

Private Activity Bond Authority

Manufacturing & Exempt Facility Application



PRIVATE ACTIVITY BOND PROGRAM

Project Information and Sponsor Signatures

Project Name			
Site Location of Project			
Issuer (Applicant)			
Project Sponsor			
Project Sponsor Contact			
Information (phone #,			
email address)			
I, do hereby certify, on behalf of (Name of County/City), Utah that we have reviewed the information contained in the attached application and approve of the project as presented.		I, do hereby certify, that the information contained in the attached application is true and accurate to the best of my knowledge.	
Signature of Applicant's Sen	ior Official	Signature of Project Sponsor Officer	
Print Name		Print Name	
Title		Title	
Date		Date	

The Project Sponsor certifies that the project can be completed within the development budget and the development timetable presented in the Application. The Project Sponsor further certifies that the proposed project can be operated in the manner proposed within the operating budget set forth in the Application.

The Project Sponsor declares under penalty of perjury that the information contained in the Application, exhibits, attachments and any further or supplemental documentation is true and correct to the best of its knowledge and belief. Project Sponsor understands that misrepresentation may result in the cancellation of an Allocation. Further, Project Sponsor understands that changes made to the project, its financing, partnership structure, costs, schedules must be reported to Manager of the Private Activity Bond Authority Program as soon as possible, and failure to do so can result in the cancellation of the Allocation.



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Application Information

The purpose of this application is to provide information to the Utah Private Activity Bond Authority Review Board (PAB) to aid in the allocation of volume cap to manufacturing facilities in the State of Utah.

In recognition of the intense competition for this important and scarce resource available under the State ceiling, applicants are required to provide full explanations of the need for tax-exempt bond financing for the project and the public benefits of the project. The applicant should be aware that there is a limited amount of Volume Cap and there is the possibility of insufficient funds to accommodate all applicants. Therefore, careful comparison of individual requests is necessary to promote the highest and best use of the Volume Cap. To facilitate careful comparison and evaluation of each submission, please complete the application in its entirety and include all required exhibits.

Manufacturing and Exempt Facilities criteria definitions and scoring can be found in the Private Activity Bond Program Policies and Procedures Manual on the Private Activity Bond Program website.

Allocation of Private Activity Bonds does not ensure financial feasibility and/or proposed public benefits of the proposed project.

All applications must be submitted electronically. The application fee (made payable to the Private Activity Bond Authority) is due at the time of submission. Incomplete applications, including omitted fees, are subject to disqualification. The schedule of fees, application deadlines and meeting of the PAB Board of Review may be found on the Private Activity Bond Program website.

Send application fee to:

Private Activity Bond Authority 140 East 300 South Salt Lake City, Utah 84111

For questions regarding the application process or the Private Activity Bond Authority Program, please contact the Private Activity Bond Program Manager. Their information can be found on the Private Activity Bond Program website.



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GRAMA Request Policy

Record Accessibility

All proposals, applications and other exhibits, submitted to the PAB Review Board for funding consideration, become the property of the Private Activity Bond Authority Program (PAB). These materials are generally subject to the Utah Government Records Access Management Act ("GRAMA") (Utah Code Ann. §§63G-2-I 01 et seq) and are considered public records after the evaluation process has been completed and a final decision made.

The Act, however, does protect trade secrets, commercial information and non-individual financial information, which, if disclosed, would give an unfair advantage to the recipient of that information, as opposed to the person who submitted the application.

The following records are protected under Section 63G-2-304, if, properly classified by a governmental entity:

- 1. Trade secrets as defined in Section 13-24-2, if the person submitting the trade secret has provided the governmental entity with the information specified in Section 63G-2-308;
- 2. Commercial information or non-individual financial information obtained from a person if:
 - (a) disclosure of the information could reasonably be expected to result in unfair competitive injury to the person submitting the information or would impair the ability of the governmental entity to obtain necessary information in the future;
 - (b) the person submitting the information has a greater interest in prohibiting access than the public in obtaining access; and
 - (c) the person submitting the information has provided the governmental entity with the information specified in Section 62G-3-308;"

