



REQUEST FOR ASSISTANCE APPLICATION

1. General information:

Business Name: _____
 Address: _____
 Telephone #: _____ Fax #: _____
 Contact Person: _____
 Business Form: _____ Corporation _____ Partnership _____ Sole Proprietorship
 State of Incorporation/Organization: _____ Years in Business: _____ Years a Columbus Business: _____

2. Brief description of the business:

3. Proposed project site:

Location: _____ Present Ownership: _____
 Zoning: _____ Rezoning Required: _____
 Will property be subdivided? _____ If so, please attach a layout of planned subdivision.
 Will variances of the Zoning Ordinance be requested? _____ If so, please list.

4. Estimated Project Costs:

a.	Land Acquisition	_____
b.	Site Development	_____
c.	Building Cost	_____
d.	Equipment	_____
e.	Architectural/Engineering Fees	_____
f.	Legal Fees	_____
g.	Financing Costs	_____
h.	Broker Costs	_____
i.	Contingencies	_____
j.	Other (please specify)	_____
	Total:	\$ _____

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5. Total Estimated Market Value at completion: \$ _____

6. Description of proposed project: Building square footage, property size, description of buildings, materials, etc.

7. Estimated land preparation or infrastructure costs:

- a. Land Acquisition \$ _____
- b. Utilities _____
- c. Site Work Architectural/Engineering Fees _____
- d. Site Work _____
- e. Legal Fees _____
- f. Parking Lot/Landscaping _____
- g. Other (please specify) _____
- Total \$ _____

8. Sources of Financing:

- a. Equity \$ _____
- b. Bank Loan _____
- c. Other (please specify) _____
- d. Other (please specify) _____
- Total \$ _____

9. Professional consultants working on behalf of applicant:

Architectural Firm/Contact: _____
Address: _____
Telephone #: _____ Fax #: _____

Engineering Firm/Contact: _____
Address: _____
Telephone #: _____ Fax #: _____

General Contractor/Contact: _____
Address: _____
Telephone #: _____ Fax #: _____

Attorney Firm/Contact: _____
Address: _____
Telephone #: _____ Fax #: _____

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10. Project construction schedule:

- a. Construction Start Date: _____
- b. Construction Completion Date: _____

If construction will not be completed at year end, what % of construction will be completed by year end?

11. Current and projected employment:

Employment Projections

<u>Type</u>	<u>Existing Jobs</u>	<u>First Year</u>	<u>Second Year</u>	<u>Wage</u>
Professional/Managerial	___FT ___ PT	___FT ___PT	___FT ___PT	\$_____/____ -
Technical/Skilled	___FT ___ PT	___FT ___ PT	___FT ___ PT	\$_____/____ -
Unskilled/Semi-Skilled	___FT ___ PT	___FT ___ PT	___FT ___ PT	\$_____/____ -

12. Statement of necessity for the use of assistance for the project:

13. Signatures:

I declare that any statement in this application or information provided herein is true and complete in substance and in fact. I will provide additional project and/or financial information upon request. Also, I authorize this information to be released to the appropriate agencies that may be able to assist in this request.

Name of Business: _____
By: _____ Title: _____ Date: _____