



City of Crete

Economic Development

PO Box 86, 243 E. 13th Street, Crete, NE 68333

O: 402-826-4317 • C: 402-418-4382

ssilvius@crete-ne.gov • www.crete-ne.gov

To LB840 Applicant:

CONGRATULATIONS on taking the first step to being awarded additional funds to help your business or event in Crete. The funds available for Economic Development, resulting from the citizen-approved sales tax increase that took effect April 1, 2011, are available first come to businesses, events and projects that meet the requirements of Crete's written Economic Development Plan, which can be found online at <http://www.crete-ne.com/index.aspx?NID=50>. A written copy is also available from the City of Crete, the Crete Chamber of Commerce or members of the Economic Development Advisory Board.

Please review the Economic Development Plan and confirm that your project or business is eligible. Applications may be recommended for funding in full or in part or may be denied based upon the review of the Board. Final decisions regarding funding will be made by the City Council but according to the terms of the Plan, in no event may the City Council fund any Application not previously reviewed and approved by the citizen Board.

In this packet you will find an Application for Funds, a US Citizenship Attestation Form and a Check List. Both the Application for Funds and the U.S. Citizenship Attestation Form are required for any request for funds. As you will see, the Application is detailed and requires significant information and additional verification documents. If you need assistance with the Application please contact any Economic Development Advisory Board member. *If you have questions, please call Program Director, Shawwna Silvius at 402-826-4317 or email ssilvius@crete-ne.gov.*

Please note that the first portion of the Application will be open to the public and may be provided to the City Council for final funding review. The balance of the Application and all supporting documentation including personal financial information is confidential and will only be shared with members of the Economic Advisory Board for purposes of considering your Application. All confidential records will be maintained in the office of the Economic Development Board and will be kept separately and not be available for review by the public. Any questions or concerns regarding this process shall be directed to the Program Director.

All Applicants will be required to attend a public hearing for presentation regarding their request for funding. Public hearings will be held at least quarterly and may be held more frequently at the request of the Board. All Applications presented the three months preceding a Public Hearing will be set for presentation and consideration at the same meeting. The Board may make a recommendation for funding at the public hearing, or may vote to table an Application for further information, but in no event shall an Application be table more than once so that all decisions will be made not more than three months after the initial public hearing regarding an Application. There is no guarantee that a determination will be made less than three months after submission so all applicants are urged to make timely requests for funding if projects or events have set timelines.

Mail or deliver completed application with all supporting documentation and forms to:

Economic Development Program Director

City of Crete City Hall

243 E. 13th Street, P.O. Box 86

Crete, NE 68333

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We look forward to working with you through the application process.



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ECONOMIC DEVELOPMENT PROGRAM APPLICATION FOR FUNDS

Please Type or Print Clearly and Answer Each Question (If Question Does Not Apply – Mark N/A).

Please Note: The Information Contained in this portion of the document is Public Information and will **NOT** be Considered Confidential.

A. APPLICANT INFORMATION:

Name of Entity Applying for Assistance: _____

Business Address: _____
(City) (State) (Zip Code)

Contact Person: _____ Telephone Number: _____

Fax Number: _____ Email Address: _____

Federal Tax ID Number: _____

Type of Entity: Start-Up Buyout Existing

If Existing, Number of Years in Business in Crete: _____

Business Classification: (Please Choose One)

- Retail Manufacturing Research & Development
- Headquarter Telecommunications Tourism
- Warehouse/Distribution Government Other

Business Type: (Please Choose One)

- Proprietorship Corporation Partnership
- LLC Governmental Entity Other

Does the Company have a Parent or Subsidiaries? Yes No

If Yes, Please List Name: _____

Address: _____
(City) (State) (Zip Code)

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

<i>Full Name</i>	<i>Title</i>	<i>Ownership Percentage</i>

Which type of assistance is the entity applying for?

- Grant Loan Guarantee If so, Lender? _____ Other

Explain: _____

What is the general purpose of the request (must be an allowed LB840/Economic Dev. Plan Project)?

