

PHASE I
Port Arthur Economic Development Corporation

Date: _____ NAISC Code _____

Amount Requested: \$ _____

Name of Entity: _____

Contact Party: _____

Address: _____

Street Number _____ City _____ State _____ Zip _____

Phone: (____) _____ Fax #: (____) _____
 Area Code Number Area Code Number

Business Structure Corp. LLC Partnership Sole Proprietorship HUB/MWBE Non-Profit

Business Type Industrial/Manufacturing Recycling Distribution Small Warehouse Commercial

Date Business Established _____

Date Business Incorporated _____

Present # of Employees or Total Payroll	
Job Classifications & Wage Scale	_____

# of Employees after Grant or Total Payroll	
Job Classifications & Wage Scale	_____

Ownership of Applicant Company
 Owners with Five (5%) Percent or Greater Ownership of the Company

Name	Title	% of Ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Sources of Funds and/or Equity

List all request and/or approvals of funds from other sources (e.g. banks, credit unions, govt. entities, etc.) together with dates of application, status and funding source contact party name: _____

Project Cost

	Amount	Source of Funds
Land	\$ _____	_____
Bldg./Renovation	\$ _____	_____
Equipment	\$ _____	_____
Furniture/Fixtures	\$ _____	_____
Working Capital	\$ _____	_____
Total	\$ _____	