



Business Incentive Questionnaire

Marla Canfield

(Confidential)

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The information contained in this questionnaire should be accurate and will be used to determine state incentive programs applicable to this project. The information will be relied upon by the State in subsequent incentive agreements relevant for this project. If your project evolves with new information, please contact us so we may develop a revised incentive offer. The information for this Questionnaire and subsequent proposal offer from our agency is required before a company's commitment in any manner, including real estate, to a Kansas community.

Company Information:

1. Company name:
Contact name:
Address, City, State and Zip Code:
Telephone:
Email:
2. Please identify if the company is structured as a: 1) C-Corporation, 2) SubChapter-S Corporation, 3) Limited Liability Corporation, 4) Partnership or 5) Sole Proprietorship
3. Is your company owned by a foreign entity?
4. Company's Federal Employment Identification Number (FEIN)
(If project will involve more than one legal entity (FEIN), please complete a questionnaire for each)
5. Company's North American Industrial Classification Code (NAICS)
6. Please describe the company's operation at the new or existing Kansas worksite involved in this project, including the company's products or services provided.
7. Will over 50% of the revenues generated by this worksite come from sales to out-of-state commercial or governmental customers? If so, what is the percentage? Please include a list of your major customers and the geographic markets served from this worksite.
8. Has the company or owner ever operated a business in Kansas or are you acquiring a business currently operating in Kansas? If yes, what company?

9. Is this project related to any recent or planned internal restructuring?

Jobs, Ramp-Up and Wages:

10. Does the company have any existing Kansas facilities? If yes, where in Kansas?

11. What is the company’s Kansas average employment for the past 12 months?

12. Does the company have any existing Kansas jobs that will be affected by this new location?

- a. If yes, where are the jobs located in Kansas?
- b. How many jobs will be affected by this project, i.e. eliminated, relocated, etc.?
- c. What is the ***median wage** of the existing Kansas jobs?
- d. What is the **average wage** of the existing Kansas jobs?

11. If this project involves the **relocation of an existing operation** from out-of-state to Kansas which **city and state** is the facility being relocated from _____.

12. Please show the projected number of net, new jobs your firm will create over a five (5) year period at the relevant Kansas worksite for this project. Please include all employees, including management (full time and part-time)

Year	Full Time			Part Time*		
	New	Relocated From Out of State	Total Cumulative	New	Hours worked per Week	Total Cumulative
1						
2						
3						
4						
5						

(*Part-time employees need to work at least 20 hours per week, year round to count as a part-time job.)

13. Please show the average and median **hourly** wage, excluding benefits, for the net, new jobs above over a five (5) year period in Kansas. **Please include all employees and management, including all part time employees who work at least 20 hours per week, year round. Please report all data in dollars per hour in order to allow for both full-time and part-time data to be included. For those “on salary,” the annual salaries should be converted to hourly rates by dividing by 2080. If any of your employees or management report their wages on a K-1 or 1099 form, please let us know when filing this document.**

Year	Base Average Hourly Wage <u>without</u> overtime or bonus (cumulative)	Base Average Hourly Wage <u>with</u> overtime and bonus (cumulative)	*Median Hourly Wage of new jobs to qualify for PEAK (middle wage of new jobs) (cumulative)
1			
2			
3			
4			
5			

***Median Wage** – means middle wage – an example would be the median wage at a 25th employee company is the 13th wage when all employees' wages are ranked from highest to lowest. **The median wage submitted may be with or without overtime and bonus, but please note the median wage submitted will be used to determine if a company qualifies for PEAK and used in subsequent agreements under the program.**

14. Will the company offer and pay at least 50% of the premium for adequate health insurance coverage within 180 days from the date of employment for full-time employees. (Minimum coverage will include hospital care, physician care, mental health care, substance abuse treatment, prenatal and postnatal care and prescription drugs)?

Workforce Training:

Please provide a description of the training that will be provided to the employees to assist in determining the workforce training programs that may apply.

Capital Investment:

What is the net, new capital investment of this project? (Please include all relevant items)

- Size of building required (square feet): _____
- Land acreage required: _____

	Estimated Investment(\$)
Net New Capital Investment: (please indicate all that would apply)	
Purchase price of land and building	
If leasing facility, please include the first full year of lease payments	
Please provide term of lease for facility	
Purchase price of equipment, machinery, fixtures, furniture, etc.	
Cost of build-out/remodel paid for directly by the company	
If leasing equipment, please include the first full-year of lease payments. <u>Please also provide term of lease for equipment</u>	
If relocating equipment from another state to Kansas, please include its original acquisition cost (rather than depreciated cost).	

Other Important Data:

- 15. Please provide the real estate professional you are working with, including their company name.

- 16. What is the estimated date for a decision on this project?

- 17. What is the estimated date the new or expanded facility will begin operations?

- 18. What properties in Kansas are in consideration for this project? (Please include address, if possible)

- 19. What other locations (city and state) are being considered for this project?

- 20. What are the top three factors important to your site location decision (new Kansas income tax reform, workforce, real estate, tax climate, incentives, location to customers/suppliers, other)?

Signature of person completing form

Date

By your signature you are attesting to the accuracy of the information provided in the document understanding that the data provided will be used in the calculation of any or all incentives the company may be eligible to apply to receive. That any changes or corrections made to the data at a future date may cause the amount of the incentive offered to be changed.

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