

AD VALOREM TAX EXEMPTION - SUPPLEMENTAL APPLICATION GENERAL INFORMATION & INSTRUCTIONS

The Economic Development Ad Valorem Tax Exemption Application, DR418, **MUST** accompany this form. In order for the application to be accepted, all applicable areas **MUST** be completed. Applications must be **FILLED OUT COMPLETELY, SIGNED and DATED** to be accepted by this Office. Place "N/A" for items that do not apply. **All incomplete applications will be returned, causing a delay in consideration.** [PLEASE PRINT OR TYPE ALL REQUESTED INFORMATION]

TERMS

NEW BUSINESS – A business or organization, newly domiciled in Escambia County, paying an average wage for such new jobs that are above the average wage in the area.

BUSINESS EXPANSION – The enlargement of a building or buildings, construction of a new building, the addition of tangible personal property, or any combination thereof, which increase the employment capacity of a business eligible for a tax exemption-incentive and which results in the creation of new employment.

CAPITAL INVESTMENT – The acquisition of a fixed asset that is anticipated to have a long life of use before it has to be replaced or repaired.

PROJECTED NUMBER OF JOBS - Jobs foreseen in the future within one (1) year of application.

ENTERPRISE ZONE – An Escambia County designated area in which there is a predominance of buildings or improvements, whether residential or nonresidential, which by reason of dilapidation, deterioration, age or obsolescence. [Escambia County has designated Enterprise Zones]

MANUFACTURED EQUIPMENT - Any new or used equipment that is used in the direct production manufacture, fabrication, assembly, extraction, mining, processing refining, or finishing of other tangible personal property including, equipment used to dispose of solid waste or hazardous waste into energy or other useful products.

R&D EQUIPMENT – Equipment consists of laboratory equipment, research and development equipment, computers and computer software, telecommunications equipment or testing equipment used in research and development activities devoted, directly and exclusively, to experimental or laboratory research and development of new products new uses or exiting products or improving or testing existing products.

EXPLANATION

AVERAGE WAGE/SALARY - Average salary/wage for **NEWLY** created jobs.

GROSS ANNUAL PAYROLL – Gross Annual Payroll for **NEWLY** created jobs.

CURRENT NUMBER OF EMPLOYEES – Number of employees **BEFORE** the business expansion.

JOB CLASSIFICATION – Classifications for the **NEWLY** created jobs.

WAGE RATE – Wage rate for the **NEWLY** created jobs.

REVIEW/INSTRUCTIONS

Upon receipt of the Application for Exemption and supporting documents, additional information may be requested from applicant to complete the review.


ONLY include Full-Time Regular Employees of the applicant; NOT contract, temporary or part-time employees. All job creation projections should be within one year of application. Applicant will be notified in writing if request for exemption is granted or denied.

ATTACH: Proof of Gross Payroll ["current" Quarterly Unemployment Reports] List of Capital Investments Claimed; Legal Description of Property and any supporting documents. If there are multiple worksites, **ONLY** include information that pertains to the site you are seeking the Exemption on.

Mail to: County Administration, Attn: Elizabeth Kissel, 221 Palafox Place, Suite 420, Pensacola, Florida 32502. IF ALL REQUIRED INFORMATION IS NOT ATTACHED, THIS MAY RESULT IN DENIAL OF THE APPLICATION FOR EXEMPTION

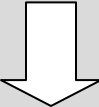
Note: Please do not begin a project before an Ordinance has been established.

For questions or assistance, please contact **Elizabeth Kissel, ekissel@myescambia.com** or 850-595-3935.

DATE:		<div style="background-color: #4F81BD; color: white; padding: 5px; text-align: center;"> ESCAMBIA COUNTY SUPPLEMENTAL EDATE EVALUATION FORM </div> <div style="text-align: center; margin: 10px 0;">  </div> <div style="background-color: #4F81BD; color: white; padding: 5px;"> THIS APPLICATION IS FOR A BUSINESS THAT WILL: </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Create LESS THAN 150 "NEW" jobs <input type="checkbox"/> Create MORE THAN 150 "NEW" jobs <input type="checkbox"/> Be in a County designated Enterprise Zone </div>	
APPLICANT:			
NAME OF BUSINESS:			
LOCATION OF BUSINESS:			
CITY			
STATE			
ZIP CODE			

CAPITAL INVESTMENT Capital Investment is the acquisition of fixed assets that is anticipated to have a long life of use before it has to be replaced or repaired. Capital investment is made any time a company purchases goods that will benefit the operation of the business, but will not be used to cover the operational costs of the business. Please do not include land.

	Capital Investment (check one)	NEW BUSINESS (Facility Where Exemption Is Requested)	Employees (check one)
Under \$1 Million		Under 25 Employees	
\$1 –\$5 Million		25 – 50 Employees	
Over \$5 Million		51 -100 Employees	
Total Capital Investment\$		Over 100 Employees	

<p style="text-align: center;">PLEASE LIST CAPITAL INVESTMENTS (Note: Add additional sheet if necessary)</p> <hr/> <p>LIST THE "ANTICIPATED" AMOUNT AND TYPE OF MAJOR CAPITAL INVESTMENT TO BE MADE BY THE APPLICANT IN CONNECTION WITH THIS NEW BUSINESS OR BUSINESS EXPANSION.</p> <div style="text-align: center; margin-top: 20px;">  </div>	How Many "New" Employees?		
	BUSINESS EXPANSION (Facility Where Exemption Is Requested)	Employees (check one)	
	Under 25 Employees		
	25 – 50 Employees		
	51 -100 Employees		
	Over 100 Employees		
	How Many "New" Employees?		
WHAT IS THE BUSINESS INDUSTRY?			

CAPITAL INVESTMENT

(Add additional sheet if necessary)

“PROJECTED” NUMBER OF ADDITIONAL EMPLOYEES *(Within One Year of Original Application)*

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AVERAGE WAGE/SALARY

\$

GROSS ANNUAL PAYROLL

\$

“CURRENT” NUMBER OF EMPLOYEES

#

IS PROPERTY LOCATED IN A COUNTY DESIGNATED ENTERPRISE ZONE? YES NO

Does Business presently participate in the QTI Refund Program?

YES NO

	Year1	Year2	Year3
Construction/Renovation	\$	\$	\$
Manufacturing Equipment	\$	\$	\$
R&D Equipment	\$	\$	\$
Other Equipment <small>(computer equipment, office furniture, etc.)</small>	\$	\$	\$
Total Capital Investment	\$	\$	\$

ITEM:	COST:	JOB CLASSIFICATION: <i>(Add additional sheet if necessary)</i>	Average SALARY\$
	\$		\$
	\$		\$
	\$		\$
Total	\$		\$
<i>(Add additional sheet if necessary)</i>		WAGE RATE\$	Please check one:
		Below Area Average Wage	<input type="checkbox"/>
		Average Wage	<input type="checkbox"/>
		Above Average Wage	<input type="checkbox"/>

Signature of Applicant (Business Representative)

Printed Name

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this ____ day of _____, 20____, by (name of person making statement).

My commission expires: _____

NOTARY PUBLIC

(NOTARY SEAL)

Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____

EDATE "ANNUAL" RENEWAL PROCESS
CONTACT INFORMATION
(Individual responsible for renewal process)

Name of Business:					
Name and Title of Contact Person :	Name:		Title:		
Mailing Address:					
E-Mail Address:					

Name of person completing this form: _____

Phone #: _____

E-Mail Address: _____

Date: _____