



P.O. Box 229
Tifton, GA 31793-0229
Website: <http://www.tifton.net>

Mike Vollmer, City Manager
Larry Riner, Assistant City Manager

Tel. No. 229-382-6231
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Mayor and Council

Jamie Cater, Mayor
W. Joe Lewis, Vice-Mayor, District 4
Marianna Keesee, District 1
Dave Hetzel, District 2
Roosevelt Russell, Sr., District 3

Enterprise Zone Application Project Information:

Business Name: _____

Primary Contact: _____

Mailing Address: _____

Property Address: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Enterprise Zone: _____

Map & Parcel Number: _____

Historic District: _____
(If applicable)

NEW STRUCTURE

EXISTING STRUCTURE

_____	Land Value	_____
_____	Structure Value	_____
_____	Rehabilitation Est.*	_____
_____	New Construction Est.*	_____

****Documentation may be required.***

Funding Sources

Name of Institution:

Provide sources of payment and supporting documents i. e., bank commitment letter, etc.

Projected Dates and Milestones:
(Please attach timeline)

Construction/Renovation Completed Date: _____

Operations/Business Start Date: _____

Date Began Hiring New Employees:
(if applicable) _____

Number of New Employees: _____

Purchase of Machinery and Equipment: _____

Type of Use: (Specify)

Check the appropriate Box (es)

<p>Residential:</p> <p><input type="checkbox"/> Single Family _____</p> <p><input type="checkbox"/> Multi Family # _____ (Includes Loft Apartments)</p> <p>SIC Code: _____</p>	<p>Business:</p> <p><input type="checkbox"/> Retail Sales _____</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>SIC Code: _____</p>
<p>Manufacturing:</p> <p>SIC Code: _____</p>	<p>Services:</p>

Check Business Characteristics:

Check the appropriate Box (es)

<p>Applicant Type: #</p> <p><input type="checkbox"/> New Jobs _____</p> <p><input type="checkbox"/> Retained Jobs _____</p> <p><input type="checkbox"/> Total _____</p>	<p>Recruitment Type: (Out of State)</p> <p><input type="checkbox"/> Expansion</p> <p><input type="checkbox"/> Relocation</p> <p><input type="checkbox"/> Consolidation</p> <p><input type="checkbox"/> Start-up</p>
<p>Benefit Type:</p> <p><input type="checkbox"/> Renovated Existing Facility</p> <p><input type="checkbox"/> New Facility</p> <p><input type="checkbox"/> Expand Existing Facility</p> <p><input type="checkbox"/> Machinery/Equipment</p>	<p>Retention Type: (Local)</p> <p><input type="checkbox"/> Expansion</p> <p><input type="checkbox"/> Relocation within Georgia</p> <p><input type="checkbox"/> Consolidation</p> <p><input type="checkbox"/> Upgrade Process/Equipment</p>

Jobs for Which You Are Applying for Benefits:

Jobs to be created for Benefit. (Attach a breakdown of types of new jobs by Classification or title and the salary range of hourly rate for each, {must match the job numbers stated below}.)

Number of New Jobs Created: _____

Total Amount of Payroll for New Jobs: \$ _____

Note: Leased, contract, temporary, and construction employees do not qualify as new employees.

Contingent upon annual review.

I hereby certify that all information is true to the best of my knowledge. I further acknowledge that by filing the application and accepting the incentives granted. I agree to undertake the project as described. Falsification of documents or failure to carry out the project may result in revocation of incentives and/or penalties under law.

Signature

Date

Title

I agree to remain at this location for the length of the abatement period; I further agree that if I default in this agreement to repay the City of Tifton at a pro-rated amount. In addition, I agree to use all City Services for the length of this abatement. I also acknowledge that the incentive maybe continued upon the transfer of the property.

Applicant Signature

STAFF RECOMMENDATION:

<u>Type of Incentive:</u>		Staff Initials
Building Permit Fee:	_____	_____
Utilities: (Site Specific Review)	_____	_____
Landfill Tipping Fee: (100%) Abated (Site Specific Review)	_____	_____
Business License Fee: (1st Year) 100%	_____	_____
(2nd Year) 50%	_____	_____
City Net: Internet and /or Cable Connection Fee:	_____	_____
(Site Specific Review)		
Total Estimated Future Tax Abatements:	_____	
(Years 1-10)		
Year 1 (100%)	_____	
Year 2 (100%)	_____	
Year 3 (100%)	_____	
Year 4 (100%)	_____	
Year 5 (100%)	_____	
Year 6 (80%)	_____	
Year 7 (80%)	_____	
Year 8 (60%)	_____	
Year 9 (40%)	_____	
Year 10 (20%)	_____	

Based on annual assessment value

This as an estimate only. Actual figures may vary.

To be signed by applicant after review of incentive package.

Applicant Signature

Enterprise Zone Board Approval

Jamie Cater, Mayor

Date

**W. Joe Lewis, Vice Mayor
Councilman District #4**

Date

**Marianna Keesee
Councilman District #1**

Date

**Dave Hetzel
Councilman District #2**

Date

**Roosevelt Russell, Sr.
Councilman District #3**

Date

**Attest: Rona Martin Date
City Clerk**

Actual Incentives Approved

Type of Incentive:

Staff Initials

Building Permit Fee: _____

Utilities: _____
(Site Specific Review)

Landfill Tipping Fee: _____
(100%) Abated
(Site Specific Review)

Business License Fee: _____
(1st Year) 100%

(2nd Year) 50% _____

City Net:
Internet and /or
Cable Connection Fee: _____
(Site Specific Review)

Total Estimated Future
Tax Abatements: _____
(Years 1-10)

Year 1 (100%) _____

Year 2 (100%) _____

Year 3 (100%) _____

Year 4 (100%) _____

Year 5 (100%) _____

Year 6 (80%) _____

Year 7 (80%) _____

Year 8 (60%) _____

Year 9 (40%) _____

Year 10 (20%) _____

Based on annual assessment value

To be signed by applicant after review of incentive package.

Applicant Signature

Preliminary Information To Be Supplied By County Staff:

Type of Incentive:

Staff Initials

Building Permit Fee: _____

Landfill Tipping Fee: _____
(100%) Abated
(Site Specific Review)

Total Estimated Future
Tax Abatements: _____
(Years 1-10)

Year 1 (100%) _____

Year 2 (100%) _____

Year 3 (100%) _____

Year 4 (100%) _____

Year 5 (100%) _____

Year 6 (80%) _____

Year 7 (80%) _____

Year 8 (60%) _____

Year 9 (40%) _____

Year 10 (20%) _____

Based on annual assessment value

To be signed by applicant after review of incentive package.

Applicant Signature

This is an estimate only actual figure may vary.