

**SIBLEY COUNTY
BUSINESS ASSISTANCE APPLICATION
TAX ABATEMENT REQUEST**

GENERAL INFORMATION:

Business Name: _____ Date: _____

Address: _____

Type (Corporation, Partnership, etc.): _____

Authorized Representative: _____

Phone: _____ Cell: _____

Fax: _____ E-mail: _____

Description of Business: _____

Attorney: _____

Address: _____

Phone: _____ Fax: _____

FINANCIAL BACKGROUND

1. Have you ever filed for bankruptcy? _____

If yes, explain: _____

2. Have you ever defaulted on any loan commitment? _____

If yes, explain: _____

3. Have you applied for conventional financing for the project? _____

If yes, describe: _____

4. List financial references:

a. _____

b. _____

c. _____

5. Have you ever used Business Assistance Financing before? _____

If yes, what, where and when? _____

PROJECT INFORMATION

1. Location of proposed project: _____

2. Amount of Business Assistance requested: _____

3. Need for Business Assistance: _____

4. Present Ownership of site: _____

5. Number of permanent jobs created as a result of project? _____

6. Estimated annual sales: Present: _____ Future: _____

7. Market value of project following completion: _____

8. Anticipated start date: _____

9. Estimated project related costs: _____

10. Financing sources and dollar amount financed:

a. _____ \$ _____

b. _____ \$ _____

c. _____ \$ _____

d. _____ \$ _____

e. _____ \$ _____

