

The Delaware Economic Development Authority Site Readiness Application

Instructions:

Please complete and submit this application electronically to **business_finance@delaware.gov** and mail a check for the appropriate amount pursuant to the financing request (see "Application Fee Schedule") made payable to "**The Delaware Economic Development Authority**" (non-refundable application fee) to **99 Kings Highway, Dover, DE 19901**. This application is not a commitment for funds, nor does it obligate the State of Delaware or any State agency to provide any form of financial assistance. Not all questions will be applicable to public entities and utilities. Please contact the Delaware Prosperity Partnership or Division of Small Business for questions.

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General	Informat	tion'

Please provide a detailed description of the project to describe how the project will provide additional development site options and allow communities to compete for investment and job creation opportunities that will benefit the people of Delaware, maintain or increase the tax base of Delaware's economy and maintain, diversify, or expand business and industry in Delaware:								
Applicant Cate	gory:							
		\$100,000 for initial studies areation studies, Phase 1 & 2 I			, -	•		3
		\$1,000,000 for advanced act s, rail extension engineering						
Legal Name of App	licant	Delaware Business Li	cense Ty _l	pe	Tax I.D. or S	S# for an	Individ	dual Report
					\$			
State of Incorporati	tion	Date of Incorporation	1		Amo	ount of Gr	ant Red	quested
Sole Proprieto C-Corp		General Partnership LC		Limited F S-Corp	artnership			dual Business Request Entity/County/Municipalit
Applicant's Billing A	address							
Applicant's Email					Applicant's F	Phone Nui	mber	
Title (if applicable)								
Primary Project								



Applicant Typ	e:								
Private Land	owner	Pi	ublic entit	cy/county/mui	nicipality				
Equitable lar	ndowner/developer	U	tility prov	ider					
Other:									
Equitable ov	vner signature (if app	olicable):							
Property Info	rmation:								
Name of Property	ame of Property Owner:								
Property Address	of site or region of in	npact:							
County / Municipa	ality of Land Use Juris	diction:							
Parcel number(s)	:	Propert (acres)	-		Cu	rrent Zoning:			
State Strategy Inv	vestment Level, if kno	own:							
Proposed Zoning	under comp. plan if a	pplicable	:						
Environmenta Please list any know	al Status:	ions or im	nediments	in developing s	ite				
Utilities on or	near site:								
If known, please pro	ovide utility information	below:							
Electric at Site?	Distance	from site	:			Provider:			
Water at Site?	Distance	from site				Provider:			
Wastewater?	Distance	from site				Provider:			
Natural Gas?	Distance	from site	:			Provider:			
Fiber / Internet?	Fiber / Internet? Distance from site: Provider:								
Rail: Is this, or co	ould this be a rail serv	ed site?		If yes, D	istance fror	m site:			
Provider:			Utilities	/Rail Notes:					



Source and Use of Funds for Public Purpose:

Please demonstrate applicant's investment in project. Preference to projects where applicant is investing over 50% of private funds for total project costs.

	Funded by Grant	Funded by Applicant
Site Readiness Project (Specify activities):	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Other Project Costs (Specify activities):	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total Project Costs	\$	\$

Please attach project cost estimates for which grant funds would be used.						
Other Information about project:						

Marketing of site:

Applicant will allow Delaw	are Prosperity Partne	rship and other ec	conomic development	partners to share s	ite information wit	h prospective users
and on Zoom Prospector (DPP's free real estate	e database) and/or	r on DPP's website.			

Please	Initial:	
riease	millial:	



Management & Ownership:

List Owners of property if applicable:

(Show 100% ownership. If more space is necessary, attach a complete list formatted as below as "Exhibit: Management and Ownership - 1.")

