CHESTERTOWN KENT COUNTY

APPLICATION FOR ENTERPRISE ZONE CERTIFICATION

Type of Application:  □ New Certification  □ Recertification

Type of Tax Credit Applying for:  □ State Income Tax Credit  □ Local Property Tax Credit  □ Both Tax Credits

(A) BUSINESS INFORMATION:

Business Name: ____________________________________________________________

Legal Status:  □ Corporation  □ Proprietorship  □ Partnership  □ Other

Contact:  [Name]__________________________________________________________[Title]________________________________________________

[Phone]_______________________________________________________________[Email]____________________________________________

Business Address:________________________________________________________

Facility Address (if different from a business address):__________________________

FEIN:________________________Unemployment Insurance #:____________________

Type of Business:_______________NAICS: ________________________________

Is the business located in the Enterprise Zone now  □ Yes  □ No

If yes, since what year: __________________________________________________

Is the business relocating from another place?  □ Yes  □ No

If yes, where was the previous location? _____________________________________

Is the business a new/start-up?  □ Yes  □ No

Did the Enterprise Zone benefits affect your decision to locate at this address?

□ Yes  □ No

If yes, please explain how the Enterprise Zone benefits will assist your business?

_____________________________________________________________________

_____________________________________________________________________

Page 1 of 2
(B) PROPERTY INFORMATION

Property ID Number: 

Property Ownership:  □ Own

  □ Lease (Provide Information of the Property Owner)

    [Name] _______________________________
    [Address] _______________________________
    [Phone/Email] _______________________________

Property Improvement Information:

  □ Purchase Only:                $______________________________

  □ Renovation:             Estimated Costs: $______________________________

  □ New Construction: Estimated Costs: $______________________________

  □ Machinery & Equipment: Estimated Costs: $______________________________

(C) EMPLOYMENT INFORMATION

Current Employment (as of date of this application)

Number of Full-Time Employees: ________  Number of Part-Time Employees: ________

Estimated New Hiring in the Enterprise Zone (in next 12 months)

Number of Full-Time Employees: ________  Number of Part-Time Employees: ________

Name of Applicant: ___________________________  Date: ___________________________

Position/Title: ___________________________  Signature: ___________________________