Protected Information Request

GRAMA provides that if a person submits trade secrets, commercial information, or non-individual financial information to a government entity, they may request that information be classified as a protected record. A protected record request for any portion of a proposal, application or other exhibits requires the completion of a "Request for Protected Record Status" form. One section of this form requires a written statement supporting the claim for confidentiality. To help facilitate this requirement, applicants may complete a "Claim of Business Confidentiality Request" form. The completed and signed Form(s) must be submitted with the proposal. The person submitting the application must clearly identify the specific information for which the protected classification is requested. Failure to provide this, risks having the entire submission be considered a public record. Please Note: An entire submission may not be protected under a claim of business confidentiality. The two forms mentioned above can be found at the end of this application.

Application Notes



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Please take note of the "Protected Information Request" paragraph under the GRAMA Policy section above. Unless an applicant requests certain sections of their application to be classified as a protected record, once an application is submitted for review, all information connected with that application, including all exhibits, are subject to GRAMA rules. (Please note: An entire application, including exhibits cannot be classified as a protected record.)

The forms "Request for Protected Record Status" and "Claim of Business Confidentiality Request" can be found on the Private Activity Bond Program <u>website</u>.



Manufacturing Application

Amount of Allocation Requested

Part 1 – Financing Team		
1. Applicant Name (Tax-Exempt Entity – City or County)		
Name of Issuing Agency:		
Name of Senior Official:		
Title of Senior Official:		
Mailing Address: City:		
State: Zip Code:		
Email: Phone #:		
2. Public Jurisdiction (proposed site location)	cion, if different from applicant location)	
Name of Jurisdiction:		
Name of Contact Person:		
Title of Contact Person:		
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
3. Name of Project Sponsor (Borrowing	Entity, e.g. ABC Company)	
Name of Staff Person:		
Title of Staff Person:		
Name of Company:		
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
4. Bond Counsel		
Name of Firm:		
Title of Attorney:		
	7	



Mailing Address:	City:		
State:	Zip Code:		
Email:	Phone #:		
5. Financial Consultant			
Name of Firm:			
Name of Contact:			
Title of Contact:			
Mailing Address: City:			
State:	Zip Code:		
Email:	Phone #:		
6. Bond Underwriter			
Name of Firm:			
Name of Contact:			
Title of Contact:			
Mailing Address:	City:		
State:	Zip Code:		
Email:	Phone #:		
7. Private Placement Agency (If Applicable)			
Name of Firm:			
Name of Contact:			
Title of Contact:			
Mailing Address:	City:		
State:	Zip Code:		
Email:	Phone #:		
8. Private Placement Bond Purchaser (If Appl	icable)		
Name of Firm:			
Name of Contact:	-		
Title of Contact:			
Mailing Address: City:			
State:	Zip Code:		



Email:	Phone #:	
9. Credit Enhancement Provider(If Application	able)	
Name of Firm:		
Name of Contact:		
Title of Contact:		
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
10. Trustee		
Name of Firm:		
Name of Contact:		
Title of Contact:		
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
10. Other Participants		
Name of Firm:		
Name of Contact:		
Title of Contact:		
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
No. 10 of Figure		
Name of Firm:		
Name of Contact:		
Title of Contact:	Cu	
Mailing Address:	City:	
State:	Zip Code:	
Email:	Phone #:	
Name of Firm:		
Name of Contact:		



Title of Contact:	
Mailing Address:	City:
State:	Zip Code:
Email:	Phone #:



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Part 2 – Executive Summary & Bond Counsel Opinion

- Please provide a short executive summary, as an exhibit, describing the company, its product(s), annual sales and the role of the proposed project. You may include any company literature or brochures in the exhibit. (Attach as Exhibit "A" Executive Summary.)
- 2. Please provide a preliminary opinion from a qualified bond attorney stating the project meets the federal tax-exempt requirements for a manufacturing project. (Attach as Exhibit "B" Bond Counsel Opinion.)



