BROWNSBORO

Economic Development Corporation

BUSINESS INCENTIVE APPLICATION

The city of Brownsboro welcomes you!

By working closely with you, the Brownsboro EDC will develop a tailor-made incentive package that will meet your company's unique needs, creating the foundation for sustainable business success. Whether you're starting a new business, relocating, or expanding, we'll do our best to help you limit capital expenditures, relocation costs and overhead. We look forward to a lasting partnership and welcome your interest in our community!

Today's Date:		
Business or Project Name:		
Address:		
Phone:		
Email:		
Describe the nature of your business of	our business/project? (<u>www.naics.com</u>) or project:	
What is the value of your current inve	stment in Brownsboro? \$	
What is the amount you are requesting	g? \$	
How much will you invest in the next	five years?	
Real Property: \$	Personal Property: \$	What
percentage of construction of	costs will be purchased in Brownsboro?	%

What is your estimated (existing) total inventory value? \$			
What is your total inventory value – Freeport Exempt Value? \$			
•	•		
What are the typical annual expenditur	es and the typical usage for the following utilities:		
Water: \$	gallons/month		
Wastewater: \$	gallons/month		
Telephone: \$	number of lines		
Electricity: \$	kWh/month		
Natural gas: \$	BTU/month		
Fiber/Broadband: \$			
Estimated value of sales that will be subject to Brownsboro sales tax?			
\$ How many full-time employees currently work for the business in			
Brownsboro? How many new, full-time employees will you hire during the			
next five years? How many of those employees will move to Brownsboro?			
How many full-time employees will be	paid hourly?		
What is the average hourly wage for the	ese employees? \$/ hour		
How many full-time employees will be	salaried?		
What is the average annual wage for sa	laried employees? \$/year		
How many part-time employees curren	tly work for the business in Brownsboro?		
How many new part-time employees will you hire during the next five years?			

How many out of town visitors do you expect to visit your company?/ week
How many truck deliveries do you expect?/week
Name:
Title:
Signature:
Phone:
Email:
Name of contact person for annual certification?
Title:
Address:
Phone:
Fax:
Email:

Thank you for your application! We look forward to working with you.

Brownsboro Economic Development Corporation City of Brownsboro

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