

WEST VIRGINIA INFRASTRUCTURE AND JOBS DEVELOPMENT COUNCIL ECONOMIC INFRASTRUCTURE FUND

SECTION I.

PRELIMINARY APPLICATION

A. APPLICANT INFORMATION

1. Applicant: _____

2. Address: _____

3. Telephone Number: () _____
Fax Number: () _____

4. Contact Person: _____

Telephone Number: () _____
Fax Number: () _____

5. Corporate Address (if different from above):

6. Federal Tax I.D. Number: _____

7. Workers' Compensation Number: _____

B. AUTHORIZED REPRESENTATIVE OF APPLICANT

Name: _____

Address: _____

Telephone Number: () _____
Fax Number: () _____

C. LOCAL DEVELOPMENT AUTHORITY SPONSORSHIP (All applications must be sponsored by an LDA)

Name: _____

Address: _____

Telephone: () _____ Fax: () _____

Contact Person: _____

D. APPLICANT CLASSIFICATION

1) Applicant is (or will be if not yet in existence):

- | | |
|-------------------------------------|-------------------------|
| _____ Corporation (For-Profit) | _____ Joint Venture |
| _____ Corporation (Not-For-Profit) | _____ Government Entity |
| _____ Limited Liability Corporation | _____ Sole Proprietor |
| _____ General Partnership | _____ |

2) Incorporated in or formed in the State of :

E. LEGAL COUNSEL

Name: _____
Firm: _____
Address: _____
Telephone: () _____ Fax () _____

F. PRIMARY BANKING RELATIONSHIP

Bank Name: _____
Address: _____
Contact Person: _____ Title: _____
Telephone: () _____ Fax: () _____

G. ARCHITECTURAL OR ENGINEERING CONSULTANTS

Firm Name: _____
Address: _____
Contact Person: _____ Title: _____
Telephone: () _____ Fax: () _____

H. APPLICANT'S SUBSIDIARIES OR AFFILIATES

Firm Name: _____
Address: _____

I. OTHER LOCATIONS WHERE APPLICANT OPERATES

D. BREAKDOWN OF PROJECT COSTS

	TOTAL	IJDC FUNDING
1. Construction Cost	\$ _____	\$ _____
2. Land Acquisition Cost	\$ _____	\$ _____
3. Building Acquisition	\$ _____	\$ _____
4. Renovation	\$ _____	\$ _____
5. Site Preparation	\$ _____	\$ _____
6. Machinery/Equipment	\$ _____	\$ _____
7. Access Road	\$ _____	\$ _____
8. Soft Costs		
Eng./Arch. \$ _____		
Legal \$ _____		
Interest During	\$ _____	
Construction \$ _____		
Acct. Fees \$ _____		
Appraisals \$ _____		
Bonds/Ins. \$ _____		
Commitment Fee \$ _____		
Admin. Costs \$ _____		
Project Conting. \$ _____		
 TOTAL SOFT COSTS----->	\$ _____	\$ _____ (Cannot Exceed 10% of Total Soft Costs)
 Total Project Cost----->	\$ _____	\$ _____ (Requested IJDC Participation)

E. FINANCING

IJDC	AMOUNT	RATE	TERM	COLLATERAL	STATUS (PLEASE ATTACH COMMITMENT LETTERS)
OTHER SOURCES:					
1)					
2)					
3)					
4)					
5)					
6)					

F. ALTERNATE FUNDING

What alternate sources of funding have been explored? Why are they unavailable for this project?

G. EXPENDITURE OF FUNDS

- o Estimated date upon which infrastructure project would commence: Date: _____

- o Estimated completion date: Date: _____

- o Please provide estimated engineering schedule for the proposed project.

H. INTERIM FINANCING

- o Infrastructure funding is take-out financing. Who will provide interim financing until such time as project completion and loan closing has occurred?
(Please attach commitments for interim financing)

SECTION III.

CORPORATE INFORMATION
(IF APPLICABLE)

A. OFFICERS, STOCKHOLDERS, AND KEY PERSONNEL

Include management, officers, and stockholders owning 10% or more of the company's stock.
Publicly held companies may substitute a copy of annual report or 10K.

