

GENERAL CONTACT INFORMATION		FOR INTERNAL USE ONLY
Business Name/Owner Name:		Date App Received:
Address:		Date to STAR Fund:
City:	State: Zip:	Date to Commission:
Contact:	Cell #:	Date Commission Approved:
Phone:	Fax:	Funding Amount Approved:
Email:		Form 641:
Federal Tax ID #:	Date Business Established:	
Is SBDC Involved? YES <input type="checkbox"/> NO <input type="checkbox"/>	Time Sensitive: YES <input type="checkbox"/> NO <input type="checkbox"/>	
Amount of STAR Fund Requested: \$		

TYPE OF FUNDING REQUESTED: Please check one.

PACE Flex PACE Express

BUSINESS OWNERSHIP INFORMATION:			
Key Owner's Names	% Ownership	Source of Funds	Amount
		A.	
		B.	
		C.	
Key Management Name / Phone #	Titles		
		D.	
		E.	
			Total:

KEY ADVISORS:			
	Name	Firm / Company	Phone Number
Attorney:			
Accountant:			
Insurance Agent:			

BANKING INFORMATION:		
LOAN TYPE:	Part of Construction Finance <input type="checkbox"/> YES <input type="checkbox"/> NO OR Permanent Finance: <input type="checkbox"/> YES <input type="checkbox"/> NO	
TAX EXEMPTION:	Have you or will you be seeking a property tax exemption? <input type="checkbox"/> YES <input type="checkbox"/> NO	
FINANCIAL INSTITUTION'S NAME	CONTACT PERSON	PHONE NUMBER

EMPLOYEE INFORMATION (F.T.: Full Time P.T.: Part Time)								
Current Employees	F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$
Est. After 1 yr	F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$
Est. After 2 yrs	F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$
Totals	F.T.			\$	P.T.			\$

Flex Pace/Pace Checklist of Requirements	
<input type="checkbox"/> The STAR Fund Flex Pace/Pace Application Form	<input type="checkbox"/> IRS W-9 Form
<input type="checkbox"/> SBDC Form 641	<input type="checkbox"/> Scoring Grid

The undersigned says applicant is duly authorized to verify the foregoing application, that applicant has read the same and is familiar with the statement contained herein and that the same are true in substance and in fact. The City of Williston, STAR Fund, and Williston Economic Development reserves the right to use the results of the report in published reports and/or articles as an example of a City of Williston funded project.

AUTHORIZED SIGNATURE: _____
TITLE: _____

PRINTED NAME: _____
DATE: _____

Flex PACE Express Program

NOTE: THE FOLLOWING MUST BE COMPLETED AND SIGNED TO BE ELIGIBLE.

Goal of the Flex PACE Program:

Program is intended to make Williston a better place by helping new and existing businesses to succeed, make their properties more attractive to their customers, and to make the community more attractive to potential new businesses, employees, residents and visitors by assisting businesses to take major steps to build, remodel, or expand their facilities.

How the Flex PACE Program Works:

The STAR Fund will match the Bank of North Dakota through the Flex PACE Interest Buy-down Program to encourage investment in commercial and industrial property. The STAR Fund will invest up to a maximum of \$52,800 / project or up to a maximum of \$162,000 on a child care facility as the community's portion of the interest buy-down at a designated participation level set by the Bank of North Dakota. The Bank of North Dakota will provide an additional percentage of the interest savings. A large project could save as much as \$150,000 in interest with this program. The applicant will fill out an application along with an estimate of construction costs. Upon completion of construction, the STAR Fund will work with the applicant's bank to provide funds as a part of the permanent financing for the project. Flex PACE approved funding expires 18 months from the date of City Commission approval. Any approved monies requested on this application can only be used for interest buy-down and not equity in your project. Due to the growth in the City and the demands on the STAR Fund, we cannot guarantee that these funds will be available every year. The application will go before the STAR Fund Board and City Commission where it will be reviewed and may be approved for the first year interest by-down amount of the loan as presented. For the foreseeable future, your STAR Fund yearly installment will be reviewed on an annual basis based on your City Commission approval date and each 12 month period until the funding runs out or we have sufficient funds to fully fund your application. The STAR Fund board and City Commission reserves the right to make final determination. Applicants and/or property owner will only be eligible for one STAR Fund program every five years from application's approval by City Commission; with the exception of the C4 Technical Assistant Program.

Features:

- The City of Williston STAR Fund will provide a match at a designated participation level through a scoring grid.
- Maximum STAR Fund commitment is \$52,800 on projects over \$250,000 and \$162,000 on child care facilities.
- The STAR Fund board and City Commission reserves the right to make final determination.

Qualifications Required:

- Project is a commercial or industrial zoned business within the City Limits of Williston.
- Project is a commercial/industrial zoned business looking to relocate from a commercial area to an area 2 miles of Williston's ETJ. The property will revert back to a commercial use property.
- Applicant is current with property tax.
- Limited to one project per business per year.
- Non-sectarian religious activities are permitted.
- If the applicant is not the building owner, the building owner must sign the Flex PACE acknowledging they will not be eligible for a Flex PACE
- If a Mini-Match recipient applies for a Flex PACE during the five years the Mini-Match amount received will be deducted from the Flex PACE.
- A Flex-PACE recipient is eligible to apply for a Mini-Match five years after Flex Pace approval from City Commission.

Eligible Uses: Please mark all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Project that improves the image of the community | <input type="checkbox"/> Building construction |
| <input type="checkbox"/> New Business Start Up | <input type="checkbox"/> Building additions |
| <input type="checkbox"/> Furnishing and equipment are eligible | <input type="checkbox"/> Site Improvements |
| <input type="checkbox"/> Transitioning a retiring business to a new owner | <input type="checkbox"/> Affordable Housing |
| <input type="checkbox"/> Daycare | |

Ineligible Uses:

- Taxing entities.
- Sectarian religious activities.

The failure of applicant to comply with any of the terms of this Agreement shall constitute an event of default. The undersigned says applicant is duly authorized to verify the foregoing application, that applicant has read the same and is familiar with the statement contained herein and that the same are true in substance and in fact. The City of Williston, STAR Fund, and Williston Economic Development reserves the right to use the results of the report in published reports and/or articles as an example of a City of Williston funded project.

Representative's Signature of Acknowledgement

Date

Building Owner

Date

Building Owner Contact Number