

## Economic Development Assistance Program

### CCIDC Prospective Tenant Application

#### Required Attachments

Please submit the following required documents along with the Economic Development Assistance Application completed in its entirety.

1. Documentation proving ownership, i.e. articles of incorporation and length of ownership. Also, a statement of participation of the owner(s) as to active or passive in the business in Columbus.
2. Three years of audited financial statements by a reputable accounting firm, licensed in the U.S.
3. Three years of corporate tax returns. If there are not three years of corporate tax returns, then personal tax returns.
4. Current Tax certificates.
5. Detailed proforma and business plan including:
  - a. Projected cash flow
  - b. Proposed activities, and detailed list of facilities and utilities needed
  - c. Roll-out dates
  - d. Number and types of employees
  - e. Money the prospective business and/or other investors have already invested in the project to date, i.e. architectural; legal; administrative fees, etc., if any.
  - f. Proposed beneficial economic impact on the City of Columbus and surrounding area
6. A professional resume of the owner(s). The resume must demonstrate a solid track record and proven ability to manage a project of the type and scope being proposed.
7. Professional and banking references for the principal(s) involved in this project.
8. Any loans approved or pre-qualification documents from prospective lenders, if any at this time.
9. Identification and description of:
  - a. Money the prospective business owner(s) plan to invest out-of-pocket.
  - b. Identification and description of collateral (money, investments, property, etc.) that the business owners currently own and will pledge as collateral for possible economic assistance.

Once these documents are received and reviewed, there may be additional information requested.

All information received by the CCIDC will be kept in the strictest confidence.

N.B. no mineral rights to the land owned by CCIDC will be transferred to a prospective business, only surface rights.

### Application Submission

Submit the completed application by mail or in person to:  
 Columbus Community & Industrial Development Corporation  
 P.O. Box 98  
 Columbus, Texas 78934  
 All documentation and correspondence to the CCIDC and its affiliates will be kept in strictest confidence.

### COMPANY INFORMATION

Applicant Business Name		
Mailing Address		
City	State	Zip Code
Phone	Fax	E-Mail
Applicant Representative		
Mailing Address		
City	State	Zip Code
Phone	Fax	E-Mail

### COMPANY DESCRIPTION

Description of Company		Year Established
SIC Code <sup>1</sup>	SIC Code Description	
Past three year sales average	Will product line be different going forward and if so, how?	
Projected Annual Sales <sup>2</sup>	Increase in Columbus	Percent subject to sales tax
Projected annual facility purchases <sup>3</sup>	Percent purchased in Columbus	
Purchases of raw materials from local manufacturers or suppliers <sup>4</sup> and if so, identify the local supply and estimate the dollar value on an annual basis		
SIC Code	SIC Code Description	
Current annual purchase	Projected Increase	

Projected average inventory on hand in the beginning
Projected average inventory on hand in three years
Projected value of equipment (manufacturing or otherwise) to be installed for business use
Projections for increase or decrease of equipment to be installed in three years
<p>1. SIC Code: Standard Industrial Classification Code</p> <p>2. Annual Sales in Columbus, Texas: Estimated sales to Columbus citizens. If you will have no Columbus customers, enter "none".</p> <p>3. Annual Facility Purchases: Annual purchases of operating items such as office supplies, cleaning supplies, etc. that are subject to sales tax.</p> <p>4. Purchases of Raw Materials from Local Manufacturers: Purchases of raw materials used in the manufacturing process that are NOT subject to sales tax.</p>

UTILITY USAGE INFORMATION
See attached utility usage information sheet

EMPLOYMENT INFORMATION					
Projected Number of Employees (FTE)			Annual Payroll		
Number Salaried Employees			Number of Hourly Employees		
Range of Annual Salaries			Range of Hourly Wages		
Projected Weighted Average Mean of Annual Salaries			Projected Weighted Average Mean of Hourly Wages		
Percent Previously Unemployed			Health Plan Yes      No		
Retirement/401K Yes      No		Vacation (#/year) Yes      No		Sick Days (#/year) Yes      No	
Paid Holidays (#/year) Yes      No		Profit Sharing Yes      No		Dental Insurance Yes      No	
Life Insurance Yes      No		Disability Insurance Yes      No		Tuition Assistance Yes      No	
Flexitime Yes      No		Daycare Yes      No		EAP Yes      No	

<b>ECONOMIC DEVELOPMENT ASSISTANCE REQUESTED</b>		
<b>Tax Abatement</b> <i>Yes    No</i>	<b>First Year of Abatement</b>	<b>Abatement Schedule Requested<sup>5</sup></b>
<b>Financial Assistance Requested (Amount)</b>		
<b>Explanation/Justification</b>		
<b>Other Assistance Requested</b>		
<b>Explanation/Justification</b>		
<p><b>5. Abatement Schedule Requested: Please refer to the City of Columbus/Columbus Community and Industrial Development Corporation tax abatement policy to determine the applicable tax abatement schedule.</b></p>		

## Utility Usage Information

### Water:

Average Daily Usage: GPD

Average Monthly Usage (1,000 gallons)

Peak Usage: GPM

Required System Pressure: PSI

### Natural Gas:

Average Daily Usage: (MMCF)

Average Monthly Usage:(MMCF)

Hourly Peak Usage: (MMCF/Hr)

Required System Pressure: PSI

### Wastewater:

Average Daily Flow: GPD

Average Monthly Flow: MGD

2-Hour Peak Flow: GPH

Strength of Effluent:

BOD: mg/l

COD: mg/l

TSS: mg/l

pH

Pre-treatment process (if any):

**BANK REFERENCE INFORMATION AND AUTHORIZATION**

Please provide CCICD with your banking information:

\_\_\_\_\_  
Name of bank

\_\_\_\_\_  
Street address or P.O. Box

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Banking Officer's name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
email address

\_\_\_\_\_  
How long have you had a relationship with bank

\_\_\_\_\_  
Number of loans and outstanding balances

**AUTHORIZATION GIVING CCICD THE ABILITY TO TALK DIRECTLY WITH YOUR BANKING OFFICER**

I, \_\_\_\_\_ do hereby authorized an appointed  
(Officer of the company)  
representative(s) of the Columbus Community and Industrial Development(CCICD) board to contact the  
bank listed above for the purpose of discussing financial background, relationship and any other  
information deemed necessary to allow CCICD to make a decision on the land grant being requested by

\_\_\_\_\_  
(name of company)

\_\_\_\_\_  
Signature of officer

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date