

**Sherman Economic Development Corporation  
Incentive Application**

**CONFIDENTIAL**

**Notice: Submittal of this application does not imply the approval of any incentives from Sherman Economic Development Corporation (SEDCO). Any incentives must be considered and approved by the SEDCO Board of Directors in a public meeting. We encourage you to provide conservative estimates.**

**1. Company Information                      Project Name: \_\_\_\_\_**

a. Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

b. Authorized signatory for company contracts:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

c. Legal entity type:

Corporation                      State of Incorporation: \_\_\_\_\_

Partnership                      Sole Proprietor                      Other \_\_\_\_\_

d. Year Company was established: \_\_\_\_\_ e. NAICS Code: \_\_\_\_\_

f. Business description: \_\_\_\_\_

g. Anticipated date to begin full-time operations: \_\_\_\_\_

h. What is the expected start and completion date for this project:

Begin: \_\_\_\_\_ End: \_\_\_\_\_

**2. Investment Information**

a. Company's proposed investment in taxable assets at its facility for this project:

|        | <u>Buildings</u> | <u>Mfg. Equip.</u> | <u>Furn/Fix&amp;OthEquip</u> |
|--------|------------------|--------------------|------------------------------|
| Year 1 | \$ _____         | \$ _____           | \$ _____                     |
| Year 2 | \$ _____         | \$ _____           | \$ _____                     |
| Year 3 | \$ _____         | \$ _____           | \$ _____                     |
| Year 4 | \$ _____         | \$ _____           | \$ _____                     |

b. New taxable value added to the tax roles: \_\_\_\_\_

c. If new building construction, estimate construction period:

Begin: \_\_\_\_\_ End: \_\_\_\_\_

d. Estimated Construction Costs:

Construction Materials \$ \_\_\_\_\_

Construction worker's annual payroll \$ \_\_\_\_\_

Total construction costs \$ \_\_\_\_\_

**3. Utility Information**

a. Projected monthly water usage: \_\_\_\_\_ gal \_\_\_\_\_ cu. ft.

b. Projected monthly wastewater discharge: \_\_\_\_\_ gal \_\_\_\_\_ cu. ft.

c. Projected monthly electric usage: \_\_\_\_\_ KWh

d. Projected monthly natural gas usage: \_\_\_\_\_

**4. Projected Jobs**

a. If local expansion, the current job base is \_\_\_\_\_ as of \_\_\_\_\_

b. Number of full-time equivalent jobs created at the Sherman location:

|              | <u>(Non-Exempt)</u> | <u>(Exempt)</u> |
|--------------|---------------------|-----------------|
| Total Year 1 | _____               | _____           |
| Total Year 2 | _____               | _____           |
| Total Year 3 | _____               | _____           |
| Total Year 4 | _____               | _____           |

c. Number of workers moving to the Sherman area as a result of the project: \_\_\_\_\_

**5. Projected Wages**

- a. Starting hourly wage rate: \$ \_\_\_\_\_
- b. Average plant hourly wage rate: \$ \_\_\_\_\_
- c. Average annual salary of exempt workers: \$ \_\_\_\_\_
- d. Total projected monthly payroll in first year: \$ \_\_\_\_\_

**6. Benefits**

- a. Offered coverage for:

|                                   |     |    |
|-----------------------------------|-----|----|
| Healthcare                        | Yes | No |
| Prescription Drug                 | Yes | No |
| Dental                            | Yes | No |
| Disability                        | Yes | No |
| Life                              | Yes | No |
| 401K/Retirement                   | Yes | No |
| Education Reimbursement           | Yes | No |
| Cafeteria Plan (Section 125 Plan) | Yes | No |

Other (please list): \_\_\_\_\_

- b. Percent of employer paid premium: \_\_\_\_\_

**7. Additional Information**

- a. What is the expectation for assistance from SEDCO and/or City of Sherman?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- b. What other incentives are anticipated?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. Can you provide a business plan? Yes No

d. What market areas are to be served from this facility?

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**8. For Start-Up/Small Business Applications**

On a separate page, please list previous business history, business references, and personal guarantor information.

**Please submit to:**

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