NAME	POSITION	Years Employed	Age	Annual Salary	Other Comp.	% Ownership

B. PRINCIPAL CUSTOMERS

NAME	CITY/STATE	PRODUCTS	ANNUAL PURCHASES	% OF TOTAL SALES
			\$	
			\$	%
			\$	%
			\$	%
			\$	%
			\$	%

C. PRINCIPAL SUPPLIERS

NAME	CITY/STATE	PRODUCTS	ANNUAL AMT PURCHASED	% OF TOTAL SALES
			\$	
			\$	%
			\$	%
			\$	%
			\$	%
			\$	%

D. PRINCIPAL COMPETITORS

NAME	CITY/STATE	PRODUCTS	ESTIMATED ANNUAL SALES

E. BANKING RELATIONSHIP

FINANCIAL INSTITUTION	TYPE OF ACCOUNT	ACCOUNT BALANCE	If loan, specify type of loan, monthly payment, and whether unsecured or collateralized
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

F. CORPORATE HISTORY (referring to company, principal officers, and major stockholders)

- 1. Yes No Have you ever been involved in bankruptcy or insolvency proceedings?
- 2. Yes No Are there any outstanding judgments or is there any litigation pending against the applicant, project occupant, principal officers, or principal shareholders?
- 3. Yes No Has an option agreement or a contract to purchase the real estate been executed? (If yes, please submit a copy of the executed agreement or contract)
- 4. Yes No Is there a relationship, legally or by common control, between the applicant or proposed project occupant and the seller of the property?
- 5. Yes No Will the proposed project result in the consolidation of other company operations within the State?
- 6. Yes No Will the proposed project eliminate existing jobs?
- 7. Yes No Will the proposed project compete with existing jobs?

1--If the answer to any of the above questions is "yes," please submit additional information on attached sheets.

SECTION IV. PUBLIC UTILITY SERVICES NEEDS

A. WATER SERVICE INFORMATION

1. Name of potential or existing provider: _____
2. Distance of proposed site to the provider's nearest main and size of main and major components required (i.e., pump stations, booster stations, storage tanks, etc.)
 - Distance: _____ feet
 - Line Size: _____ inches
 - Major Components: _____
3. Has contact been made with the utility provider? Yes _____ No _____

If yes, list the individual contacted and explain what conclusions have been reached:

4. If services will not be provided by an existing utility, please describe the proposed facilities or the site:

5. Estimated usage of service: _____ gallons per day

B. WASTEWATER SERVICE INFORMATION

1. Name of potential existing provider: _____
2. Distance of proposed site to the provider's nearest main and size of main and major components required (i.e., pump stations, booster stations, storage tanks, etc.)
 - Distance: _____ feet
 - Line Size: _____ inches
 - Major Components: _____
3. Has contract been made with the utility provider? Yes _____ No _____

If yes, list the individual contacted and explain what conclusions have been reached:

4. If services will not be provided by an existing utility, please describe the proposed facilities for the site:

5. Estimated usage of service: _____ gallons per day
6. Character of wastewater discharge (check all that apply):

_____ domestic _____ non-domestic-1

1-If non-domestic is checked, please complete Section V

SECTION V. NON-DOMESTIC WASTEWATER

DISCHARGE INFORMATION

A. Itemize and describe each specific non-domestic discharge.

Discharge	Flow (MGD)		Pollutants Expected To Be Present
	Average	Maximum	

Describe:

B. Is the discharge direct or indirect?

Direct _____ Indirect _____

If this is an indirect discharge, name the publicly-owned treatment works providing treatment:

Has the wastewater treatment plant agreed to treat the non-domestic wastewater? Yes _____ No _____

C. Do Clean Water Act Section 307 effluent guidelines or pretreatment standards apply?

Yes _____ No _____

If yes, specify effluent guidelines that apply:

Are guideline limitations expressed in terms of production? Yes _____ No _____

If yes, specify effluent guidelines that apply:

Calculate guideline-based effluent limitations:

SECTION VI.

JOB CREATION INFORMATION

A. FULL-TIME OR FULL-TIME EQUIVALENTS (FTE) TO BE CREATED

CATEGORY	Number of FTE Employees for the West Virginia Project after				SALARY/WAGE RANGE	HEALTH BENEFITS Yes OR No
	Current	1 YR.	2 YR.	3 YR.		
Professional						
Clerical & Admin.						
Skilled						
Semi-Skilled						
Unskilled						
TOTAL						

Attach a listing of job titles, and indicate the number of FTE positions and the time period for creating the jobs.