Part 3 – Allocation/Bond Issue Information

1.	Amount of Allocation requested: \$
2.	Date of Inducement: (Attach as Exhibit "C" – Copy of the Adopted Resolution.)
3.	Date of TEFRA Hearing: (Attach as Exhibit "D" – Copy of TEFRA Resolution or Certification from Applicant as to the date, time, location, and likely outcome of the public hearing and the approval of the issuance of bonds.)
4.	Proposed date of bond issuance and proposed terms: Closing Date:
5.	Will the bonds be fixed or variable rate: (please check) ☐ Fixed ☐ Variable What is the anticipated rate?
6.	Will the bonds be sold in a public offering or private placement: (please check) ☐ Public Offering ☐ Private Placement Briefly describe credit enhancement structure or private placement transaction
7.	Will the bond issuance be used to refund an outstanding issue: (please check)



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8. Briefly describe the credit enhancement structure or private placement transaction. Include at a minimum: 1) the construction or interim financing, if applicable; 2) the total amount; 3) closing deadline; 4) security/collateral provided; 5) guaranties; and 6) anticipated closing date.

(Attach as Exhibit "F" – Credit Financing Description.) (Attach as Exhibit "G" – Copy of the Commitment Letter and/or additional information.)

3. Anticipated Dona rating. N/A	9.	Anticipated bon	d rating:	N/A	
---------------------------------	----	-----------------	-----------	-----	--

	Rating	Date Rating Anticipated
Fitch		
Moody's		
Standard & Poor's		
Other		

10. Provide an explanation for the **need** for tax-exempt bonds: (relocation, expansion interest rate)

(Attach as Exhibit "H" – Need for Tax-Exempt Bond Request.)

- 11. Provide explanations for the following:
 - a. In the event the tax-exempt bond request is denied or reduced, what are the alternative financing arrangements?
 - b. If the project does not receive an allocation of tax-exempt bonds, what is the likelihood that this project will be done?

(Attach as Exhibit "I" - Alternative Financing Terms.)

12. List all sources of financing for the project at completion:

	Amount	% of Total
Tax-Exempt Bonds		
Taxable Bonds		
Equity Contribution		
City/County Grant or Other Financial Assistance		
Other (Deferral of Fees, etc.)		
Please be specific.		



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T	otals	\$	100%
	ndicate the amount of taxable debt that will be it ax-exempt and proposed terms, i.e. interest rate	=	with the proposed
<i>A</i> []	s repayment of the Bonds to be guaranteed by a Applicant? ☐ Yes ☐ No f yes, please list the name and address of the Gu Applicant:		
t D	s repayment of the bonds to be personally guara he business to be operated at the Project site? ☐ Yes ☐ No f yes, list the names and address of the Guaranto excluding any interest in the Applicant):		

16. Is additional collateral (besides the new facility and new equipment) available to secure this Bond issue?



☐ Yes ☐ No
If yes, list the additional collateral:



Part 4 – Project Sponsor Information

Please answer the following questions for both the **project sponsor (borrower)** and the **user of the facility,** if different.

1. Contact Information

	Project Sponsor:			
	Official Business Name:			
Name of Contact: Title of Contact:				
	Mailing Address:	City:		
	State:	Zip Code:		
	Email:	Phone #:		
	User:			
	Official Business Name:			
	Name of Contact:			
	Title of Contact:			
	Mailing Address:	City:		
	State:	Zip Code:		
	Email:	Phone #:		
2.	Any "doing business as" names: Project Sponsor:		or	☐ Not Applicable
	User:		or	☐ Not Applicable
3.	Address of project sponsor's headquarters, it	f different from	n add	ress in "1" above:
	Address:	City:		
	State:	Zip Code:		
	Email:	Phone #:		
4.	Other operating locations in Utah:		or	☐ Not Applicable
5.	The legal structure of the project sponsor:			



☐ Corporation	☐ Partnership	☐ Sole Proprietorship	□ LLC
Other – Please S	Specify:		_
Complete the approp Corporation: a. Officers of corp	oriate section(s) belo		
b. Major sharehol	ders (10% or more)		
c. Date and place	e of incorporation:		

d. For publicly held corporations, please name the stock exchange on which the company is listed:



