



15 N Cameron St Winchester, VA 22601 (540) 667-1815

PROFESSIONAL JOB CREATION GRANT

PURPOSE

The purpose of the Professional Job Creation Grant is to provide an incentive to businesses that are creating full-time, professional jobs within the Enterprise Zone. One-time cash grants will be awarded to businesses that have created qualifying jobs that have been in existence for at least twelve months. The jobs eligible for the grant must have been created no more than two years from the date of the application submittal.

QUALIFICATIONS

Positions that qualify for this incentive are those that are determined by the Winchester Economic Development Authority to be positions within targeted growth industry sectors in the city. Eligible positions are those that are full-time (35 hours a week), are offered health benefits, and are paid at least the City's median annual household income. The ultimate determination of whether an applicant meets the grant criteria will be at the sole discretion of the Economic Development Authority Board.

The EDA will vote to approve or deny the grant request at their monthly board meeting following the submittal of the grant application. The EDA meets every third Tuesday of the month at 8am in the Elizabeth A. Minor Council Chambers in Rouss City Hall.

GRANT PAYMENTS

Grants payments will be made after the job has been in existence for at least twelve months. The incentive will be equal to a one-time payment of \$1,500 per position if the firm creates between one and ten full-time eligible jobs over their base employment number, and the grant will increase to \$2,000 per position if the firm creates an additional one to five jobs.

Minimum Grant Award: \$1,500 Maximum Grant Award: \$25,000



PROFESSIONAL JOB CREATION GRANT APPLICATION

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Name of Business:	Tax ID#:		
Property Address:	Telephone #:		
Website:	Date Established:		
Applicant:	Telephone #:		
Address:	Email:		
Co-Applicant:	Telephone #:		
Address:		Email:	
Is this business New or Existing?	ss New or Existing? Is this business in the Enterprise Zone?		
New:□	Yes:		
Existing:	No:		
State the number of full-time and p	part-time base-year employ	ment numbers, including the owner(s).	
PT:			
FT:			
Please list the number of jobs creater	ated after the base year tha	t have been in existence for at least	

(Continue on separate sheet if necessary)

Employee	Date	Position Title	Hours per week,	Offered	Wage Range
Name/Identifier	Hired		PT/FT?	Health	
				Benefits	

(Submit proof of payment for each position to this application.)



DISCLOSURES & ACKNOWLEDGEMENTS

The applicant/owner hereby certifies that the information submitted in the application is accurate to the best of his/her knowledge:

Applicant's Signature:	
Applicant's Title:	Date:
If project is deemed eligible for the incentive you wi made by the EDA.	Il be notified as soon as this determination is