

Mission Economic Development Corporation

Working outside the box

ECONOMIC RETAIL INCENTIVE APPLICATION

MISSION ECONOMIC DEVELOPMENT CORPORATION

APPLICATION PAGE 1 OF 15

APPLICATION

The Mission Economic Development Corporation will use your responses to this application to prepare an economic impact analysis of your location or expansion project.

Please enter the required information in the cells or check boxes. If you have additional notes or information to include, please attach pages along with any relevant maps, plats, metes and bounds, or renderings.

Only complete applications will be considered.

If you need assistance, call (956) 585-0040. Please email the completed questionnaire to Daniel Silva, dsilva@missionedc.com

PLEASE COMPLETE ALL RELEVANT PAGES

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Parent Company (if applicable)	6
Company's Primary 6-digit North American Industry Classification System (NAICS) Code	6
Is the Project a Relocation of an Existing Facility to Mission from Another Location?	6
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Please provide a brief description of the project in Mission	7
Please provide a justification for the use of public funds for this incentive request. Specify Wh Request Is (amount and purpose).	
EMPLOYMENT AND WAGE WORKSHEET	9
Please enter the EXISTING full-time jobs located in Mission with your company	9
Please enter the type (Owner, Manager, Staff, etc.) and number of NEW full-time jobs that wi created in Mission.	
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	Provide the funds to be invested or leveraged for the project.	14
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	Provide the estimated valuation of the project.	15
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GENERAL INFORMATION								
Today's Date:								
COMPANY CONTACT INFORMATION								
	Name:							
А	.ddress:							
City, Sta	ate, ZIP:							
W	/ebsite:							
PERSON S	UBMIT [*]	TING THE QUESTIONNAIRE						
Name:			Phone:					
Title:			Fax:					
Email:								
PERSON R	ESPON	SIBLE FOR INCENTIVE ADMINISTRATION						
Name:			Phone:					
Title:			Fax:					
Email:								
BRIEF DES	CRIPTI	ON OF COMPANY'S HISTORY INCLUDING C	URRENT	OPERATIONS				

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MISSION ECONOMIC DEVELOPMENT CORPORATION – RETAIL ECONOMIC INCENTIVE APPLICATION

COMPANY OWNERSHIP
Privately Held Publicly Traded
BUSINESS FORM
Corporation Joint Venture Partnership Sole Proprietorship
PARENT COMPANY (IF APPLICABLE)
COMPANY'S PRIMARY 6-DIGIT NORTH AMERICAN INDUSTRY CLASSIFICATION SYSTEM (NAICS) CODE
IS THE PROJECT A RELOCATION OF AN EXISTING FACILITY TO MISSION FROM ANOTHER LOCATION?
□Yes □No
If 'Yes', give current location:

GENERAL INFORMATION PAGE 6 OF 15

PROJECT DESCRIPTION PLEASE PROVIDE A BRIEF DESCRIPTION OF THE PROJECT IN MISSION (Examples: activities to be performed, products to be produced, services to be provided) 250 words PLEASE PROVIDE A JUSTIFICATION FOR THE USE OF PUBLIC FUNDS FOR THIS INCENTIVE REQUEST. SPECIFY WHAT THE REQUEST IS (AMOUNT AND PURPOSE). (Examples: barriers, financial gap, need). List any additional factors to be considered for this project. Please select all that apply. Occupies building vacant for at least 2 years International or national headquarters Project creates knowledge-based, high-skilled, 25% of local contractors utilized or new jobs or high-paying jobs. filled by Mission residents

PROJECT DESCRIPTION PAGE 7 OF 15

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Significant relationship with universities	Targeted retail/restaurant sector
Improvements to Downtown	Community support and involvement

PROJECT DESCRIPTION PAGE 8 OF 15

EMPLOYMENT AND WAGE WORKSHEET

PLEASE ENTER THE EXISTING FULL-TIME JOBS LOCATED IN MISSION WITH YOUR COMPANY.

