



Attracting private capital to Northeast Ohio for public good!

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# ***PROJECT APPLICATION***

## ***JOBS AND INVESTMENT BOND FUND and ENERGY EFFICIENCY LOAN FUND***

**1. Applicant Company/User**

Company or Project Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Federal Tax Identification Number \_\_\_\_\_ NAICS/SIC Code \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Telephone (office) \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_

Web site \_\_\_\_\_

**2. Principal Officers/Owners only if company is privately held (10% ownership or more)**

1.) Name and Title \_\_\_\_\_

Percent of Ownership \_\_\_\_\_ Social Security # \_\_\_\_\_ Ever filed for bankruptcy? \_\_\_\_\_

2.) Name and Title \_\_\_\_\_

Percent of Ownership \_\_\_\_\_ Social Security # \_\_\_\_\_ Ever filed for bankruptcy? \_\_\_\_\_

**3. Information on Existing Business (Attach additional information/brochures if necessary)**

Type of Business \_\_\_\_\_ Date Established \_\_\_\_\_

Principal Product/Service \_\_\_\_\_

Number of: Full Time Employees \_\_\_\_\_ Part Time Employees \_\_\_\_\_

Payroll: Full Time Employees \$ \_\_\_\_\_ Part Time Employees \$ \_\_\_\_\_

Benefits (check all that apply): Health Care \_\_\_ 401K match \_\_\_ Other \_\_\_\_\_

**Bank References – (List banks in which business has existing accounts.)**

1.) Bank Name \_\_\_\_\_

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

2.) Bank Name \_\_\_\_\_

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

3.) Bank Name \_\_\_\_\_

Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

**4. Description of Proposed Project**

Location \_\_\_\_\_

Address \_\_\_\_\_

City/Village/Township \_\_\_\_\_ County \_\_\_\_\_

If relocation, please indicate from where \_\_\_\_\_

Within 3 years of completion, how many full time & part time jobs will be created and payroll for each?

Full time \_\_\_\_\_ \$ \_\_\_\_\_ Part time \_\_\_\_\_ \$ \_\_\_\_\_

How many employees do you have at this location? \_\_\_\_\_ How many in the State of Ohio? \_\_\_\_\_

Project Description (attach additional pages if necessary) \_\_\_\_\_

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

Projected Project Start Date: \_\_\_\_\_ Projected Completion Date: \_\_\_\_\_

Construction Jobs Created: \_\_\_\_\_ Estimated Construction Payroll \$ \_\_\_\_\_

PACE Project \_\_\_ Yes \_\_\_ No. If yes, please complete an ESID application

**5. Project Budget**

***Project Costs***

Land \$ \_\_\_\_\_

Building \$ \_\_\_\_\_

Machinery/Equipment \$ \_\_\_\_\_

Other (if applicable) \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Total Project Costs \$ \_\_\_\_\_

***Project Funding***

Owner Equity (min. 10% of project) \$ \_\_\_\_\_

Development Finance Authority Funding (requested) \$ \_\_\_\_\_

Other (if applicable) \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Total Project Funding \$ \_\_\_\_\_

If any of the identified project costs will be to improve energy efficiency (e.g. lighting, windows/doors, roof/solar panels), what are the costs associated for those improvements? \$ \_\_\_\_\_

**6. Documentation**

**The following information must be submitted with your Project Application to receive consideration:**

- Three (3) years of historical, Financial Statements (balance sheet, P & L)
- Most current Interim Financial Statements (not more than 90 days old)
- Brief history of existing business
- Any other information that you feel will assist in the review of your project

***Additional information will be required during due diligence process.***

**7. Equal Opportunity**

All programs of the Development Finance Authority of Summit County (DFA) are offered on a nondiscriminatory basis, without regard to race, color, national origin, religion, sex, age or disability.

**8. Application Fee Schedule**

All application fees are payable upon submission of application and are non-refundable. Please contact DFA staff to determine application fee. Additional fees apply upon issuance/closing of the bonds.

**9. Submission Acknowledgment**

As an authorized agent of the Applicant Company, I hereby submit this Project Application. I understand that any false statement in this record may subject the Applicant Company and signer to criminal prosecution. I understand that additional information will be required. I also understand that this document in no way constitutes a commitment of funds by the Development Finance Authority of Summit County and any of its loan programs. This is also an acknowledgment that I have been provided a copy of the "Preferred Contractor Policy" of the Development Finance Authority.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name, Title

\_\_\_\_\_  
Date