- New Development New Business Startup Building Renovation Public Works
 Professional/Employee Recruitment Promotion/Tourism Job Training
 Technology Working Capital Low - Moderate Income Housing Plan Management

Does the business qualify to receive any incentives from the State of Nebraska? Yes No DK

Has the business applied for any incentives from the State of Nebraska? Yes No

If yes, please explain: _____

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: _____

Number of Full-Time Equivalent Positions to Be Created: _____

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Crete, their Two-Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Crete? Yes No

If no, please explain: _____

Does the Company Employ Any Seasonal Employees? Yes No

If Yes, How Many: _____
(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

B. PROJECT INFORMATION:

Please provide a Brief Project Summary Description:

Use of Funds	Total Project Cost	Econ Dev Funds Requested
Land or Facility Acquisition	\$	\$
Facility Renovation	\$	\$
New Facility Construction	\$	\$
Machinery / Equipment Acquisition	\$	\$
Business / Employee Recruitment Activities	\$	\$
Technology Costs	\$	\$
Small Business Development	\$	\$
Working Capital (Includes Inventory)	\$	\$
Job Training	\$	\$
Other	\$	\$
Total Project Cost	\$	
	Total LB840 Funds Requested:	\$

C. FUNDING SOURCES AND EQUITY INJECTION:

If Borrowing, Name of Lender: _____

Loan Amount: _____ Loan Term (Years): _____

Amount Injected Into the Project by Business/Partners/Owners: _____

Other Funding Source(s) and Amount(s): _____

C. PROJECT LOCATION:

- | | | |
|--|------------------------------|-----------------------------|
| Within the Crete City Limits? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Within the Crete Two-Mile Jurisdiction? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Land Owned by the City of Crete? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Not Located in Crete but for area benefit? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If Not in City Jurisdiction, please explain local benefit: _____

D. ATTACHMENTS: - Please Include the Attachments that Apply to Your Entity – **See checklist Page 5.**

Please Note: The Information provided pursuant to this Section **Will** be Deemed Confidential and will not be Available for Public Disclosure.

- Business Plan: Brief Description of the Business
- Resumes of all Owners/Co-Owners/Directors/Partners/Stockholders
- For Existing Businesses – Three (3) Yearly Financial Statements
- For Existing Businesses – Current Financial Statements (Less Than Sixty (60) Days Old)
- For Existing Businesses - List of Current Obligations (Include Company Names and Amounts)
- For Start-Up Businesses – Current Business Plan
- For Start-Up Businesses – Three Year Projections
- Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required for Proprietorship
- Letter from Lending Institution if applicable
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, Bylaws)
- Please Note that Other Financial Documents May Be Required

E. APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Crete or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.

Applicant's Signature

Date



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Checklist for Local Economic Development Program Application

For a qualifying business to be considered for direct or indirect financial assistance under the Crete Local Economic Development Program an applicant must provide to the Program Administrator:

- A completed and signed application with all required support documents including, but not limited to:
 - A detailed description summary of the proposed project which clearly states what assistance the business is requesting from the program, including evidence that the project qualifies for assistance under the Local Option Municipal Economic Development Act and is consistent with the goals of the Crete Local Economic Development Program.
 - Use of Funds – Total project costs and financing requirement; include copies of any preliminary bids (if applicable/available).
 - A review of key management and employees and their experience as related to the proposed project.
- Start Up Business
 - Current Business Plan for the project and the company, including employment and financial projections;
 - Three (3) Years Financial Projections
 - Past three years personal tax returns
- Existing Business:
 - Most Current Business Plan
 - Three (3) Yearly Financial Statements: Profit & Loss Statements, Cash Flows and Income Statements covering the last three years of business operation, or if a new business, personal income statements.
 - List of Current Obligations (include company Names and Amounts)
 - Past three years personal tax returns
- Letter from Lending Institution(s) (if applicable): Evidence of private financing commitments for investors or lenders.
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, ByLaws)
- Resume(s) of all owners/co-owners/directors/partners/stockholders: Necessary entity or personal financial information about the Applicant(s), including name, address, past experience, work history, and related information.
- Other information or financial documentation as requested.

Questions: Contact Program Director, Shawna Silvius at 402-826-4317 or email ssilvius@crete-ne.gov.

Return application and supporting documentation to Program Director at City Hall, 243 E. 13th Street, Crete, NE 68333