





# Arkansas Science and Technology Authority Investment Application

Brief Description of Business Enterprise

Brief Description of Business's Current Technology and Level of Development

Economic Impact	Anticipated Job Creation in Arkansas			
Job Description	Avg. Pay per Hour	Number of Jobs Created	Location (County)	Percentage of Total Jobs Created
Secretarial				
Unskilled				
Semi-Skilled				
Skilled				
Professional				
Management				
Other (specify)				
	<b>Average Wages</b>	<b>Total Jobs Created</b>		

<b>Job Creation:</b>	(at this site)	(overall)	Avg. Pay per Hour	
Present Employment:	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	
Number of jobs created by this project:	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/> (within 24 months)	<input style="width: 50px; height: 20px;" type="text"/>	

List Other Anticipated Economic Benefits Below: (This can include Arkansas vendors & customers or any other Arkansas business's or individuals that will benefit because of your business)

Necessity of State Investments &/or Tax Incentives: (Explain why State assistance is necessary for this project to succeed.)

Necessity of State Investments: (Explain why the enterprise has been unable to secure sufficient capital from traditional capital sources on terms that would enhance the success of the enterprise?)

Is your project or operation subject to any state or federal health, environmental and/or occupational safety regulations that require approval, permit, license, testing or regular inspection? If <b>YES</b> , please specify:	___ YES      ___ NO
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Is anyone associated with the Arkansas Risk Capital Matching Fund, the Arkansas Development Finance Authority, the Arkansas Science and Technology Authority, the Arkansas Economic Development Commission or the Arkansas Department of Finance and Administration involved with your enterprise in any manner?  
If **YES**, please specify:

\_\_\_ YES                      \_\_\_ NO

**Please Attach the Following Information if this application is for the Seed Capital Investment Program.**

- 1 Detailed Business Plan  
(This should include the background, history and business of the enterprise. It should also include a detailed description of the marketing plan, the operations plan, the management team, financial statements and projections, and the products and technology involved.)
- 2 Detailed Uses and Sources of Funds (This can be included within the Business Plan if desired)
- 3 If company has been in business for three years provide audited annual financial statements for last three years. If statements are not audited, please have an authorized officer sign each page and include federal income tax returns. Most recent interim financial statement.
- 4 Resumes for key executive management of the company.
- 5 Five years projected income statement, cash flow statement, balance sheet and assumptions used in preparation.
- 6 List Board of Directors & Advisory Board Members
- 7 List any other State Investments or State Tax Incentives the company has received.

Pledge	
<p>To the best of our knowledge, the data and information contained in this application and in any attached documents are true and correct. We realize that additional information may be requested for evaluation purposes. We agree to comply with all applicable federal and state laws and regulations. <b><u>Print the Form, Sign &amp; Date</u></b></p>	
<p style="text-align: center;">Title and Signature of Authorized Individual(s)</p>	<p style="text-align: center;">Date</p>

CONFIDENTIAL INFORMATION AGREEMENT	
<p>The Arkansas Science and Technology Authority (the "Authority") has established its Seed Capital Investment Program (the "Program") to provide financial assistance to technology-based companies located in Arkansas. In order to evaluate your application for funding under the Program, it is necessary to ask for information that your company may consider confidential. The Authority will utilize the information contained in the application only to evaluate the merits of your proposal, and will exercise diligence in preventing the disclosure of information that you designate as confidential.</p> <p>As you complete the application, please clearly mark as "confidential" any sections or items that you reasonably believe would cause competitive injury to your company if disclosed to parties outside of your company or the Authority. We ask that you exercise restraint and discretion in requesting that information be held confidential. Please bear in mind that the Authority is subject to the Arkansas Freedom of Information Act, Arkansas Statutes Annotated Section 12-2801 et seq. (the "Act"). Under the terms of the Act, the files of the Authority are generally open to the public, except for such "files which, if disclosed, would give advantage to competitors..." The Authority will make every effort to prevent the public disclosure of information that you designate as confidential, but cannot assure you that information not fitting within the exception to the Act will be free from public scrutiny.</p> <p>In any event, the Authority will not take special steps to prevent the public release of: (1) information that is in the public domain at the time of disclosure by you to the Authority, or which later enters the public domain or becomes common knowledge; (2) information that the Authority has in its possession at the time of disclosure by you or information that is developed independently by the Authority; (3) information that the Authority obtains from a third party; or (4) information that you disclose to a third party without imposing a requirement of confidentiality. The Authority may submit parts or all of your application to third party consultants for their evaluation. These consultants may be asked to review those materials that you have designated as confidential. In such cases, however, the Authority will require the consultants to sign nondisclosure agreements prior to their review of the confidential portions of your application. Please confirm your acceptance of this agreement by signing and returning to the Authority with your application and business plan. <b><u>Print the Form, Sign &amp; Date</u></b></p>	
<p style="text-align: center;">Title and Signature of Authorized Individuals)</p>	<p style="text-align: center;">Date</p>