

Tourism Zone Business Application for Grayson County and the Town of Independence

Date:

Contact Information

Name of Business:

Business Contact/Owner:

Phone:

Business Address:

Mailing Address:

Email:

Check One: ___New Tourism Business ___Existing Tourism Business (See Tourism Ordinance, Section 65.3 # 4 and #5)

Qualified Business Type (See Tourism Ordinance, Section 65.3 #1

Brief description of business plan:

Please provide documentation of \$7500 capital investment within the last 12 months.

Number of new or additional employees: Full time _____ Part time _____

For Office Use Only:

Building code waiver amount _____

Zoning waiver amount _____

Water connection waiver amount _____

Tangible business tax/personal property tax rebate amount _____

Permit fee rebate amount _____

Expediated Review yes/no/not applicable

Marketing assistance yes/no

Trash Reduction _____

Transient Occupancy Tax Rebate yes/no/not applicable

EDA Grant/Loan _____

APPROVED BY: _____

Date: _____