1			
	If traded over the counter or NASDAQ, please	a indicato:	
	Il traded over the counter of Masona, picase	: illuicate.	
Dari	tnership:		
	Names and addresses of general and limited	nartners and share of ownership	
a. [Partner:	partifers, and share or ownership.	
	Share of Ownership	C:L	
	Mailing Address:	City:	
	State:	Zip Code:	
	Partner:		
	Share of Ownership	T a	
	Mailing Address:	City:	
	State:	Zip Code:	
	Partner:		
	Share of Ownership		
	Mailing Address:	City:	
	State:	Zip Code:	
	Partner:		
	Share of Ownership		
	Mailing Address:	City:	
	State:	Zip Code:	
b.	Date and name of partnership:		
Sole	e Proprietorship:		
a.	Name and address of proprietor		
	Sole Proprietor:		
	Share of Ownership		
	Mailing Address:	City:	
	State:	Zip Code:	



	b.	Date and place of establishment:
All		rporations, Partnerships and Sole Proprietorships must complete: Federal Tax identification number for: Project Sponsor AND User
	7.	Other tax-exempt financing currently outstanding, if any. OR D Not Applicable
	8.	If the project sponsor or user is an owner, subsidiary or affiliated directly or indirectly with any other business organization, indicate the relationship.
	9.	Financial Statements of the Project Sponsor for the past three years. For Public Corporations provide the latest 10Ks; for Private Companies, the highest level (i.e. highest level refers to compilation or audited financial statements). Attach applicant's financial statement for the most recent five years available. Include balance sheets and income statements, as well as pro formas, for the next three years reflecting debt service on the loan request. Indicate financial statements are: a) audited; b) reviewed; c) compiled. (Attach as Exhibit "J" – Financial Statements.)
Leg	_	Status of the Applicant and Project Sponsor (ALL MUST COMPLETE): Has the applicant/project sponsor filed a bankruptcy or receivership case, had a bankruptcy or receivership action commenced action against it, defaulted on a loan or been foreclosed against in the past 10 years? If so explain. Applicant: Yes No Project Sponsor: Yes No
		Explanation:



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2.	Is the applicant/project sponsor currently a become a party to, any civil litigation that notes. The financial condition of the application b. The project named in this application applicant: Yes No Explanation:	nay materially and adversely affect: ant's business; or
3.	the applicant/project sponsor within the paraffected: a. The financial condition of the application of the	,
4.	Is the applicant/project sponsor currently s become subject to, any civil litigation, exam federal licensing, accreditation or regulator explain. Applicant: Yes No Explanation:	nination, or investigation by a local, state or

- 5. In the past ten years, has the applicant/project sponsor been subject to any civil or administrative proceeding, examination or investigation by any of the following that resulted in a settlement, decision or judgment? If so, please explain.
 - a. Local, state or federal licensing taxing accreditation agency;



		Local, state or federal taxing auth	•		
	C.	· · · · · · · · · · · · · · · · · · ·	or enforcement agency that resulted in a		
		settlement, decision or judgment	? If so, please explain.		
	Applic	cant: 🛘 Yes 🛕 No	Project Sponsor: 🛮 Yes 📮 No		
	Explar	nation:			
.					
		tters (ALL MUST BE COMPLETED)			
1.			y: a) a party to; b) the subject of; c) been		
		•	r d) the subject of any criminal litigation,		
	-		ion or investigation of any kind that could:		
	a.	Result in felony charges against th	ne applicant/project sponsor?		
		Applicant: ☐ Yes ☐ No	Project Sponsor: ☐ Yes ☐ No		
	b.	Result in misdemeanor charges ag	gainst the applicant for matters relating to the		
		Applicant's business?	-		
		Applicant: ☐ Yes ☐ No	Project Sponsor: ☐ Yes ☐ No		
	c.	• •	the applicant for any financial fraud related		
		crime?	,,		
		Applicant: ☐ Yes ☐ No	Project Sponsor: ☐ Yes ☐ No		
	Ч	Materially affect the financial con			
	u.	Applicant: ☐ Yes ☐ No	Project Sponsor: ☐ Yes ☐ No		
		Applicant. Li res Li No	Project Sponsor. Li res Li No		
2	Within the past ten years, has the applicant/project sponsor ever been convicted of a				
		Felony? \(\text{Yes} \) No	and project sponsor ever seem convicted or a		
		Misdemeanor related to the cond	luct of the applicant's husiness?		
	D.				
	-	Applicant: Yes No	Project Sponsor: ☐ Yes ☐ No		
	C.	Misdemeanor for any financial or			
		Applicant: Yes No	Project Sponsor: 🛮 Yes 🖾 No		

