

NORTHWOOD OHIO JOB CREATION & RETENTION GRANT PROGRAM APPLICATION

1. Contact Information

_____	_____
(Business Name)	(Contact Name)
_____	_____
(Telephone Number)	(Fax Number)

(Email Address)	
_____	_____
(Street Address – Main Office)	(City, State, Zip)

Project Site:

_____	_____
(Street Address)	(City, State, Zip)
_____	_____
(Contact Name)	(Telephone Number)

2. Nature of Business Activity Conducted or to be Conducted At The Site

3. Form of Business Organization

(corporation, partnership, proprietorship).

4. State the Enterprise's Current Employment Level in Northwood

(itemized by location for full and part-time and permanent and temporary employees)

5. Project Description

(attach additional pages if necessary)



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6. Project Schedule

The project is expected to begin _____, 20_____, and is expected to be completed by _____, 20_____.

7. \$500,000 Payroll Threshold

Date anticipating reaching \$500,000 payroll threshold _____, 20_____.

8. Job Creation and Retention Benchmarks

Estimate the number of new jobs to be created or existing jobs to be retained. Itemized by full and part-time jobs, and note if project hiring will be done in phases.

9. Additional Payroll

Estimate the amount of annual payroll the additional employees will add: \$_____

10. Business' Reasons for Requesting Tax Incentives

11. Previous Economic Development Assistance

If moving to Northwood, has the company ever received economic development assistance from another community? No Yes If yes, what type of assistance and from what community?



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12. Does the Property Owner Owe

- a. Any delinquent taxes to the State of Ohio or an Ohio political subdivision? Yes No
- b. Any moneys to the State or a state agency for the administration or enforcement for any Ohio environmental laws? Yes No
- c. Any other moneys to the State, a state agency or an Ohio political subdivision that are past due, whether the amounts owed are being contested in court of law or not? Yes No
- d. **If yes to any of the above**, detail each instance including, but not limited to, the location, amounts and/or case identification numbers. (Attach additional pages if necessary.)

I hereby submit this application as an authorized agent of the company, and I understand the program guidelines and compliance procedures. I acknowledge that additional information, e.g., payroll information, will be required to be submitted to the City of Northwood on an annual basis for the duration of the grant period, if approved by City Council.

Name of Property Owner: _____

By: _____
(Type name and title)

(Signature) (Date)

CONTACTS

City of Northwood
Mr. Bob Anderson
City Administrator
6000 Wales Road
Northwood, OH 43619
PH: 419.693.9320
EMAIL: admin@ci.northwood.oh.us

