



MISSOURI WORKS PROGRAM

Determination of Related Facility			
<p>All other Missouri operations are assumed to be <u>Related Facilities</u> as identified in RSMo 620.2005 which may affect program benefits. If you believe the facilities are <u>NOT related</u>, please complete the following form for each Missouri facility operated by the <i>Qualified Company</i> or a <i>Related Company</i> that is not included as part of the Project for consideration by the Department of Economic Development.</p>			
Company Name Operating the Facility	Facility FEIN	Number of Employees	
Facility Address	City	State	Zip Code
Describe the business activities conducted at the facility:			
1. Can employees transfer between this facility and the Project Facility with no additional training?	YES	NO	
2. Are the resources, machinery or equipment used in this facility similar to the Project Facility?	YES	NO	
3. Are the processes used in this facility similar to the Project Facility?	YES	NO	
4. Does this facility make the same product or perform the same function as the Project Facility?	YES	NO	
5. Does this facility make a product or perform a function that is integral to the Project Facility's product or function?	YES	NO	
6. Are the products used together in the market?	YES	NO	
7. Is either facility reliant upon the other facility for products or services?	YES	NO	
Additional Comments:			
For additional information please visit the Missouri Works Program Guidelines .			

Send this Form to:

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