For any questions answered "yes," please explain. (Attach as Exhibit "K" – Criminal Matters.)



Part	5 — Project Information
1.	Project Name:
2.	Project Address:
3.	City/County/Zip Code: Federal Congressional District in which the proposed project will be located State Senate District in which the proposed project will be located Census Tract If rural, Rural designation
4.	Detailed description of project sponsor's products, types of customers, i.e., discount retailer, etc., specific companies sold to etc. (Attach as Exhibit "L" – Product Description.) Description of present physical facilities including size and use of the facility, and any other pertinent information. (Attach as Exhibit "M" – Present Facility Description.)
5.	Provide the following details on the proposed project site: a. Type of Project: New construction Acquisition/Rehab b. Size of project site c. Cost of property only
6.	Attach a description of the current improvements on the site, including condition of the site, current use and size. If the site is currently vacant, please describe the prior use. (Attach as Exhibit "N" – Site Improvements.)
7.	Does the project sponsor currently own the site? ☐ Yes ☐ No Is property under contract? ☐ Yes ☐ No What is the current zoning for the property? ☐ Does Zoning allow the development of the proposed project? ☐ Yes ☐ No List local and State jurisdictions involved with the approval status.



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	Is there an environmental report of the p	property?
	Are there any know environmental issue Yes No	s with the property?
	Tes Lino	
8.		attach a description of escrow agreement or other evidence of the project sponsor's control ow Agreement.)
9.	If the property was acquired from a relat	ed party, please explain.
10.		Proposed Project Description. If available, project site and design. (Attach as Exhibit
	"P" – Proposed Project Description.)	project site and design. (Attach as Exhibit
	Number of buildings:	
	Number of square feet to be	
	constructed or renovated:	
	Type of equipment being purchased:	
	If possible contracts of purchase or	
	similar information:	
	Estimated timeline of	
	construction/renovation (Include start	
	and completion dates):	
	Principal products, uses, and activities	
	of the project	
	Estimated useful life of the building	
	and equipment:	
	Type of construction (metal, masonry,	
	etc.):	
	Percentage of equipment purchased	
	from Utah providers:	
	If this is an acquisition/rehab project, ple	ase indicate the following:

a. Age of the building(s):



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b.	Appraisal, if available:
c.	Capital Needs Assessment, if available:

Use	Size in Square Feet	Square Feet Percentage (%) of Building
Manufacturing		
Storage of Materials		
Storage of Finished Product		
Office		
Research		
Lease to Other Party		
Total Square Footage of		
Building(s)		

11. Costs of the Project

Provide the total costs associated with the acquisition of the site and construction of the proposed project in the table below. Include any utilities and proposed machinery and equipment purchases. Separate costs based on their financing sources: the left column should total the bond amount; the sum of both columns should equal the total project costs.

PLEASE NOTE THE FOLLOWING RESTRICTIONS:

Only 25% of bond proceeds may be applied to the acquisition of land. This includes the demolition costs of any existing building(s).

Warehouse space and other "non-core" items are ineligible, unless they are directly related to the manufacturing process and then are limited to 25% of the project cost. Issuance expenses paid from bond proceeds cannot exceed 2% of the face value of the bonds.

Project costs may not include working capital, moving expenses, inventory assumption, repayment or refinancing of existing debt other than construction loans.



