

# Application for Incentives/Business Information Form



**Business Applicant Name:** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_

Legal name of business: \_\_\_\_\_

LLC  Inc.  Other: \_\_\_\_\_

Principal Owner(s) Name(s) & Title(s): \_\_\_\_\_

Person(s) authorized to commit your firm to a contract: \_\_\_\_\_

Email(s): \_\_\_\_\_ Phone \_\_\_\_\_

Number(s): \_\_\_\_\_

Physical Address: \_\_\_\_\_  Own  Lease

If land/building is being purchased, what is the projected closing date: \_\_\_\_\_

If land/building is owned, what is the acreage and value: \_\_\_\_\_

Will land/building be titled in a different name? \_\_\_\_\_

Projected Ground Breaking Month/Year: \_\_\_\_\_ Projected Completion Month/Year: \_\_\_\_\_

New  Relocation  Expansion, if Expansion, what is the current number of on-site full-time jobs: \_\_\_\_\_

If Relocation or Expansion, number of years in business/ location: \_\_\_\_\_

Will project have high visibility, image impact, or be located near a gateway of the City, or contribute to the aesthetic appeal in the design and materials of the building, landscape or greenspace?  No  Yes, If Yes, explain: \_\_\_\_\_

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Did project request a variance from the City of Sealy's code of ordinances?  No  Yes: \_\_\_\_\_

Is project LEED Certified?  No  Yes

Type of Business:  Manufacturing Only  Manufacturing and Sales  Retail  Technology  Restaurant/Entertainment  
 Service  Distribution  Cold Storage  Winery/Brewery  Food Sales/Service  Other: \_\_\_\_\_

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Describe: \_\_\_\_\_

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

TCEQ Permit required:  No  Yes,  
 Explain: \_\_\_\_\_

Any other Permits or Licenses required, other than City permits: \_\_\_\_\_

Does project pose any negative operational, visual or other impacts, such as noise or traffic congestion?  No  Yes  
 If Yes, explain: \_\_\_\_\_

Will there be heavy truck traffic to and from the site on a regular basis?  No  Yes: \_\_\_\_\_

Will a traffic study be initiated by the Project?  No  Yes

Number of Phases:  
 One Phase, Describe: \_\_\_\_\_  
 Two Phases, Describe Phase 2: \_\_\_\_\_

Time to begin Phase 2 following completion of Phase 1: \_\_\_\_\_  
 Three, Describe: \_\_\_\_\_

NAICS (North American Industry Classification) CODE: \_\_\_\_\_

How will project be funded:  Cash  Loan: Details - \_\_\_\_\_

FEIN: \_\_\_\_\_ TID: \_\_\_\_\_

Site location/Project Considerable Features:  
 Rehabilitation Project  Supports City's Comp Plan  
 Unique or unequalled contribution to Sealy  
 Desirable aesthetic appeal  Beautification Project

If any considerable features are included, please describe: \_\_\_\_\_

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Will infrastructure construction be required for the site?  No  Yes, If Yes, what are you requiring from the City?  Water  Sewer  Gas,  
 Describe: \_\_\_\_\_

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What will your contribution be? \_\_\_\_\_

Are you considering other Texas locations?  No  Yes: If Yes, please indicate where: \_\_\_\_\_

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What type of incentives/assistance are you seeking from the EDC / City of Sealy?  
 Assistance with getting infrastructure to the site \$ \_\_\_\_\_ Type: \_\_\_\_\_  
 Utility taps \$ \_\_\_\_\_  Impact Fees \$ \_\_\_\_\_  
 Building Permits \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_  
 Tax Abatement



