

Appendix C – Town of Ashland Arts and Cultural District Application

New Businesses

1. Name of Business: _____
2. Owner Name: _____
3. Owner Type:
 - a. LLC
 - b. Sole Proprietor
 - c. Corporation
 - d. Other: _____
4. Has the business operated under any other names? Yes No
 - a. If “yes,” list all names under which the business has operated or is operating:

5. Contact Person and Register Agent: _____
6. Physical and Mailing Address:
7. Email: _____
8. Phone(s): _____
9. Business Web Site: _____
10. Location within Town of Ashland Arts and Cultural District, including street address:
11. Provide a detailed description of the business and business activities to be conducted at the site located within the Town of Ashland Arts and Cultural District.

12. Explain why this business should qualify as a Qualified Arts Business as defined by Town of Ashland Arts and Cultural District Ordinance?

13. This business is a:

a. Start up

b. Relocation

i. If so, from where, including street address and jurisdiction?

c. New additional location

i. If so, where are other locations, including street address and jurisdiction?

ii. How long have other locations been operating?

d. Existing

e. Expansion:

i. Please describe expansion:

ii. Dollar amount invested: _____

f. Other: _____

14. If an existing business, please describe current and past business activities, including past locations of the business.

15. Proposed start date of business or date proposed to open in the Town of Ashland Arts and Cultural District:

16. If opening the business after July 1, do you wish to elect to designate the following calendar year as the first year for incentives? Yes No

17. This business:

- a. Owns property in the Arts District.
- b. Leases property in the Arts District. If so, attach a copy of the lease.
- c. Other: _____

18. Attach a five-year business plan, including revenue and expense projections, for the business. (If this document does not currently exist, you will need to seek assistance from the Town of Ashland Economic Development Office to assist you by providing resources to create one.)

19. Based on your business plan projections, what is your anticipated Gross Receipt revenue for each of your first three calendar years in the Arts District?

Year	Anticipated Gross Receipt Revenue

20. List all principals of the business with addresses.

21. If business is other than a sole proprietor, please attach documentation showing that signatory below is authorized to sign the application and any subsequent agreement on behalf of business.

I hereby certify that all the information provided in and attached to this application is true and correct.

Date

Owner or Principal Signature

Title

Confidential proprietary records provided by a business as part of this application, including financial information and business plan, shall be maintained as confidential by the Town of Ashland and are not subject to disclosure under the Virginia Freedom of Information Act, Code of Virginia §2.2-3705.6(a)(3).

Questions?

Contact Economic Development Office at 804-798-1073. Return application to:

Ashland Economic Development Office
121 Thompson Street
P.O. Box 1600
Ashland, VA 23005