Term	Amount Paid from PAB	Amount Paid from
	Bond Proceeds	Other Sources
Acquisition of Land		
Acquisition of Buildings		
Fees & Other Charges Related to		
Sale		
Rehabilitation of Existing		
Building(s)		
Site Preparation		
Construction Cost of New		
Building(s)		
Utility Connections		
Acquisition of Equipment		
a. New		
b. Used		
Installation Equipment Costs		
a. New		
b. Used		
Invoices		
Architect/Engineer		
Permits and Fees		
Bond Issuance Expenses		
(including any discount)		
Letter of Credit or Bond		
Insurance Fees		
Interest during Construction		
From: To:		
Interest Income during		
Construction		
From: To:		
Other: (Please Explain)		
Contingency: (Please Explain)		
Total Costs Each Financing		
Source		
Total Project Cost		



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		and completion of the project will have any adverse including additional waste disposal.
	☐ Yes ☐ No	moraum garantema. maste alapasam
	If yes, please explain.	
4.2		
	• •	and costs of new public services or infrastructure improvements
		 including utility upgrades and street improvement. Provide Exhibit "Q" – Infrastructure Costs.)
	Cotimates. Intracti as E	Ambit Q minustractore costs.,
14.	Development Team	
	General Contractor	
	Architect	
	Project Manager	
	Engineering Firm	
15.	Who on the developme	ent team prepared the construction costs?

Relocation (complete only if there is relocation of employees):

If the bond financing is required for the relocation of a facility attach documentation containing the following information in items 1 through 3. All information is required.

- 1. The relocation is due to one of the following:
 - a. An inadequacy of the existing facility.
 - b. A significant change in the company's operations requiring a different location.
 - c. A building moratorium where the existing facility is located.
 - d. Expiration of the existing lease and proof that it cannot be renewed on reasonable economic terms.
 - e. An economic need to move closer to the company's customers or suppliers.



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- f. Inability to find adequate expansion space.
- g. Other.
- 2. Will project sponsor or user retain current employees at the new facility? If so, describe steps the company will take to mitigate the relocation effects on employees.
- Is the relocation necessary to prevent the:
 Transfer of substantial operations to outside the state?

 Yes
 No

 Abandonment of substantial operations of the company?

 Yes
 No

For any question answered "yes," please explain. (Attach as Exhibit "R" – Relocation Information.)



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Part 6 – Public Benefit

The primary criterion used to evaluate a proposed project is the public benefit it generates. The principle benefit is employment followed by wages. While the initial financial profits produced by the construction of the project are valuable, it is the long-term contributions created by the operation of the facility that are most important. Characteristics of the proposed site are reviewed in order to estimate the direct and indirect advantages of the project. An area with lower incomes and employment will profit more from a new facility than another region that is performing well economically.

Answer each of the following questions as it relates to this project:

1.	Is the proposed project located in a community with an unemployment rate equal to or greater than 125% of the statewide average? \Box Yes \Box No
2.	Is the proposed project located in a community with a median household income 80% or less than the statewide average? \square Yes \square No
3.	Is the proposed project located in a community that has been designated as a "hard to develop area for residential projects"? \Box Yes \Box No
4.	Is the proposed project located in an Enterprise Zone or another Special Designation Area? ☐ Yes ☐ No
5.	Is the proposed project located in a community that has a poverty level equal to or greater than the statewide average? ☐ Yes ☐ No
inform	y question answered "yes," please explain. Attach supportive documentation. (This lation can usually be obtained from city and/or county economic development offices.) h as Exhibit "S" – Area Economic Development Information.)



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Job Creation

Using the charts below, provide the project sponsor's or user's current figures on employment and sales volume. Estimate what these figures will be upon completion of the project and two years after completion.

