



# ANNUAL ENHANCED ENTERPRISE ZONE ACTIVITY AND STATUS REPORT

FOR REPORTING PERIOD JULY 1, 2017 TO JUNE 30, 2018

NAME OF ENHANCED ENTERPRISE ZONE		ZONE #			
NAME OF PERSON COMPLETING FORM	PHONE NUMBER	EMAIL			
<b>Please Ensure The Contact Information is Completed – It Will Be Added To Our Website For Your Zone</b>					
PRIMARY EEZ ADMINISTRATOR (CONTACT PERSON)		TITLE OF ADMINISTRATOR			
PHONE NUMBER	EMAIL	WEBSITE			
ADDRESS (STREET, PO BOX, CITY, STATE, ZIP CODE)					
<b>PLEASE PROVIDE THE GOVERNING AUTHORITY CONTACT INFORMATION WITHIN THE ZONE (e.g. Commissioners / Mayors)</b>					
NAME OF CONTACT	TITLE	EMAIL	PHONE NUMBER		
			(    )		
			(    )		
			(    )		
<b>PLEASE PROVIDE THE FOLLOWING INFORMATION FOR THE EEZ BOARD MEMBERS:</b>					
NAME	TITLE	EMAIL	PHONE	TERM EXPIRATION	
	<b>School Board Member</b>				
	<b>Other Taxing Districts</b>				
	<b>Chairman</b>				
<b>HAS THE EEZ TAX ABATEMENT ORDINANCE BEEN CHANGED?</b> (If YES, please send a copy with this form)		<b>YES</b>	<b>NO</b>		
<b>ATTACH ADDITIONAL SHEETS IF NECESSARY</b>					
<b>I. BUSINESSES LOCATED WITHIN THE ENHANCED ENTERPRISE ZONE WHICH EXPANDED DURING THE REPORTING PERIOD</b>					
# EXISTING BUSINESSES	# NEW BUSINESSES	# RECEIVING TAX CREDITS	# RECEIVING ABATEMENT	# NEW JOBS	\$ REAL INVESTMENT
DATE	SIGNATURE				