

CITY OF PRINCETON

Incentive Application



Company: _____

Address: _____

Website: _____

Ownership: Private Public

Headquarters Location (where the company's officers direct, control and coordinate the entity's activities):

City/State: _____

Business Structure (i.e., Proprietorship, Partnership, Corporation): _____

State of registration or incorporation: _____

Project Details:

1. List other communities that are being considered for the project:

2. Why is an incentive necessary for the project to succeed financially:

3. Indicate any incentives sought or received from other taxing entities in connection with this project:

4. Describe the project, including capital improvements (real and personal property) to be undertaken, the facility's use, and the product or service to be produced:

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5. Classification (i.e. Agribusiness, Aviation/Aerospace, Biotechnology, Corporate/Regional Headquarters, Retail, Professional Services, Environmental/Clean/Green Technology, Finance, Information Technology, Security, Logistics and Distribution, Manufacturing):

6. Check the following that applied:

New Construction

Expansion

Improvements

7. Improvement Values:

Real Property: \$ _____

Personal Property: \$ _____

Inventory/Supplies: \$ _____

8. Start Date (MM/YY): _____

Completion Date: _____

| Year | Investment |
|--------|------------|
| Year 1 | \$ _____ |
| Year 2 | \$ _____ |
| Year 3 | \$ _____ |
| Year 4 | \$ _____ |
| Year 5 | \$ _____ |

9. Does/will the applicant own or lease the project's real property:

Own

Lease

If leased, indicate the landlord/owner: _____

If leased, indicate lease term: _____ Years

Expiration Date: _____

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10. Total Global Workforce:

Full-time: _____ Part-time: _____ Seasonal: _____

11. Current Local Workforce:

Full-time: _____ Part-time: _____ Seasonal: _____

12. Minimum number of new, full time jobs to be created (total):

| Year | Jobs |
|--------|------|
| Year 1 | |
| Year 2 | |
| Year 3 | |
| Year 4 | |
| Year 5 | |

13. Project impact on the following job classifications (at full operations):

| | Managerial /Executive | Professional | Clerical | Other (Identify) |
|---|-----------------------|--------------|----------|------------------|
| Number of full-time employees: | | | | |
| Number to be filled by relocated workers: | | | | |
| Salary Range: | | | | |
| Minimum Hourly Rate: | | | | |

14. Average Annual Salary of Existing Jobs: \$ _____

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15. Average Annual Salary including Projected New Jobs: \$ _____

16. Describe the investment in training/education for new, full-time jobs created and recruitment policies:

17. Describe the benefits package that will be offered to employees and their dependents:

18. Is any interest in this project presently held by an elected, appointed or employed member of any taxing entity:

Yes

No

19. Describe any goodwill benefits and involvement that the applicant has previously provided and/or is committed to providing the future to the community:

Attachments

- Information regarding the applicant company's description
- Business Plan
- Financial Gap Analysis
- Site Survey showing the location of existing and proposed improvements