

# Brownfield Area Incentive Application as an attachment to the General Project Overview for

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**(Name of Business Unit)**

*Must be a business unit or reporting unit of a business unit that is registered with or will be registered with the State of Florida for unemployment compensation purposes.*

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**(Project Code or Number)**

1. **IMPORTANT NOTE:** This form should be used if the project consists of a mixed-use business activity (including multiunit housing, commercial, retail, or industrial) which locates in a Brownfield area and can demonstrate a fixed capital investment of at least \$2 million.<sup>1</sup> The application should be submitted **before** the decision has been made to locate in a Brownfield.
2. Pre-approved applicants receive tax refunds up to \$2,500 per new job created. The amount of the refund is equal to 20 percent of the average annual wage of the new jobs created.
3. The requested amount of Brownfield Bonus per state fiscal year (July 1 – June 30) may not exceed 25 percent of the total award.

The tax refund claim form will be due by January 31<sup>st</sup> each year for the number of jobs on December 31<sup>st</sup> of the previous calendar year.

4. Project employment and wages:
  - a) Total number of net new to Florida full time equivalent jobs created by the project at the business unit indicated on the Overview: \_\_\_\_\_
  - b) Are any employees being transferred from another Florida location<sup>2</sup>? \_\_\_\_\_  
If employees are being transferred from another Florida location(s), how many and from where? \_\_\_\_\_
  - c) If jobs are to be phased in, provide the date when each phase of employment will be fully implemented: (Please limit the job creation to three phases.)

Phase	Number of <u>new</u> Florida jobs created in <u>business unit</u> <sup>3</sup>	Date by which those jobs will be created
I		12/31/
II		12/31/
III		12/31/

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<sup>1</sup> This form is not necessary if applying for the Qualified Target Industry Tax Refund Program Brownfield Bonus.

<sup>2</sup> Existing Florida employees cannot be included for consideration in certain incentive awards.

<sup>3</sup> Must be a minimum of 10 new jobs or a 10 percent increase (whichever is greater) in existing employment, unless the project is located in a rural community or an Enterprise Zone.

5. For purposes of certification, agreement, and claim review, indicate the wage to which you commit:  
 \$ \_\_\_\_\_ . (See number 2 on preceding page.)
6. Amount of "Local Financial Support" identified by local governing body  
 \$ \_\_\_\_\_ ;

<b>Type of Support</b>	<b>Amount of Support</b>
Cash	\$ _____
Ad Valorem Tax Abatement <sup>1</sup>	\$ _____
Land Grant by Local Governing Body <sup>1</sup>	\$ _____
Waived <sup>1</sup>	\$ _____

<sup>1</sup> Refund to the Business unit will be reduced by this amount.

(Attach the resolution adopted by the local governing body recommending the applicant be approved and indicating the level of local financial support that has been committed. Clearly indicate waivers requested and justification for such waiver.)

**PLEASE BE SURE TO ATTACH TO THE GENERAL PROJECT OVERVIEW.**

\_\_\_\_\_  
 Signature of individual completing this portion  
 (If different from General Overview)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Address (If Different)

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 Signature of Authorized Officer

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Please print or type name of Authorized Officer