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| An Ohio Port Authority |
| Project Application |
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| 217 S. Chestnut Street, Ravenna, Ohio 44266 / Phone: 330-297-3470 / Fax: 330-297-3472 |

**A $2,500 non-fundable application fee is to be submitted with the application.**

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| --- | --- | --- |
| Company or Project Name: | | |
| Street Address: | | |
| City: | State: | Zip |
| Federal Tax Identification Number: | | |
| Contact Person: | | Title: |
| Telephone (office): | | Cell phone: |
| E-mail: | | Fax: |
| Web site: | | |

**1. Applicant Company/User**

1. **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? |
| 1. Name and Title: | | |
| Percent of Ownership: | Social Security# | Ever filed for bankruptcy? |

1. **Information on Existing Business (attach additional information/brochures if necessary**)

|  |  |
| --- | --- |
| Type of Business: | |
| Principal Product/Service: | |
| Number of: Full Time Employees Number of Part Time Employees | |
| Payroll: Full Time Employees $ Part Time Employees $ | |
| Date Established: |  |
| Benefits (check all that apply) Health Care 401K match Other | |

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

|  |  |
| --- | --- |
| 1. Bank Name: | |
| Contact: | Phone Number: |
| 1. Bank Name: | |
| Contact: | Phone Number: |
| 1. Bank Name | |
| Contact: | Phone Number: |

1. **Description of Proposed Project**

|  |  |
| --- | --- |
| Location: | |
| Address: | |
| City/Village/Township: | County: |
| If relocation, please indicate from where: | |
| Will new jobs be created: | If yes, how many over 3 year period: |
| How many employees do you have at this location? | How many in the State of Ohio? |

Project Description (attach additional pages if necessary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
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Projected Project Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Projected Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**6. Project Budget**

|  |  |
| --- | --- |
| **Project Costs** | $ |
| Land | $ |
| Building | $ |
| Machinery/Equipment | $ |
| Other (if applicable) | $ |
|  | $ |
|  | $ |
| Total Project Costs | $ |
|  |  |
| **Project Funding** |  |
| Owner Equity (min. 10% of project) | $ |
| Port Authority Funding (desired) | $ |
| Other (if applicable) | $ |
|  | $ |
|  | $ |
|  | $ |
| Total Project Funding | $ |

1. **Documentation**

**For a BOND FUND transaction, 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 business.
* Any other information that you feel will assist in the review of our project.

**For a CONDUIT FINANCING Project, the following information must be submitted with your Project Application to receive consideration:**

* Names of bank/underwriter
* Name of bond counsel
* Any other information that you feel will assist in the review of your project.

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

1. **Equal Opportunity**

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

1. **Application Fee Schedule**

**The $2,500 application fee is payable upon submission of application and is non-refundable. Additional fees apply upon issuance/closing of the bonds.**

1. **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 Portage County Port Authority and any of its loan programs.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Printed name, Title Date