

Date of Application: _____ / _____ / _____

COMPANY INFORMATION

Business Name: _____

Address: _____

Website: _____

Contact Person: _____

Title: _____ Phone: _____

Email: _____

Type of business: _____

Product or services provided: _____

The applicant is a: Sole proprietorship Partnership C Corp S Corp LLC LLP

Names, addresses, titles and percentage of ownership of all owners, officers, directors and shareholders (who own 10% or more shares) of the company. (Supply attachments if needed.)

Name	Title	Address	% Owned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PROJECT INFORMATION

Purpose of Requested Financing: Expansion of existing facility New Facility

Project address: _____

Nature of project or activity for which assistance is requested (attach additional sheets if necessary):

Activities to be carried out in the building and/or the site: _____

Building size (in sq. ft.) if available: _____

Target date for Construction start: _____ Construction completion: _____

Preliminary site plan, if available: Please attach

Architectural rendering of proposed building, if available: Please attach



PROJECT INFORMATION (CONT.)

Are you located in the City of Eau Claire currently? Yes No

Total Company Employment (Full-time): _____

Total Eau Claire Employment (Full-time) **before** this project: _____

Total Eau Claire Employment (Full-time) **after** this project: _____

This project will retain and created the following number of full-time positions: (Full time = 2,080 hrs/year)

Average Hourly Wage	Positions Retained	Number of New Positions Created					Total Retained & Created
		Year 1	Year 2	Year 3	Year 4	Year 5	
below \$9.83							
\$9.83 - \$12.99							
\$13.00 - \$16.24							
\$16.25 - \$20.00							
\$20.01 - \$25.00							
\$25.01 - above							

Approximate annual sales (company-wide or Eau Claire branch only?) \$ _____

Length of time in business: _____ Length of time in business in Eau Claire: _____

Do you have facilities in other locations? If so, where? _____

The Company will provide the following Employee Benefits: Health Insurance Pension Tuition Reimbursement
 Dental insurance 401 (k) Other:
 Life Insurance Childcare

Company will institute a training program in Eau Claire to meet the skill needs of the company within 1 year. Yes No

Will the new construction comply with the LEED Green Building principles? Yes No

What environmentally sustainable practices will this project implement?

How will this project have a positive impact on the economy of the city?

LOAN INFORMATION

Have you applied for conventional financing?

Yes Describe: _____

No Why not?: _____



LOAN INFORMATION (CONT.)

Project Cost and Financing	
Land	\$ _____
Building	\$ _____
Capital Equipment	\$ _____
Other: _____	\$ _____
_____	\$ _____
Total Project Cost	\$ _____
Less Equity	(\$ _____)
Less Other Financing (List):	
_____	(\$ _____)
_____	(\$ _____)
_____	(\$ _____)
IRB Request	\$ _____

OTHER INFORMATION

Please attach:

- Financial Statements for the two most previous year ends
- Fiscal Year-to-Date

Bond Counsel (recognized Bond Counsel is required): _____

Corporate Counsel: _____

(Please note that the City will also be represented by Bond Counsel, at applicant's expense.)

Have you ever been in bankruptcy or defaulted on any bond or mortgage commitment?

If so, give details: _____

I/we certify that I/we have read the *IRB Guidelines* and *Policy and Criteria for the Review of Municipal Industrial Revenue Bond Financing Applications* documents and that all provisions listed in these documents will be complied with. I/we hereby certify that the information contained in this application and any supplements or attachments hereto is true, complete, and accurate. I/we realize that this document is just an application for a loan. A loan request shall not be considered approved until formal approval is made by the governing committee, board, or council.

Signature

Signature

Title

Title

Date

Date

