



# Village of Walton Hills

Kevin Hurst – Mayor/Safety Director/Economic Development Director

Phone: 440-232-0496 Fax: 440-232-4070

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## VILLAGE OF WALTON HILLS Job Creation Incentive Grant Program

### 1. Applicant

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### 2. Company Information

Business Formation: \_\_\_\_\_

Business Type: \_\_\_\_\_

Principle Products/ Services: \_\_\_\_\_

\_\_\_\_\_

Date Established: \_\_\_\_\_

Owners: \_\_\_\_\_

### 3. Proposed Project:

Project Location: \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4. Project Investment**

Machinery & Equipment: \_\_\_\_\_

Inventory: \_\_\_\_\_

Land and Building: \_\_\_\_\_

Building Renovations: \_\_\_\_\_

**TOTAL INVESTMENT:** \_\_\_\_\_

**5. Jobs & Payroll Information**

Current Number of Jobs: \_\_\_\_\_

Most Current Years Annual Payroll: \_\_\_\_\_

Estimated New Jobs: \_\_\_\_\_

Estimated Additional Annual Payroll: \_\_\_\_\_

Most Current Annual Tax Payments to Walton Hills: \_\_\_\_\_

Year \_\_\_\_\_ Withholding: \_\_\_\_\_

Year \_\_\_\_\_ Net-profit Tax: \_\_\_\_\_

**6. Project Financing**

Name of Bank Financing the Project: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Federal, State, or Local Financing / List Agency and Amount

Agency: \_\_\_\_\_ Amount: \_\_\_\_\_

Agency: \_\_\_\_\_ Amount: \_\_\_\_\_

## 7. Project Validation

Please state reasons why jobs may be lost or company may leave Walton Hills.

If moving to Walton Hills, please state reasons why company needs incentives to finalize decision.

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**8. Submission Acknowledgements:** As an authorized agent of the applicant company, I hereby submit this application. I understand that any false statements in this application may subject the Applicant Company and signer to criminal prosecution. I also understand that additional information may be required to complete the application. By signing this application, I am authorizing the financing agencies to provide the Village of Walton Hills, on a confidential basis, with any information as part of the funding package.

I hereby certify that information on job creation or retention and payroll will be provided to the Village of Walton Hills on an annual basis throughout the term of the grant award. I hereby certify that \_\_\_\_\_, is current on all taxes, assessments, and Revolving Loan Fund payments (if Applicable) and will remain so during the term of the Agreement.

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**Signature**

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**Title**

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**Date**