Name	SS# or Tax ID#	% Ownership	Address

Has th	Has the applicant or any person listed above:						
Yes	No						
		Been the subject of, or a party to, any formal or informal inspection, inquiry, investigation, administrative proceeding, criminal prosecution or civil litigation by any federal or state agency administering, or private person seeking relief under, state or federal statutes, regulations or rules governing collective bargaining, hours of labor, working conditions, industrial hygiene and safety, minimum wage standards, discrimination in wages, child labor, unemployment insurance, workers' compensation or other labor law matters?					
		Been the subject of or a party to any formal or informal inspection, inquiry, investigation, administrative proceedings, criminal prosecution or civil litigation by any federal or state agency administering, or private person seeking relief under, state or federal environmental statutes or regulations?					
		Been the subject of, or a party to, any formal or informal inspection, inquiry, investigation, administrative proceeding, criminal prosecution or civil litigation by any state or federal law enforcement, regulatory or administrative agency for the criminal or civil violation of any federal or state statute, regulation, rule or the terms of any license or permit issued by a federal or state agency, including the failure to hold such a license or permit?					
		Been the defendant in any civil litigation in which any type of fraud, misrepresentation, unfair or deceptive trade practices were alleged?					
		Been debarred or suspended from contracting with any state or federal agency or from receiving financial assistance from any state or federal agency?					
		Been denied any license or permit or had any license or permit revoked or suspended by any federal, state or local agency or governmental body?					
		Been convicted of a crime?					
		Filed a voluntary petition in bankruptcy or had an involuntary petition in bankruptcy filed against the Applicant, in any bankruptcy court, or been subject to any other state or federal insolvency or receivership proceedings?					
		Been an owner or manager of a manufacturing facility that was designated as a chronic violator by the Delaware Department of Natural Resources & Environmental Control?					
		Do you have a family member who is currently employed in either the Delaware General Assembly and/or Executive Branch? Family member is defined as sibling, parent, aunt, uncle cousin or second cousin. If so by what relationship.					

If the answer to any question above is "Yes", furnish details on a separate page and attach as: "Exhibit: Management & Ownership -2"



Exhibits Required:

This application will not be considered complete unless the following items are submitted with the application form:

A. "If yes" or "If Necessary"	exhibits fror	n application:					
Attached	□ N/A	Exhibit: Mana	Exhibit: Management & Ownership - 1				
Attached	□ N/A	Exhibit: Mana	agement & Ownership - 2				
B. Certificate of Good Standi	ng* and Bus	siness License:					
Attached	☐ In Pro	ocess	An original Certificate of Good Standing issued by the Division of Corporations of the Delaware Secretary of State's office within the thirty-day period before the date of the application				
Attached N/A	☐ In Pro	ocess	A copy of the business license issued by the Division of Revenue of the Delaware Department of Finance.				
* Certificate of Good Standing	ng is not ava	ilable for sole pr	oprietorships or some general partnerships but is for all other entities				
C. Financial information*:							
Attached	□ N/A		tent years of financial statements and as much of the current year (but not more than three months old). Include as "Exhibit: ments"				
Attached	N/A	Three most red	cent years of tax returns. Include as "Exhibit: Tax Returns"				
Attached	□ N/A	Completed cop	y of "List of All Outstanding Obligations" form that follows				
Attached	□ N/A	Completed copy of "Project Source & Use of Funds" form found on page 3.					
If the applicant is a new ent returns of each principal (or	ity with less the parent o	than two years company) for the	of financial statements, provide personal financial statements and tax e past three years.				
D. Personal Financial Statem	nents (if app	licable)					
Attached	□ N/A	DEDA represen	nat follows only if you have been asked to complete it in advance by a stative. Personal Financial Statements are usually only requested when rantee is involved. Save this document in case you will be asked to fill in in the future.				



E. Certificate of Incorporation, Corporate Byla	ws, Certific	ate of Formation	and Limited L	iability Opera	ting Agreeme	nt*:
Attached In Process	Corporat	of the original Ce tions of the Dela efore the date o	ware Secretary	y of State's of	-	
Attached In Process	A copy o	A copy of the corporation's bylaws, if applicable.				
Attached In Process	rations o	of the original Ce of the Delaware S he date of the ag	Secretary of St		-	-
Attached In Process		of the original sig g agreement.	ned and execu	uted limited lia	ability compa	ny
*Certificate of Incorporation and Corporate By Liability Operating Agreement apply to Delaws in this event, please submit a copy of the Arti	are limited l	iability companie				
F. Attach to supplement, if applicable:						
 Survey/Site Plan/Concept Plan Copy of County Parcel Details and Map Aerial Map(s) Project cost estimates from contractor, engineer, or other source. Support Letter from County or Municipality that has planning jurisdiction over site. Proof of Property Tax payment Non-refundable application fee: Please refer to the "Application Fee Schedule" on page 10 for the appropriate amount. Fees will be returned to the applicant if the application does not go before the Council on Development Finance. Make check payable to "The Delaware Economic Development Authority" and mail to 99 Kings Hwy Dover, DE 19901. LIST OF ALL OUTSTANDING OBLIGATIONS (For example: Strategic Fund loan or grant, notes, mortgages, accounts payable, etc.) If zero outstanding obligations, please indicate this in the chart and sign below. 						
Applicant						
Description of Note with Collateral/ Security Original Original Amount	Present Balance	Current or Delinquent	Monthly Payment	Maturity Date	Creditor Name	Creditor Phone
\$ \$	\$ \$		\$ \$			
\$ 	\$ \$		\$ \$			
	\$		\$ \$			
\$	\$		\$			
J.	©		\$			

Signature Date

The information contained in this schedule is a supplement to your balance sheet and should balance to the liabilities presented on that form.



