting to permit the Board of Education to appear and/or comment before the legislative authorities considering the proposal.

Applicants should note that approval by the Defiance County Board of Commissioners is required before project work begins. Commencing physical work on the project before approval is received may jeopardize incentives.

*****For Economic Development Office Use Only*****

Date received by Enterprise Zone Manager:

Date application forwarded to Board of Education(s) with notice:

Local School Board: Date:
(name)

Vocational School: Date:
(name)

Date application and EZ agreement forwarded to Defiance County Prosecutor's Office for Review:

Date of Township, Village, or City approval:

Date of Defiance County Board of Commissioners' approval:

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(419) 784-4471**