



# HENRY COUNTY ENTERPRISE ZONE APPLICATION

## GENERAL INFORMATION

*(Please type or Print)*

Name of Business \_\_\_\_\_ NAICS # \_\_\_\_\_

Facility(ies) EZ, E-911 Structure Address. *If more than one location—attach typed list and label as Exhibit "A."* \_\_\_\_\_

Business Mailing Address: Number and Street Name: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Date of construction of original building(s) \_\_\_\_\_ *If more than one location—attach typed list and label as Exhibit "B."* Date business established \_\_\_\_\_

Type of Business:  Sole Proprietorship  Corporation  S Corporation  Partnership  Other (specify) \_\_\_\_\_  
*(Please Check Box)*

Property Ownership:  Lease  Own  
*(Please Check Box)*

Names of Owner(s), Partners, President or CEO \_\_\_\_\_  
\_\_\_\_\_

Contact person responsible for filing appropriate forms with County and State: \_\_\_\_\_  
Telephone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Company product and/or service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are any delinquent debts or taxes owed to the County?  YES  NO

If yes, please itemize: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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- Incentives:
- Real Property Tax Grant
  - Machinery & Tools Tax Grant
  - Business Furniture, Fixtures, and Equipment Tax Grant
  - Waiver of Building Permit Fees
  - Waiver of PSA Connection and Facilities Fees

## **Note:**

To qualify for the above stated incentives, this application must be completed in its entirety.

To apply for either the Henry County Building Permit Fee Waiver or PSA Connection and Facilities Fee Waiver, the appropriate application form must be completed and submitted along with the respected department's application. Failure to submit the appropriate form will result in forfeiture of the incentive available.

To qualify for the Enterprise Zone Real Property Tax Grant, you must submit a completed "Real Property Investment Plan/IDA Grant Form." The Form must be submitted sixty (60) days prior to start-up of construction, failure to submit form will result in forfeiture of this incentive.

To qualify for either or both the Enterprise Zone Machinery & Tools or Business Furniture, Fixtures, & Equipment Tax Grants, you must submit a completed "Machinery & Tools Investment Plan/IDA Grant Form" or a Business Furniture, Fixtures, & Equipment Investment Plan/IDA Grant Form." Failure to submit Forms by March 15th in the year immediately following the year in which investments were made, will result in forfeiture of this incentive.

Please check appropriate box and provide the following information for Utilities:

### **Electric Service:**

Service Available?  Yes  No  
Connected?  Yes  No  
Need to connect?  Yes  No  
How close is supply line? \_\_\_\_\_ Ft.

### **Natural Gas:**

Service Available?  Yes  No  
Connected?  Yes  No  
Need to Connect?  Yes  No  
How close is supply line? \_\_\_\_\_ Ft.

### **Water:**

PSA water Available?  Yes  No  
Connected?  Yes  No  
Need to connect?  Yes  No  
How close is supply line? \_\_\_\_\_ Ft.

### **Sewer:**

PSA Sewer Available?  Yes  No  
Connected?  Yes  No  
Need to Connect?  Yes  No  
How close is supply line? \_\_\_\_\_ Ft.

*\*If not enough space provided for all locations attach typed list and label as Exhibit "C."*

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## Declarations:

I hereby declare that, to the best of my knowledge and belief, the information contained in this application is true and accurate and that I am authorized to act on the behalf of the business. I understand that any refunds or credits to which the business/property owner may be entitled shall first be used to satisfy any delinquent debts owed to the County. I also understand that any false or misleading information provided by me or the business may result in the loss of incentives. **I understand that failure to submit required forms and meet required dates will result in forfeiture of the incentives offered.**

I hereby authorize the Henry County Commissioner of the Revenue to disclose to the Henry County Enterprise Zone Administrator all information regarding the gross receipts or purchases of the business and/or the amount of machinery and tools owned by the business for the period that the business is eligible for Enterprise Zone incentives. Further, I authorize the Enterprise Zone Administrator to disclose this information to the Virginia Department of Housing and Community Development for reporting purposes. I understand that this information will not be released to any other person or department.

*(Corporate Seal)*

If Available

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*Signature*

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*Title*

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*Date*