

**SOUTH CAROLINA JOBS-ECONOMIC DEVELOPMENT AUTHORITY  
APPLICATION FOR INDUSTRIAL REVENUE BOND FINANCING**

This application is with respect to the issuance of industrial revenue bonds by the South Carolina Jobs-Economic Development Authority (“**JEDA**”) pursuant to The South Carolina Jobs-Economic Development Authority Act, S.C. Code Section 41-43-10, *et seq.* By submitting this application, the applicant hereby certifies and covenants that:

- (a) all information contained above and in exhibits attached hereto are true to his/her best knowledge and belief and are submitted for the purpose of obtaining financial assistance from JEDA;
- (b) the applicant has reviewed JEDA’s timeline and process with respect to approvals;
- (c) the applicant has reviewed JEDA’s fee schedule, post-issuance compliance and disclosure procedures available at <https://scjeda.com/about/resources/>; and
- (d) shall provide JEDA financial data relative to the proposed project as requested from time to time.

Submission checklist:

Remit Application Fee to JEDA.<sup>1</sup>

Mail original copy of this application by overnight mail to JEDA.

Applicant hereby executes this application on \_\_\_\_\_, 20\_\_\_\_\_:

**Applicant Name** \_\_\_\_\_

**By** \_\_\_\_\_

**Title** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

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<sup>1</sup> Please request invoice, wiring instruction, and mailing address from JEDA via email at [jedateam@scjeda.com](mailto:jedateam@scjeda.com).

**1. CONTACT INFORMATION**

Applicant Entity Name:  
Address:  
Contact Person:  
Telephone Number:  
Email Address:

Responsible Individual for Payment of Annual Fee:  
Contact Person:  
Address:  
Telephone Number:  
Email Address:

Responsible Individual for Post Issuance Compliance Certification:  
Contact Person:  
Address:  
Telephone Number:  
Email Address:

**2. SUMMARY OF PROPOSED PROJECT**

(a) Type of Business (Check One)

- Corporation
- Limited Liability Company
- Sole Proprietorship
- Partnership
- Other (Explain)

(b) Location of the Proposed Project<sup>23</sup>

Response:

*Attach legal description of the site as Exhibit A.*

(c) Brief Description of the Project

Response:

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<sup>2</sup> Insert correct address or general description if address not known. Must include county.

<sup>3</sup> The applicant certifies by signing the application in the space provided on Page 1 that the site for the proposed construction is not located in a Special Flood Hazard Area and that an investigation has been made to determine that it is not in such an area.

(d) Proposed Project Timeline

JEDA Inducement: \_\_\_\_\_  
CCED<sup>4</sup> Approval: \_\_\_\_\_  
TEFRA Hearing: \_\_\_\_\_  
Document Submission:<sup>5</sup> \_\_\_\_\_  
Final JEDA Approval: \_\_\_\_\_  
Anticipated Closing Date: \_\_\_\_\_

(e) Management of the Company

Please list those people that will be responsible for the management of the company.

Name	Position	Date Started with Company

**3. SUMMARY OF PROJECT FINANCING**

(a) Proposed Financing

Financing Source	% of Total Project Costs	Approximate Amount
Industrial Revenue Bonds Issued by JEDA		
Equity		
Other Financing		
	<b>100%</b>	

<sup>4</sup> Coordinating Council on Economic Development.

<sup>5</sup> Prior to JEDA's final meeting, all agreements to which JEDA is a party must be submitted to JEDA and its counsel. These do \*not\* have to be in final form.

(b) Proposed Uses of JEDA Financing

Line Item	Approximate Cost
Acquisition of Land	
Acquisition of Existing Facility	
New Construction	
Renovating Existing Structures	
Machinery and Equipment	
Architectural and Engineering	
Legal and Other Professional Fees	
Contingency	
Other (please identify in a supplement)	
<b>JEDA FINANCED PROJECT COSTS</b>	<b>\$</b>

(c) Proposed Financing Structure

	Financing Structure and Related Information (Complete All Applicable)
<input type="checkbox"/>	<p><b>Refunding Only</b></p> <p>Which Series of Bonds are being Refunded?</p> <p>Response:</p> <p>Please provide JEDA with explanation of anticipated savings to Borrower at the time of application or advise that proposed Refunding is only to consolidated debt service:</p> <p>Response:</p>
<input type="checkbox"/>	<p><b>Refunding and New Money</b></p>
<input type="checkbox"/>	<p><b>Private Placement</b></p> <p>Name of Placement Agent:</p> <p>Address:</p> <p>Phone Number:</p> <p>Email:</p>

<input type="checkbox"/>	<b>Public Placement</b>
<input type="checkbox"/>	<b>Underwriter</b>  Name of Underwriter: Address: Phone Number: Email:
<input type="checkbox"/>	<b>Lender (if identified)<sup>6</sup></b>  Name of Lender: Address: Phone Number: Email: <u>Notes:</u>

**4. CURRENT AND PROJECTED EMPLOYMENT**

The purpose of JEDA is to create new, permanent jobs and/or under certain conditions, assist in the retention of existing jobs. JEDA will place a great deal of emphasis on this section in arriving at their final decision regarding approval or disapproval of this application. We urge you to be as thorough and accurate as possible in arriving at your estimates.

<b>Employment Data</b>	
Number of Existing Employees	
Estimated number of new jobs that will be created after completion of the Project	Within 12 months:
	Within 24 months:
Type and Nature of Jobs <sup>7</sup>	

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<sup>6</sup> If Lender has not yet been identified, please use the “Notes” line to explain whether an RFP has been issued or is pending.

<sup>7</sup> For example, administrative staff, kitchen staff, doctors, nurses, teachers, clerical, landscaping, etc.

**5. ADVISORS AND TRUSTEE**

Party	Contact Information
Financial Advisor	Name: Address: Contact Person: Telephone Number: Email Address:
Bond Counsel	Name: Address: Contact Person: Telephone Number: Email Address:
Borrower's Counsel	Name: Address: Contact Person: Telephone Number: Email Address:
Swap Advisor (if applicable)	Name: Address: Contact Person: Telephone Number: Email Address:
Trustee	Name: Address: Contact Person: Telephone Number: Email Address:

**6. LETTERS OF INTEREST / TERM SHEETS**

Please identify any potential purchasers that have expressed an interest in purchasing the bonds. Please **attach** any letters of commitment, letters of interest, as a supplement to this application. If not applicable, please check this box:

**7. HISTORY OF THE BUSINESS**

Show date established, dates of major changes in business, employee and sales growth, dates that new product lines were established, etc. Please use supplements, if necessary.

Response:

**8. ECONOMIC FEASIBILITY AND MARKETING INFORMATION**

Please state why you think the project is necessary and why you feel it will be successful. Please use supplements, if necessary.

Response:

**EXHIBIT A  
LEGAL DESCRIPTION OF THE SITE**

[APPLICANT TO PROVIDE]

**FOR AUTHORITY USE ONLY**

Date Application Submitted:

Application Fee Paid \$:

Date Application Considered by Board:

Application    Approved    Disapproved    Pending

Date of Public Hearing:

Date Financial Commitment Received:

Date 1st Draft of Basic Documents Received:

Date Bond Resolution Approved by Board:

Date of Closing:

Terms:

Interest Rate

Number of Years