

Exhibit A: Application

Approved by Drainage District
On May 11, 2021

*(content submitted for approval, formatting subject to
change as approved by the County Judge)*

**FORT BEND COUNTY
APPLICATION FOR TAX ABATEMENT**

1. Applicant's Business Name and Structure (LLC, LP, Corporation, etc.) that will be operating in Fort Bend County:

2. Name of any Parent Company, Controlling Affiliate or if applicant company is a Subsidiary of another entity that would be responsible for performance of any proposed tax abatement agreement:

3. Please provide a brief history and description of the company:

4. Contact Person and Info for Abatement Process:

Name:

Title:

Direct Phone Number:

Email Address:

Mailing Address:

Website:

5. Company officer name who would execute any potential tax abatement agreement:

Name:

Title:

Entity Name:

Phone:

Email:

Address:

City:

State: Zip: -

Website:

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6. Headquarters Location (where the company's officers direct, control and coordinate the entity's activities)

City:

State:

7. State of registration or incorporation:

8. Does the company currently have operations elsewhere in the State of Texas? If so, please state the name of communities.

PROJECT DETAILS

1. List other communities that are being considered for the project:

2. Indicate any incentives sought or received from other taxing entities in connection with this project.

3. Describe the project, including size and scope of capital improvements (real and personal property) to be undertaken, the facility's use, and the product or service to be produced.

4. Classification and NASIC CODE (i.e. Aviation/Aerospace & Advanced Manufacturing, Bioscience/Healthcare, Information Technology and Cyber-Security, Corporate and Regional Headquarters, Creative Industries, Environmental/Clean/Green Technology, Finance, Logistics and Distribution, Manufacturing):

5. Physical address of Proposed Project:

City:

County Precinct:

City Council District:

School District:

Land Size of Project:

acres

6. New construction Expansion To Lease Existing Improvements

7. Proposed Cost of New Improvement: \$

8. Proposed Cost of New Fixed Equipment and Machinery: \$

9. Other Personal Property excluding Inventory: \$

10. Proposed Cost of Initial Inventory: \$

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11. Schedule of Investment over requested term of Abatement including proposed start of construction date and completion of construction date for each phase of construction
12. Does/will the applicant own or lease the project's proposed new Land and/or Improvements? Own Lease

If to be leased, provide the name of the landlord/owner.

If to be leased, indicate lease term. Years Beginning Date:

Expiration date: / /

If Applicant owns any other property in Fort Bend County, list existing Fort Bend Central Appraisal District tax account numbers associated with this project if any

Real property: - - ; - - ; - -

Personal property: - - ; - - ; - -

13. Current local workforce: Full-time: Part-time: Seasonal:
14. Minimum number of new, full-time jobs to be created over requested term of Abatement and schedule of placement on site
15. For expansion projects only, number retained full-time jobs:
16. Base Hourly Wage at project site (excluding benefits and bonuses)*:
17. Average Annual Salary of Existing Jobs: \$
18. Average Annual Salary of Projected New Jobs: \$
19. Is the company delinquent in the payment of ad valorem taxes to any taxing unit located in Fort Bend County?
- Yes No If yes, explain:
20. Has the applying company or any of its affiliates been cited, currently under investigation, or have litigation pending for any violations of federal, state, county and/or municipal laws, codes or ordinances?
- Yes No If yes, indicate the nature/status of the violation(s):
21. Has the company previously received an incentive from the County? Yes No

Where is the property located:

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If yes, indicate the time period (MM/YY): /

If yes, explain:

If yes, is/was the company in compliance with all terms and conditions: Yes No

22. Is any interest in this project presently held by an elected, appointed or employed member of any taxing entity? Yes No

23. Is any interest in this project presently held by a member of the Fort Bend County Drainage District or other County official or employee? Yes No

If yes, explain:

24. Describe any goodwill benefits and involvement that the applicant has previously provided and/or is committed to providing in the future to the Fort Bend County community.

25. Provide an assessment of the project's environmental impact, and any remediation and/or compliance plan associated with the project, which would have the effect of minimizing the negative impact of the project on the environment.

ATTACHMENTS

- A. A map and legal description (metes and bounds) of the facility site;
- B. CAD data or a shape file with the boundaries of the proposed facility site, and if the Reinvestment Zone and facility site are not the same, then also include CAD data or a shape file with the boundaries of the proposed Reinvestment Zone;
- C. A general description of the improvements for which the Abatement is sought and the extent of the modernization, expansion, or new improvement which will be part of the facility. In the case of modernization, a statement of the assessed value of the facility, separately stated for real and personal property, shall be given for the tax year immediately preceding the application.
- D. Financial and other information as Fort Bend County deems appropriate for evaluating the financial capacity and other factors of the Applicant;
- E. A time schedule for undertaking and completing the planned improvements; and
- F. Any additional information the Applicant deems helpful to the evaluation of the application.

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Companies must submit non-refundable application fees with their applications. Projects that require an assignment or amendment are also required to pay an application fee of \$1,000.00 to each entity.

CERTIFICATION

I understand and certify that I have read the Drainage District 's current *Tax Abatement Guidelines*. I am familiar with the provisions contained therein, and that the information provided in this application may become a part of an incentive agreement with the Drainage District, I also certify that I am authorized to sign this application, that the information provided herein is true and correct, and that knowingly providing false information will result in voiding the application and termination of any incentive agreement.

Signature: _____

Date :

Printed Name:

Title:

Company Name:

Mailing Address:

City: State: Zip: -

Telephone: () - Mobile: () - E-mail address:

Applications shall be returned as follows:

Return an original executed Application to:

Fort Bend County Budget Office
Attn: Director of Finance and Investments
Address: 301 Jackson St. Richmond, TX 77469
Telephone: 281-344-3922