Statewide Operations

	Current	Upon Completion	Two Years After Completion
Number of Locations:			
Total Sales Volume:			
Number of			
Employees:			
Total Payroll:			

Project Site

	Current		Upon Completion		Two Years After Completion	
	# of	Average	# of	Average	# of	Average
	Employe	Hourly	Employee	Hourly	Employe	Hourly
	es	Wage	S	Wage	es	Wage
Total Employment						
Management						
Skilled						
Semi-Skilled						
Unskilled						
Total Hourly Wages						
	•	•	•	•	•	•
Weighted Average Hourly Wage						

Note: Calculate the average hourly wage for all positions to be created or retained by the project. The average hourly wage will be determined by: (1) multiplying the hourly wage for each category by the number of jobs to be created or retained within each category, (2) adding together the resulting weighted wage totals, and then (3) dividing the grad total by the total number of jobs to be created or retained by the proposed project. The last step is to compare the average hourly wage to the average manufacturer wage for the closest Metropolitan Statistical Area (MSA) listed by the Bureau of Labor Statistics (BLS). The manufacturing wage data is available on the BLS website (http://www.bls.gov/).



 Is the average hourly wage of the proposed project (125%) or more of the Manufacturing Wage; ☐ Yes ☐ No 	
 Is the average hourly wage of the proposed project (115%) of the Manufacturing wage ☐ Yes ☐ No 	e;
3. Is the average hourly wage of the proposed project (105%) or more but the than (115° of the manufacturing wage.☐ Yes ☐ No	%)
Complete the following, using financial information of the proposed project two years after completion.	
Gross Annual Revenue (all sources)	
Cost of Materials	
Operating Costs	
Annual Debt Cost	
Cash before Depreciation	
Other Public Benefits 1. When completed, what will the annual property taxes be for the facility?	
\$2. Will the company offer any on-site training? (5 points)□Yes □ No	
3. Will the company be involved with the local school district in providing job training to students? (5 points)☐ Yes ☐ No	
 Will the company pay a percentage of the employee's medical plan? ☐ Yes ☐ No 	
 Will the facility have an energy efficient design and construction? ☐ Yes ☐ No 	
6. What percent of taxable bonds will be used to finance the project?	



	%
7.	Has the community (city, town or county) contributed any financial resources or given any type of incentive, reduction in fees, etc. to the project? (10 points) \square Yes \square No
8.	Has the proposed project received any type of incentive, e.g., grants, tax credits, etc., from the State? (10 points) ☐ Yes ☐ No
	y question answered "yes," please explain. (Attach as Exhibit "T" – Other Public Benefits nation.)



PRIVATE ACTIVITY BOND PROGRAM

Part 7 – Evaluation Criteria

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1.	Emplo	yment	
	a.	What is your bond/job ratio? (Example: A	project requesting \$5 million that
		generates 100 new jobs has a bond per jo	b ratio of \$50,000.)
		\$jobs	
	b.	A primary goal of manufacturing bonds all new jobs. Temporary jobs, such as constru- currently in operation that have existing e gain associated with the bond request cor to be created in the first three years of the	uction, are not considered. Companies mployment, will only have the net job asidered. How many jobs are expected
		at the facility?	
		jobs	
	C.	The Board seeks to reward manufacturing retain existing jobs at higher-than-average Median Wages of the jobs located at the f Average: Me	e wages. What are the Average and
	d.	Please attach as much information and da and its impact on the community in relation "U" – Employment.)	
	e.	Please attach information and details relato be offered by the company and, if poss participation. (Attach as Exhibit "U" – Em	ible, data summarizing employee
2.	•	our project be developed on Native America	an property?
	☐ Yes	□ No	
3.	Site De	etails	
	a.	Please fill out the following information:	
		Proximity of infrastructure to site	
		Need for special infrastructure (i.e.	(Attach all as Exhibit "V" – Site
		spur line):	Details.)
		Environmental study:	
		Current title report and site plan of	
		project:	



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Building Description:	
Letters from appropriate city and	
county department to verify the	
accuracy of any representation made	
by the applicant:	

- b. Financial Readiness: Board allocations for manufacturing projects must close by the third Saturday in December of the calendar year in which the Board made the allocation. It is vital the applicant details the status of the project's financing at the time of application. The applicant should be aware that staff of PAB may contact the lender. (Attach the following as Exhibit "W" – Financial Readiness.)
 - i. Selection of bond counsel and opinion letter from bond counsel that the project qualifies for PAB.
 - ii. Letter of Intent from investment banker or if private placement, buyer of the bonds.
 - iii. Detailed commitment letters from all financial entities involved (especially the creditor).