B. DESCRIBE BENEFIT PACKAGES

C. IF APPLICABLE, EXPLAIN HOW THE PROJECT WILL RETAIN EXISTING JOBS

D. DESCRIBE THE NUMBER AND NATURE OF TEMPORARY OR SEASONAL JOBS CREATED DURING CONSTRUCTION

E. ATTACH DOCUMENTATION BY THE COMPANY OF THEIR COMMITMENT TO CREATE THE DESCRIBED JOBS

SECTION VII.

LAND ACQUISITION INFORMATION

A. LEGAL DESCRIPTION OF THE PROPERTY

(Please attach an engineering survey showing metes and bounds and locations of buildings, if any)

B. SITE INFORMATION

Number of Acres: _____ Zoning Classification: _____

If under option, attach copy. When does option expire? _____.
(If expiration is within the next 4 months, applicant should be prepared to seek an extension.)

Describe any environmental concerns or unusual topography.

C. PRESENT OWNER OF SITE

Name: _____

Address: _____

Telephone: () _____

(If owned for less than 10 years, attach 10 year history of conveyances.)

D. APPRAISED VALUE: \$ _____ **DATE OF APPRAISAL:** _____

NAME OF APPRAISER: _____

ATTACH A COPY OF THE APPRAISAL

PLEASE PROVIDE THE FOLLOWING ATTACHMENTS:

1. **Agreements:**

Attach copies of options, leases, deeds, and all other appropriate agreements pertaining to the project. If agreements have not been prepared, include a general description of the proposed agreements. Include copies of the commitment letters from the primary lender and a copy of the Inducement Resolution, if financing includes Industrial Revenue Bonds.

2. **Please attach resume(s) or qualification summary of individual(s) who will manage the project operation.**

3. **Personal Financial Statements:**

Please attach personal financial statements of major stockholders, if a privately held company, with specific notation of contingent liabilities (guarantees or endorsements). Statements must be signed and dated by stockholders.

4. **Applicant Financial Statement:**

Please attach three years' financial statements including all footnotes (audited preferred). All statements should conform. If fiscal year ended more than six months from present date, please include interim statements.

Publicly held companies may submit a copy of their annual report or 10K in lieu of the above-requested information.

If the project includes the acquisition of an existing company, please supply the above financial information for the company to be acquired.

5. **Projections:**

Attach projections for the next three years including: (1) Balance Sheets; (2) Profit & Loss Statements; (3) Monthly Cash Flow, showing detailed sources of income, disbursements, and all debt payments; and (4) Amount and Sources of additional working capital required for expansion (i.e., revolving line of credit, trade creditors, etc.).

Signature of Authorized Representative
Verifying Accuracy of Information

Sponsor/Local Development Authority

Signature

Signature

Date

Date

NON COMMENCEMENT STATEMENT

The undersigned duly authorized officers hereby certify that the project as outlined in the foregoing application has not commenced and will not commence prior to the approval of the application by the Council for Community and Economic Development and the Infrastructure Council.

COMPLIANCE WITH ALL APPLICABLE LAWS AND REGULATIONS

The undersigned duly authorized officers hereby certify that the company is in compliance with all applicable federal, state, and local laws and regulations; and does not appear on EPA's List of Violating Facilities.

TAX AND WORKERS' COMPENSATION REVIEW

The undersigned duly authorized officers hereby authorize the State Tax Commissioner and the State Commissioner of Employment Programs to review records relating to the tax returns and Workers' Compensation payments of the undersigned to the State of West Virginia or any of its political subdivisions, together with any particulars found thereon or matters related thereto, and report to the Council for Community and Economic Development on his/her findings to the extent necessary to enable the Council to consider the financial condition of the undersigned and, in particular, its past and prospective relationship to West Virginia's taxing.

CORPORATE RESOLUTION

The undersigned duly authorized officers hereby certify that the filing of this application was duly authorized by its Board of Directors (or governing body), and that the statements made in the foregoing application and in all exhibits and documents submitted in connection therewith are true and correct to the best information and belief of the undersigned and are submitted as a basis of the loan.

NAME OF APPLICANT: _____

By: _____, President Date: _____

Attest: _____, Secretary

State of _____,

County of _____, to wit,

The foregoing instrument was acknowledged before me this _____ day of _____, 19_____.

by _____, on behalf of said corporation.

Notary Public

Date