

**Town of Trophy Club**  
***Application for Economic Development Incentives***

Please respond to the following information and submit the application and supporting information  
to the Town Manager's Office, Attn: Stephen Seidel  
(PH: 682-831-4606, sseidel@trophyclub.org)

**1. CONTACT INFORMATION:**

- A. Company Requesting Incentives: \_\_\_\_\_
- B. Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_
- C. Contact's Company Name: \_\_\_\_\_
- D. Address: \_\_\_\_\_
- E. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_
- F. Email: \_\_\_\_\_ Web Page: \_\_\_\_\_

**2. BASIC DATA:**

- A. Property Location:
  
- B. Total Acreage:

**3. REFERENCES:**

Please provide three (3) client, trade or vendor references:

1. Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

3. Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Please provide two (2) lender references:

1. Lending Institution: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Lending Institution: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

4. **PROJECT CLARIFICATION:** Please describe the following aspects of the project.

A. Intended Use: (e.g. call center, corporate office, professional office, etc.)

B. Is the project a relocation, expansion of existing facility, or new facility to expand operations? If relocation or consolidation, give location of current facilities.

C. Will the occupants of the project be owner or lessees? If lessees, are occupancy commitments already existing?

5. **DEVELOPMENT CONCEPT:** Please describe the concept for development of the project.

D. Building Type: (# of stories, style, materials, etc.)

E. Development Concept: (single building or campus setting, open space, surface or structured parking, acreage, vehicular access, etc.)

6. **TIMING QUESTIONS:** Please provide an estimation of the following timing questions.

<b>Ref</b>	<b>Month / Year</b> (e.g. Jan 2013)	<b>Item</b>
a.		First development application (zoning, site plan, etc.)
b.		Ground breaking
c.		Phase I occupancy

7. **INCENTIVES REQUESTED:** Please describe all incentives requested.

8. **SUPPORTING INFORMATION PROVIDED:**

<u>Yes</u>	<u>No</u>	<u>Item</u>	(10 copies each or B/W original for reproduction)
___	___	Company description	
___	___	Annual Report	
___	___	Cover letter with request	
___	___	Conceptual development layout	
___	___	Applicant company website: _____	
___	___	Photos / graphics / etc.	
___	___	Professional Resume from each Principal and Management:	
___	___	Other:	

9. **Finance Information:**

Please provide financial reports for last three (3) years (balance sheets and income statements). Attached? Yes \_\_\_ No \_\_\_

Please provide most current financial statements (no older than 6 months). Attached? Yes \_\_\_ No \_\_\_

Please provide most recent three (3) years income tax returns. Attached? Yes \_\_\_ No \_\_\_

Please provide a current credit report(s). Attached? Yes \_\_\_ No \_\_\_

Please provide a list of all Stockholders and Officers (everyone who owns ten (10) percent or more and title where applicable. Attached? Yes \_\_\_ No \_\_\_

Please provide most recent three (3) year business plan. Attached? Yes \_\_\_ No \_\_\_

Please provide current business operating statement (last six (6) months). Attached? Yes \_\_\_ No \_\_\_

Please provide a current list of "Aging of Accounts Receivable and Accounts Payable". Attached? Yes \_\_\_ No \_\_\_

Please provide a list of all debt obligations with the following information:

1. Lenders Name
2. Original Loan Amount
3. Current Balance
4. Rate
5. Terms
6. Monthly Payments

Attached? Yes \_\_\_\_ No \_\_\_\_

**10. JOB CREATION OVERVIEW:**

Number of Employees: (Total)		Annual Payroll:	
# of Hourly	Avg. Wage/Hour	# of Salaried	Avg. Annual Salary
Number of Full-time:		Number of Part-time:	
Number of new jobs to be created by this project:			
Five year job creation estimate:		Five year job retention estimate:	
Year 1: _____		Year 1: _____	
Year 2: _____		Year 2: _____	
Year 3: _____		Year 3: _____	
Year 4: _____		Year 4: _____	
Year 5: _____		Year 5: _____	
Number of employees to be hired locally?		Number of minority or economically disadvantaged employees to be hired?	
Benefits Offered:			
Health Plan		Family Coverage Available	
Cost to Employee/Mo		Cost to	
Employee/Mo		Employee/Mo	
Yes / No		Yes / No	
Retirement/401K	Vacation (#/yr)	Sick Days (#/yr)	Paid Holidays (#/yr)
Yes / No			
Profit Sharing	Dental Insurance	Life Insurance	Disability Insurance
Yes / No	Yes / No	Yes / No	Yes / No
Tuition Assistance	Flextime	Daycare	EAP
Yes / No	Yes / No	Yes / No	Yes / No
Expected impact on the Northwest Independent School District:			
Expected impact to the local economy:			

11. **PROJECT SUMMARY:**

<i>Type of Expense &amp; Description</i>	<b>Estimated Cost</b>
Land Acquisition	\$
Site Preparation	\$
Professional Services	\$
Construction	\$
Equipment / Furnishings	\$
Personal Property	\$
Inventory	\$
Other (Describe)	\$
<b>Total Project Development Costs</b>	\$

**Annual Operation and Maintenance**

Personnel / Labor	\$
Supplies	\$
Electric	\$
Gas	\$
Water	\$
Phone	\$
Other Operations & Maintenance Costs	\$
<b>Total Operation &amp; Maintenance Costs</b>	\$
<b>Working Capital Available</b>	\$
<b>Amount of Funding Requested from Trophy Club Economic Development Corporation 4B</b>	\$

12. **GENERAL COMMENTS FROM APPLICANT:** (Provide any comments here)

**Prepared By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Application expires 6 months from the date signed by applicant**