Personal Financial Statement

Only fill out this section if you have been asked to in advance or if you will be personally guaranteeing the loan

Guarantor	Date of Birth	Guarantor Date of Birth
Address		Address
Home Telephone Number		Home Telephone Number
Business or Occupation		Business or Occupation
Annual Income		Annual Income
Monthly Rent Payment (if ap	pplicable) \$	Monthly Rent Payment (if applicable) \$
List Contingent Liabilities:		List Contingent Liabilities:
Туре	Amount \$	Type Amount \$
Туре	Amount \$	Type Amount \$
Have you ever filed bankrup	tcy? Yes No	Have you ever filed bankruptcy? Yes No

Balance Sheet for Business (to be completed only if the applicant is a sole proprietor) As of Date: **Business Liabilities Business Assets Balance Balance** Cash in Banks Accounts Payable Accounts Receivable **Short Term Notes** Inventory **CMLTD** Long Term Notes Land and Building (Net) (Net of CMLTD) Machinery and Equipment Other Other Total Assets (TA) Total Liabilities (TL) Net Worth (TA - TL)

^{*}Notice: Income from alimony, child support or separate maintenance payments need not be revealed if you do not choose to rely on such income in applying for credit.



Personal Financial Statement (Continued)

Personal Assets (excluding your business)		Personal Liabilities (excluding your business		
Payment(s)			Balance	Mo. Payment(s)
Cash on hand and in financial institutions			Real Estate Mortgages Payable (see Schedule B)	
U.S. Government Securities (see Schedule A)			Automobile Loans	
Listed Securities (see Schedule A)			Credit Cards	
Unlisted Securities (see Schedule A)			Personal Credit Lines	
Accounts, Notes and Mortgages Receivable			Notes Payable to Others	
Real Estate Owned (see Schedule B)			Unpaid Income Taxes	
Automobiles and Other Personal Property			Other Unpaid Taxes and Interest	
Cash Value of Life Insurance (see Schedule C)			Other Debts (please itemize)	
Retirement Accounts (IRA, 401-K, etc.)				
Other Assets (please itemize)				
Total Liabilities				
Net Worth				
Total Assets			Total Liabilities and Net Worth	



Personal Financial Statement (Continued)

Schedule of Securities Owned		Schedule A		
No. of Shares/Face Value (Bonds)	Description	In Name(s) of	Market Value	Pledged (Y/N)

Schedule of Real Estate Owned			Schedule B				
Location	Date Acquired	Titled In Name(s) of	Cost	Market Value	Mortgage Lender	Balance	Mo. Payments(s)

Life Insurance	Schedule C				
Face Amount	Issuing Company	Policy Owner	Cash Surren- der Value	CSV Loans	

Authorization to Check Credit and Financial Status

The undersigned hereby authorizes DEDA and any bureau or agency employed by the DEDA to obtain credit reports and to make whatever credit inquiries it deems necessary, including but not limited to verifying and checking the undersigned's employment history and credit history, in connection with the undersigned's personal financial statement or in the course of review or collection of any credit extended or maintained in reliance of this personal financial statement. The undersigned authorizes and instructs any person or credit reporting agency to compile and furnish to DEDA any information it may have or obtain in response to the credit inquiries authorized herein. The undersigned certifies that this personal financial statement and all other information furnished now or in the future to DEDA is and shall be true and complete.

Guarantor	Date	Guarantor	Date
Social Security Number		Social Security Number	



Application Fee Schedule

(Delaware Strategic Fund loan or grant)

FINANCING REQUESTED	APPLICATION FEE
Up to \$100,000	\$250
100,001 - 150,000	750
150,001 - 250,000	1,250
250,001 - 350,000	1,750
350,001 - 450,000	2,250
450,001 - 550,000	2,750
550,001 - 650,000	3,250
650,001 - 750,000	3,750
750,001 - 850,000	4,250
850,001 - 950,000	4,750
950,001 - 1,050,000	5,250
1,050,001 - 1,150,000	5,750
1,150,001 - 1,250,000	6,250
1,250,001 - 1,350,000	6,750
1,350,001 - 1,450,000	7,250
1,450,001 - 1,550,000	7,750
1,550,001 - 1,650,000	8,250
1,650,001 - 1,750,000	8,750
1,750,001 - 1,850,000	9,250
1,850,001 - 1,950,000	9,750
In excess of 1,950,000	10,000

Brownfields Assistance Program - \$250.00

Delaware Technical Innovation Program - \$250.00

^{*}If applying for both a Strategic Fund loan and grant, each requires that a fee be paid per the request, unless otherwise waived be The Authority.