Existing Job Type/Category	Number of Full-Time Positions	Average Annual Wage Per Position	Average Hourly Wage Per Position

Number of Existing Jobs					
	Number of existing FULL-TIME jobs:				
	Number of exiting PART-TIME jobs:				
	TOTAL jobs:				
	Annual PAYROLL for existing jobs:				

PLEASE ENTER THE TYPE (OWNER, MANAGER, STAFF, ETC.) AND NUMBER OF NEW FULL-TIME JOBS THAT WILL BE CREATED IN MISSION.

New Jobs Created													
		Years								Total	Annual	Hourly	
Job Type/Description	1	2	3	4	5	6	7	8	9	10		Salary	Wage
TOTALS													

Estimated number of full-time jobs at capacity (part-time can be combined):	
Estimated annual payroll for full-time jobs at capacity:	

THIS INFORMATION IS USED TO ESTIMATE THE FISCAL IMPACT. Please provide the current annual taxable sales (if applicable): Please provide the current annual taxable purchases: THIS DATA IS USED TO DETERMINE THE ECONOMIC IMPACT OF THE CONSTRUCTION PERIOD. Please provide the number of construction jobs anticipated. THE FOLLOWING ARE USED FOR THE ECONOMIC IMPACT OF OUT-OF-TOWN VISITORS. Number of out-of-town visitors estimated in the first year: Average number of Hotel room nights in Mission:

SALES TAX PAGE 11 OF 15

NEW CONSTRUCTION PROJECT INFORMATION								
Project type:	Project type: Build to Suit Speculative Other (please describe)							
Project use:	☐ Industrial ☐ Retail/Restaurant ☐ Office ☐ Warehouse/Distribution ☐ Other (please describe)							
Project size:	Acreage: Sq. Feet:							
Preferred start date:								
		Desired completion date:						
Current property v	value from Hidalgo County Appraisal D	istrict** (HCAD)						
** Please attach a c	opy of the latest property tax stateme	nt(s) from HCAD.						
INVESTMENT								
PROVIDE THE FL	JNDS TO BE INVESTED OR LEV	ERAGED FOR THE PROJECT.						
	Category	Total						
Improvements/Str	uctures							
Personal Property								
Engineering and Design								
Site Development								
Other Improveme	nts							
	Total Project Costs							

TAX BASE

Category	Estimated New Valuation
Improvement/Structures	
Personal Property	
Inventory	
Total	

DESCRIBE ANY OFF-SITE INFRASTRUCTURE REQUIREMENTS.

Water	
Wastewater	
Streets	
Drainage	
Other	

RELOCATION OR EXPANSION PROJECT INFORMATION					
Project type:	Build to Suit Speculative	Other (please describe)			
Project use:	☐ Industrial ☐ Retail/Restaurant ☐ Office ☐ Warehouse/Distribution ☐ Other (please describe)				
Project size:	Acreage: Sq. Feet:				
Preferred start date:					
Desired completion date:					
Current property v	Current property value from Hidalgo County Appraisal District** (HCAD)				
** Please attach a copy of the latest property tax statement(s) from HCAD.					
INVESTMENT					
PROVIDE THE FUNDS TO BE INVESTED OR LEVERAGED FOR THE PROJECT.					
Category		Total			
Improvements/Structures					
Personal Property					
Engineering and Design					
Site Development					
Other Improvemen	nts				
Total Project Costs					

TAX BASE

PROVIDE THE ESTIMATED VALUATION OF THE PROJECT.

DESCRIBE ANY OFF-SITE INFRASTRUCTURE REQUIREMENTS.

Category	Current Valuation	Estimated Increase in Valuation	Estimated New Valuation
Improvement/Structures			
Personal Property			
Inventory			
Total			

Water	
Wastewater	
Streets	
Drainage	

END OF APPLICATION

Other