



## CITY OF MANASSAS ECONOMIC INCENTIVE APPLICATION

Send your completed application and attachments to Patrick Small, CECD, Director, Economic Development. Questions about your application? Contact Patrick Small at (703) 257-8881 or [psmall@manassasva.gov](mailto:psmall@manassasva.gov).

### **PART I. APPLICANT/COMPANY INFORMATION**

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**Date:**

**Company Name:**

**Primary Contact and Title:**

**Primary Contact Address:**

**Phone:**

**Fax:**

**E-Mail:**

**Project Address (if different from above):**

**Indicate if the project is located in one of the following areas:**

Downtown/Old Town Manassas

Mathis Ave/Rt. 28

Sudley Road/Hospital

Manassas Gateway

**When is your project's start date?**

**This project is a:**

New facility/site

Expansion

Acquisition

**If this is a new facility, is your business constructing it? (If not, skip to the next question)**

Yes

No

**Does your business lease or own the facility/site?**

Lease

Own

**Site Acreage or Square Footage of Structure:**

**List the number of current and projected full-time and part-time employees with average salaries.**

Current Full-time Staff:

Current Part-time Staff:

Average Salary:

Average Salary:

Projected Full-time Staff:

Projected Part-time Staff:

Average Salary:

Average Salary:

**Briefly describe your interest in the City of Manassas and how your business contributes to the community and the City's goals?**

## **PART II. ECONOMIC DEVELOPMENT FINANCIAL IMPACT**

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### **Total Estimated Capital Investment**

Building:

Business Property:

Machinery & Tools:

Computers:

**Tax Information: For existing businesses, provide the following tax information that is applicable to your business using prior-year data as reported to your tax office. Include fiscal or calendar year dates for information reported. For new businesses, provide estimates for your first year of operations.**

- a. Amount of gross receipts:
- b. Value of business property by year of acquisition:
- c. Value of any machinery and tools by year of acquisition:
- d. Total sales tax paid in prior 12 months:
- e. Total meals tax paid or food & beverage sales in prior 12 months:

## **PART III. ATTACHMENTS**

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**Provide your business plan or project narrative that provides the following information:**

- Your business' operations, primary products or services, history, financial relationships with a parent or subsidiary, and any other relevant activities, projects, etc;
- Statement of financial capacity outlining proposed sources of project funding; and
- Future plans for growth and/or expansion.

*The information that you provide in this application is confidential and not subject to the Virginia Freedom of Information Act under Section 2.2-3705.6 of the Code of Virginia.*