4.	Pul	blid	: Be	nefits

a.	Will the project pay property taxes? ☐ Yes ☐ No
b.	Will the project purchase of 50% of the goods and services from other Utah companies? ☐ Yes ☐ No
c.	Will the project export their products out of the state of Utah \square Yes \square No

- 5. Community Support it is very important to the PAB Board of Review that the community in which a project shall be located supports the project. Below are some items that can show community support for a project. (Attach the following as Exhibit "X" Community Support.)
 - a. Community Concessions: the community makes any concessions (i.e. parking waivers, etc.) that are out of the ordinary and benefits the project.
 - b. Public Financing Sources: Projects that include grants, loans, or financial concessions applied for from a public entity or have formally applied for grants, loans or financial concessions may include proof of those items. The community



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involvement does not include acquisition of property from a public entity. The total amount of each financing source must equal at least ¼ of 1% of the total project cost. (Examples include: TIF, RDA grants and loans, waivers of fees, etc.) Please include proof for each of the sources.

- 6. Demonstrated Need (Attach all as Exhibit "Y" Demonstrated Need.)
 - a. Cash Flow Analysis: Realistic cash flow for the first three (3) years of operation, which demonstrates the need for tax-exempt financing.
 - b. Variable and Fixed Rates Comparison: As part of the cash flow analysis, the applicant should also compare variable and fixed rates and explain the reasons for the selection.
 - c. Equity Contribution: If the applicant is making an equity contribution, this should be explained in detail.



HOUSING & COMMUNITY DEVELOPMENT PRIVATE ACTIVITY BOND PROGRAM

Part 8 – Application Exhibits

Please use this checklist to ensure all necessary exhibits are attached for the Private Activity Bond Authority Board Manufacturing Facility Application. Incomplete applications are subject to disqualification and may not be considered for volume cap allocation. Make certain all exhibits are labeled correctly and in alphabetically order.

Please check the appropriate box for all application exhibits.			
☐ Attached ☐ N/A	Exhibit "A" – Executive Summary		
☐ Attached ☐ N/A	Exhibit "B" – Bond Counsel Opinion		
☐ Attached ☐ N/A	Exhibit "C" – Copy of the Adopted Resolution		
☐ Attached ☐ N/A	Exhibit "D" – Copy of TEFRA Resolution OR Certification from Applicant		
☐ Attached ☐ N/A	Exhibit "E" – Copy of Issuance Terms		
☐ Attached ☐ N/A	Exhibit "F" – Credit Financing Description		
☐ Attached ☐ N/A	Exhibit "G" – Copy of the Commitment Letter		
☐ Attached ☐ N/A	Exhibit "H" – Need for Tax-Exempt Bond Request		
☐ Attached ☐ N/A	Exhibit "I" – Alternative Financing Terms		
☐ Attached ☐ N/A	Exhibit "J" – Financial Statements		
☐ Attached ☐ N/A	Exhibit "K" – Criminal Matters		
☐ Attached ☐ N/A	Exhibit "L" – Product Description		
☐ Attached ☐ N/A	Exhibit "M" – Present Facility Description		
☐ Attached ☐ N/A	Exhibit "N" – Site Improvements		



☐ Attached ☐ N/A	Exhibit "O" – Escrow Agreement
☐ Attached ☐ N/A	Exhibit "P" – Proposed Project Description
☐ Attached ☐ N/A	Exhibit "Q" – Infrastructure Costs
☐ Attached ☐ N/A	Exhibit "R" – Relocation Information
☐ Attached ☐ N/A	Exhibit "S" – Area Economic Development Information
☐ Attached ☐ N/A	Exhibit "T" – Other Public Benefits Information
☐ Attached ☐ N/A	Exhibit "U" – Employment
☐ Attached ☐ N/A	Exhibit "V" – Site Details
☐ Attached ☐ N/A	Exhibit "W" – Financial Readiness
☐ Attached ☐ N/A	Exhibit "X" – Community Support
☐ Attached ☐ N/A	Exhibit "Y" – Demonstrated Need