TAX INCENTIVE AGREEMENT APPLICATION NEW BUSINESS IN GENERAL COMMERCIAL DISTRICT C-2

GENERAL INFORMATION

Business Name:	Owner's Name:
Mailing Address:	Mailing Address
Physical Address:	Physical Address:
City, State, Zip:	City, State, Zip:
Phone Number:	Phone Number:
SITE, BUILDING & BUSINESS INFORMATION (Attach a rendering of the proposed building and site plan.)	
Site Dimensions:	Building Size:
Business Type:	Development Cost Estimate: \$
Retail Items or Services Offered:	
EMPLOYMENT INFORMATION	
Number of FTE: Number of PTE:	Number of Management Staff:
Average Wage/Hr of FTE: Average W	age/Hr of PTE:
Are employees covered by a benefit plan? Full-Time? Part-Time?	
FINANCIAL INFORMATION	
Estimated Annual Sales Subject to Sales Tax:	
Low: \$ High: \$	Average \$
Signature of Applicant	Date
Printed Name	