CITY OF DENTON ECONOMIC DEVELOPMENT BUSINESS DUE DILIGENCE, BUSINESS CREDIT CHECK AUTHORIZATION, AND REFERENCE FORM

Federal Tax (EIN) ID No: DUNS No: State(s) in which Business is Incorporated/Registered: Parent/Holding Company Name:				
Federal Tax (EIN) ID No:	DUNS No:			
Business Physical Address(es):				
Business Legal Name: Trade Name (dba):				
Phone: Email	<u> </u>			
Relationship to Business:				
Contact Person:				
for the purposes of reviewing an economic development incentive application. I understand that the City may request additional information related to the creditworthiness or financial position of the Business in the process of reviewing and evaluating the application for economic development incentive. I understand this information may be used in the determination of eligibility for an economic development incentive. BUSINESS INFORMATION				
I,, an authorized repres	usings, haraby outhorize the City of Denter			

COMPANY OWNERSHIP AND MANAGEMENT

Please list management, proprietors, officers, stockholders (20% of more) or partners. Attach additional information as needed.

Name	Title	Percent (Owned
EVIDENCE OF FINANCIAL SOLV If you answer yes to any of the question	VENCY ns below, please attach a brief explanatio	on.	
1. Has the Business or any of its office	ers ever been involved in a bankruptcy?	Y:□	N: □
2. Has the Business or any of its office financial obligations?	ers ever defaulted on any loans or other	Y:□	N: □
3. Does the Business or any of its offic obligations on which payments are not	•	Y:□	N: □
4. Has the Business or any of its office to the Business?	ers been involved in any litigation related	Y:□	N: □
	ences that can speak to the Business's fin ons. References cannot be employees of th	_	
Reference Name:			
Relationship to Business:			
Phone:	Email:		

Reference Name:		
Relationship to Business:		
Phone:	Email:	
Reference Name:		
Relationship to Business:		
Phone:	Email:	
ATTACHMENTS Please include any attachmen	s necessary to verify the information presented herein, as needed.	
CERTIFICATION AND AC	KNOWLEDGEMENT	
knowledge. I hereby consent t	rovided herein and attached to is correct and true to the best of my the disclosure of information herein and through any attachments or the City and its agents to conduct any necessary reviews.	
I understand that completion economic development incent	of this form in no way guarantees that the Business will receive an ve from the City.	
Name of Authorized Represen	tative:	
Title:		
Signature of Authorized Repre	sentative:	
Date:		