



City of Ottawa
 P.O. Box 60
 Ottawa, KS 66067
 785-229-3600 Fax 785-229-3610

Application for Industrial Revenue Bonds (IRBs)

Part I – Applicant Identification

Firm Name: _____

Contact Person: _____

Title: _____

Address: _____

Street or P.O. Box

City

State

Zip Code

Telephone: _____

Fax: _____

E-mail: _____

Web Address: _____

List the names and percent of ownership of all principal owners and officers of the Applicant Firm:

If applicant is a tenant, identify property owner(s):

Name(s): _____

Address: _____

Street or P.O. Box

City

State

Zip Code

Telephone: _____

Fax: _____

E-mail: _____

Web Address: _____

Part II – Property Identification

Check below only taxable property for which an Economic Development exemption is requested:

- Land.** Attach legal description of property and plat showing location of buildings, added improvements to buildings, or both.
- Building(s).** Attach description.
- Added improvements to building(s).** Attach description.
- Tangible personal property.** Attach list of each item with identifying nomenclature. Proof of purchase must be provided for each item on the list.

Part III – Business Information

Check below applicant's type of business organization:

- Corporation
- Subsidiary
- Partnership
- Sole Proprietorship
- Other: _____

Date business organized or incorporated: _____

Place business organized or incorporated: _____

Name of parent company, if applicable: _____

Type of business: _____

Line(s) of product(s) manufactured or research and development conducted, or goods and commodities stored in buildings, for which tax exemption is requested: _____

Percentage of building occupied by applicant business qualifying for tax exemption: _____%

List principle competition of the business within the City limits of Ottawa:

Name of Firm(s):

Describe nature of competition:

Please check one -- Applicant Business is:

- New to Ottawa**
- Existing in Ottawa**

◆ **If you checked that you are a New business, please complete the following:**

Date operations will commence in Ottawa: _____

If constructing a new building, give anticipated date of construction completion: _____

If business is relocated to Ottawa, list previous location(s): _____

◆ **If you checked that you are an Existing business, please complete the following:**

Date expansion will be completed: _____

Purpose of expansion: _____

Expansion involves: (check all that apply)

- Acquisition of existing building
- Enlargement of existing building
- Construction of new building

Describe how property identified above facilitates the expansion of such existing business:

Part IV – Employment Data

If **New** Business, list number of employees on date operations commences in Ottawa: _____

If **Existing** Business, describe how expansion has or will create new employment:

For both **New** and **Existing** businesses, please list the following employment information:

Annual Forecasted Salary: \$ _____

Total number of existing employees: _____

Total number of new employees: _____

Cumulative number of employees: _____

Part VII – Description of Public Benefits

Please insert a narrative description of the public benefits, which you believe will occur if the requested exemption is granted. Address all relevant factors, including those found in Section (10)(a) of the City's Statement of Policy and Procedures.

Part VIII – Financial Responsibility

Please attach a description of the business's financial situation. This may include a financial statement, audit and other relevant information to assess the stability of the business. Indicate whether there is any pending or threatening litigation affecting the viability of the business.

Part IX – Certification of Applicant

I, _____, _____ hereby
Name Title
certify that the above and attached information is true and correct to the best of my knowledge. Further, I certify that this application is submitted in conformance with the applicable Statement of Policy and Procedures of the City of Ottawa, Kansas. Further, it is understood that additional information may be requested by the City to assist the City Commission in its consideration of this matter.

Name (please print/ type): _____ Date: _____

Signed: _____
Name Title

Part X – Acknowledgment of Receipt

Receipt in the office of the City Clerk of the City of Ottawa, Kansas is hereby acknowledged.

Date: _____
City Clerk