



Columbus Business Development Center

Residential Business Application

General Information		
Project Name:		
Project Physical Address:		Parcel Id(s):
City:	State:	Zip:
Proposed Type of Business/Service Enterprise: New Residential Construction Residential Rehabilitation Other Rehabilitation		
Benefit Type: Renovate Existing Construction New Construction Expand Existing Construction Machinery/Equipment (if applicable)		
Is the Project Located in a Vacant Building?		Yes No
Applicant Organization/Agency:		
Federal Tax ID Number:		SIC Code:
Type of Organization: S-Corporation C-Corporation LLC Other:		
Public Corporation: Yes; incorporated or formed (year): _____		No
Primary Product:		
Contact Information		
Primary Business Representative:		
Title:		Phone:
Fax:		Email:
Mailing Address:		
City:	State:	Zip:
Local Contact Person:		
Title:		Phone:
Fax:		Email:
Mailing Address:		
City:	State:	Zip:

Project Description

Provide a description of the company's plans, including projected capital investment of the business in the zone for a 10-year project designation period (expansion, consolidation, relocation, etc.)

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Total Number of Units/Apartments to be Built/Renovated:	
Unit/Apartment Average Size (include proposed layout):	

Projected Capital Investment:

(To be made in the Zone over the entire 10-year tax abatement period)

Land:	\$
Buildings:	\$
Other: _____	\$
Grant Total:	\$

Business Description

Provide an introduction, history, and description of the qualified business. Its products, services, total sales, number of employees, locations (international, national, and in Georgia), description of primary materials purchased, product transportation, etc.

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Local Significance

Explain specifically how the project will benefit Muscogee County residents. Attach any additional information

**Job Creation
(Projected for 10-Year Tax Abatement Period)**

The business making the investment and paying taxes must also create the jobs and be the project designee. In order to be eligible for incentives, eligible businesses must:

- * Increase employment by five or more new full-time jobs;*
- * Maintain the jobs for the duration of the tax exemption period;*
- * Whenever possible, at least 10% of the new employees filling the jobs that satisfy the job creation requirement should be low or moderate income individuals.*

Note: *Leased, contract, temporary, and construction employees do not qualify as new employees.*

Number of New Full-Time Jobs to be Created (5 Minimum):

Number of Low/Moderate Income People Hired (10%):

A Low/Moderate Income Individual is Defined in (A-H), In Which Category(ies) Your New Employees Qualify? (Select all that apply):

- (A) Unemployed or unemployed for three of the six months prior to the date of hire;
- (B) Homeless;
- (C) A resident of public housing;
- (D) Receiving temporary assistance for needy families or who has received temporary assistance for needy families at any time during the 18 months previous to the date of hire;
- (E) A participant in the Workforce Investment Act or who has participated in the Workforce Investment Act at any time during the 18 months previous to the date of hire;
- (F) A participant in a job opportunity where basic skills are required or who has participated in such a job opportunity at any time during the 18 months previous to the date of hire;
- (G) Receiving supplemental social security income; or
- (H) Receiving food stamps.

Number of Local Residents Hired:

Estimated Amount of Payroll for YR _____: \$

New Jobs Breakdown (4 YR Period Example)

Title	Annual Salary or Hourly Rate	Year One	Year Two	Year Three	Year Four
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
Annual Grand Total					

Financing Plan

Describe or attach the project financing plan. Submit any financial supporting documentation if applicable, for example bank commitment letters, balance sheets, and profit and loss statements.

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Additional Requirements

Columbus' Ordinance (#98-30) requires that projects receiving tax exceptions must choose to incorporate either a landscaping requirement option or a façade material option. Which option will you incorporate:

Landscaping

Façade Material

Additional Incentives Requested

Other incentives that may be granted will be negotiated on a case-by-case basis by the Planning Department and could include exemption from any or all of the following:

Building Permit fees

Sign Permit fees

Business License Administration fees

Rezoning fees

Engineering fees

Other local fees: _____

Project Timeline

Construction Start Date:

Construction Completion Date:

Operation Start Date:

Date Begin Hiring New Employees:

Date Units/Apartments will be Built/Renovated:

Date Other Improvements like Landscaping or Façade Material will be Incorporated:

Tax Abatement Start Date (NLT Completion). Attach Plat with Identified Phases (if applicable):

Project Timeline

Project Name - Timeline Deliverables	Owner	Duration	Year One				Year Two				Year Three				Year Four				Year Five				Year Six				Year Seven				Year Eight				Year Nine				Year Ten			
			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4				
Acquisition Phase																																										
Construction phase																																										
Operations phase																																										
Machinery/Equipment Acquisition Phase																																										
Landscaping/Facade Phase																																										
Employee Hiring Phase																																										
Tax Abatement Phase																																										
Annotations																																										

I certify that the information contained in this application is true and correct and that it contains no misrepresentations, falsifications, intentional omissions, or concealment of material facts and that the information given is true and complete to the best of my knowledge and belief.

Signature of Authorized Official

Name of Authorized Official

Title

Date

Application Checklist			
	Complete	Incomplete	If Complete, Initial and Attach
Completed Application			
Financial Supporting documentation (if applicable), for example bank commitment letters, appraisal report, profit & loss statement.			
Three years of financials must include income statements/balance sheets.			
Copy of the Muscogee County Business License or application and Evidence of property access, i.e., copy of warranty deed or executed lease agreement.			
Site Plan Drawing. Include Proposed Landscaping Areas, if needed.			
Project Timeline			

Submit this application and all required information using one of the following methods:

Rex "Trey" Wilkinson
Planning Department
PO Box 1340
Columbus, GA 31902

Wilkinson.Rex@columbusga.org

ATTN: Rex Wilkinson
Fax: 706-653-4534

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	Approving Authority	Approve	Disapprove
Development Authority			
Planning Department			
Inspections and Code Enforcement			
Engineering Department			
Finance			
Occupational Tax			
Tax Assessors Office			