**THE INFORMATION ON THE FOLLOWING PAGES IS REQUIRED FOR APPLICATION FOR ALL TYPES OF INCENTIVES:**

Capital Investment:	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	TOTAL
LAND Acreage: _____	\$	\$	\$	\$	\$	\$
BUILDING  Size: _____	\$  Percentage of cost for LABOR:  _____%  Percentage of cost for MATERIALS:  _____%  Percentage of materials that are taxable supplies:  _____%	\$  Percentage of cost for LABOR:  _____%  Percentage of cost for MATERIALS:  _____%  Percentage of materials that are taxable supplies:  _____%	\$  Percentage of cost for LABOR:  _____%  Percentage of cost for MATERIALS:  _____%  Percentage of materials that are taxable supplies:  _____%	\$  Percentage of cost for LABOR:  _____%  Percentage of cost for MATERIALS:  _____%  Percentage of materials that are taxable supplies:  _____%	\$  Percentage of cost for LABOR:  _____%  Percentage of cost for MATERIALS:  _____%  Percentage of materials that are taxable supplies:  _____%	\$
EQUIPMENT	\$  Equipment purchases: <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt <i>Machinery and equipment used in manufacturing or processing operations are not taxable</i>	\$  Equipment purchases: <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt <i>Machinery and equipment used in manufacturing or processing operations are not taxable</i>	\$  Equipment purchases: <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt <i>Machinery and equipment used in manufacturing or processing operations are not taxable</i>	\$  Equipment purchases: <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt <i>Machinery and equipment used in manufacturing or processing operations are not taxable</i>	\$  Equipment purchases: <input type="checkbox"/> Taxable <input type="checkbox"/> Tax Exempt <i>Machinery and equipment used in manufacturing or processing operations are not taxable</i>	\$
FURNITURE/FIXTURES THAT ARE SUBJECT TO SALES TAX	\$	\$	\$	\$	\$	\$
BUILDING PERMIT Fees	\$	\$	\$	\$	\$	\$
TOTAL CAPITAL INVESTMENT:	\$	\$	\$	\$	\$	\$
<b>Direct Pay Requested Information:</b>	ELIGIBLE \$800K or more of taxable purchases during construction each year of project	Will Participate	Year 1 Taxable Purchases for Construction	Year 2 Taxable Purchases for Construction	Year 3 Taxable Purchases for Construction	Year 4 Taxable Purchases for Construction
<b>Response:</b>	Indicate Eligibility: <input type="checkbox"/> Yes <input type="checkbox"/> No	Indicate if you are willing to participate: <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____ <i>EDC USE ONLY:</i> EDC revenue \$ _____ COS revenue \$ _____	\$ _____ <i>EDC USE ONLY:</i> EDC revenue \$ _____ COS revenue \$ _____	\$ _____ <i>EDC USE ONLY:</i> EDC revenue \$ _____ COS revenue \$ _____	\$ _____ <i>EDC USE ONLY:</i> EDC revenue \$ _____ COS revenue \$ _____
<b>ON SITE Full-time Jobs:</b>	New Created:	New Jobs Created - Year 1	New Jobs Created - Year 2	New Jobs Created - Year 3	New Jobs Created - Year 4	New Jobs Created - Year 5