Certifications to Applicants:

Certifications and Notarization to Applicants

CERTIFICATION -- Eligibility for financial assistance from the Delaware Economic Development Authority ("DEDA") is determined by the information presented in this application and in the required exhibits and attachments. Any change in the status of the proposed project from the facts presented herein could disqualify the project, including but not limited to, the commencement of construction or the acquisition of assets such as land or equipment. Please contact the staff of the Authority before taking any action which would change the status of the project as reported herein.

To the extent permitted by Delaware's Freedom of Information Act, all information contained in this application or obtained by the Authority in investigating or considering this application will be kept confidential, except for disclosure to the Council, to the staff and attorneys of the Authority and DEDA, and except for disclosures made at the public hearing of the Council and in any published notice of such hearing. If a loan is made for your project, confidentiality may also be affected by any information reporting and other requirements imposed on the Authority by the Internal Revenue Code.

I, the undersigned, being duly sworn upon my oath say:

- 1. The Applicant as listed on page 1 under "Legal Name of Applicant" is the recipient of the funds.
- 2. The Applicant hereby agrees, if this application is approved, to comply with all federal, state, and local laws affecting the grant to be issued and the operation of the proposed project. As part of this agreement, the Applicant agrees to use its best efforts in good faith to meet all employment projections set forth herein and to give the first opportunity of employment to qualified Delaware residents for all unskilled and semi-skilled workers employed by the applicant. The Applicant agrees to report to the Authority, no later than January 30 of the year following the start of its operation of the project, the total number of its unskilled and semi-skilled employees and the number of its unskilled and semi-skilled employees who were residents of Delaware at the time of their employment.
- 3. The Applicant hereby acknowledges and agrees that the Authority reserves the right to and may disclose any information contained in this application and its supporting documents to the Council on Development Finance (CDF), to the staff and attorneys of the Authority, at any public hearing held on this application by the CDF, in any published notice of such hearing, and that this application is subject to the Delaware Freedom of Information Act.
- 4. The Applicant hereby agrees that any officers, employees, agents or attorneys of the Authority or the Division of Small Business may have access to and copy any and all information in any form pertaining to Applicant, including, but not limited to, tax returns and information from tax returns as used in 30 Del. C. §368, in the custody of any State of Delaware, or other State, department, agency, instrumentality, division, office, board, bureau, council, commission, committee, panel or "public body," as that term is defined in the Delaware Freedom of Information Act, 29 Del. C. § 10002(a), including, but not limited to, the Departments of Finance, State, Labor, and Natural Resources and Environmental Control of the State of Delaware, the United States Environmental Protection Agency, the United States Department of Labor, the National Labor Relations Board or any other agency of the federal government having custody of information deemed pertinent by DEDA or the Division of Small Business staff or attorneys in evaluating Applicant's application for assistance.
- 5. This application, with all attachments & exhibits, is the product of diligent and reasonable investigation that I have either overseen or been personally involved.
- 6. I have carefully read this application, including all attachments and exhibits, and the information contained in this application, including all attachments and exhibits, is true, accurate and complete to the best of my information and belief.
- 7. I am a "high managerial agent" of the Applicant, as defined in Del. C. §284(b), and I am acting within the scope of my employment and in behalf of the Applicant.
- 8. I understand that if I have intentionally made a false statement in this application, or someone else has made a false statement herein that I know or believe to be false, I am subject to criminal prosecution. Further, the Authority, at its option, may terminate its financial assistance.
- 9. That the information reported herein is true, accurate and complete. I understand that these reports are made in support of claims for government funds.
- 10. I understand the Authority may also require the following:
- A. Appraisals on real property and/or machinery and equipment. (Appraisers acceptable to the Authority).
- B. An environmental analysis Phase I.
- C. Accounts receivable aging.
- D. Accounts payable aging.

- E. Bank loan exception letters.
- F. Financial information to be prepared by a CPA acceptable to the Authority.
- G. Additional information as determined by Authority staff.

Name of Applicant (Business)			
Signature of Representative of the Applicant	Title	Date	