Only list those jobs that will work on-site, not remote workers. If you have remote workers please list on a separate piece of paper.	_____ - _____ TOTAL JOBS Created between years 1 – 5	# _____	# _____	# _____	# _____	# _____
<b>Wages/Salary:</b>	<b>CHOOSE:</b> <input type="checkbox"/> Minimum wage  <input type="checkbox"/> National median income for NAICS per Bureau of Labor Statistics \$ _____ / HR  <input type="checkbox"/> Top tier 15% over national median \$ _____  <input type="checkbox"/> Other: \$ _____  <b>Please choose:</b> Percentage of annual increase in wages over national average: <input type="checkbox"/> 2% <input type="checkbox"/> 3%	<b>Benefits:</b> <input type="checkbox"/> Health Insurance, 50% or more paid by employer  <input type="checkbox"/> Dental/Vision Insurance  <input type="checkbox"/> Profit Sharing  <input type="checkbox"/> Retirement/ 401K  <input type="checkbox"/> Disability Insurance  <input type="checkbox"/> Life Insurance  <input type="checkbox"/> Vacation days: _____  <input type="checkbox"/> Sick days: _____  <input type="checkbox"/> Paid holidays _____	<b>Submit an attachment with description of all job types, wages/salaries, and relevant employment information for all staff that will be employed on the site.</b>			
<b>Percentage of new employees relocating to Sealy</b>	<input type="checkbox"/> 20% <input type="checkbox"/> 50% <input type="checkbox"/> 30% <input type="checkbox"/> 60% <input type="checkbox"/> 40% <input type="checkbox"/> 75%					
<b>Company's annual taxable purchases in the City of Sealy</b> (Materials, supplies, services)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
<input type="checkbox"/> 2% annual increase <input type="checkbox"/> 3% annual increase	\$	\$	\$	\$	\$	\$
<b>Taxable Inventory Value at the end of each year, Years 1-5</b>	Year 1	Year 2	Year 3	Year 4	Year 5	
<input type="checkbox"/> 2% annual increase <input type="checkbox"/> 3% annual increase	\$	\$	\$	\$	\$	CONTINUED NEXT PAGE
<b>Taxable Inventory Value at the end of each year, Years 6-10</b>	Year 6	Year 7	Year 8	Year 9	Year 10	
<input type="checkbox"/> 2% annual increase <input type="checkbox"/> 3% annual increase	\$	\$	\$	\$	\$	
<b>Annual Taxable Sales</b>	Year 1	Year 2	Year 3	Year 4	Year 5	
<input type="checkbox"/> 2% annual increase <input type="checkbox"/> 3% annual increase	\$	\$	\$	\$	\$	
<b>Estimated Utility Usage/ Requirements IF KNOWN -</b>	<b>WATER</b> Select: <input type="checkbox"/> Per Day <input type="checkbox"/> Per Month	<b>WASTEWATER</b> Select: <input type="checkbox"/> Per Day <input type="checkbox"/> Per Month	<b>SOLID WASTE</b> Select: <input type="checkbox"/> Per Day <input type="checkbox"/> Per Month	<b>ELECTRICITY</b> Select: <input type="checkbox"/> Per Day <input type="checkbox"/> Per Month	<b>NATURAL GAS</b> Select: <input type="checkbox"/> Per Day <input type="checkbox"/> Per Month	<b>OTHER:</b>
<b>MONTHLY PURCHASES:</b> <i>Please respond if known, otherwise indicate N/A:</i>	\$	\$	\$	\$	\$	\$
<b>Estimated TOTAL Annual Utility Expenses</b>	\$	\$	\$	\$	\$	

**THE INFORMATION ON THE FOLLOWING PAGES IS REQUIRED FOR APPLICATION FOR ALL TYPES OF INCENTIVES:**

Please ensure that the following items have a response or are attached with your submission:

- Map** showing the location of the proposed site/project
- Property description**
- Plat of proposed site property**, demonstrating the number and location of all proposed improvements of the property
- Where will inventory be stored?** \_\_\_\_\_
- Detailed report of employment opportunities, wages/salaries**
- Current financial statement/Proof of financial health –**

List item attached: \_\_\_\_\_

**In the case of MODERNIZATION, include:**

- statement of the assessed value of the facility separately stated for real and personal property for the tax year immediately preceding the application.**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant Signature/ Title

\_\_\_\_\_  
Date

Thank you for completing the City of Sealy/Sealy EDC’s Impact Analysis Business Information Form. Please submit this form to the emails listed below. We appreciate your interest in considering Sealy, Texas.

**EDC INCENTIVES REQUEST** - Please return the completed application to:

Sealy EDC Executive Director		979-627-6121
Katherine Ellis, SEDC Deputy Executive Director	<a href="mailto:kellis@ci.sealy.tx.us">kellis@ci.sealy.tx.us</a>	979-627-6127
Sealy EDC, P.O. Box 517 330 Main Street Suite 8, Sealy, Texas 77474		

**CITY OF SEALY TAX ABATEMENT REQUEST** – Please return the completed application to:

Kimbra Hill, City Manager	<a href="mailto:khill@ci.sealy.tx.us">khill@ci.sealy.tx.us</a>	979-627-6106
Sandra Vrablec, City Secretary	<a href="mailto:svrablec@ci.sealy.tx.us">svrablec@ci.sealy.tx.us</a>	979-627-6116