



Department of Economic Development

AMATEUR SPORTING TAX CREDIT PROGRAM EVENT NOTIFICATION

EVENT NOTIFICATION

LOG NUMBER

1a. APPLICANT INFORMATION (PERSON OR ENTITY CLAIMING THE TAX CREDIT)

NAME OF INDIVIDUAL OR ENTITY

NAME OF CO-HOST, IF APPLICABLE

1b. TYPE OF ENTITY

IF APPLICANT IS A BUSINESS ENTITY:

Partnership
[] General [] Limited
Corporation
[] Regular [] Subchapter S
[] Trust [] LLC

IF APPLICANT IS AN INDIVIDUAL TAXPAYER:

[] Property Owner
[] Other (specify) _____

Form fields for business and individual information including: NAME OF AUTHORIZED COMPANY OFFICIAL, TITLE, MAILING ADDRESS, BUSINESS ADDRESS, CITY/TOWN, STATE, ZIP CODE, TELEPHONE, FAX, TAXPAYER IDENTIFICATION NUMBER (OR SOCIAL SECURITY NUMBER), SOCIAL SECURITY NUMBER, NAICS CODE, BUSINESS SIZE, SPOUSE SOCIAL SECURITY NUMBER (if applicable), EMAIL ADDRESS.

HAS THE ENTITY/INDIVIDUAL (1a) EVER BEEN CONVICTED OF A VIOLATION OF THE LAWS OF ANY STATE AND, OR FEDERAL LAW?

[] YES [] NO

IF YES, PROVIDE THE DATE, THE COURT, THE CHARGES AT DISPOSITION AND THE CASE NUMBER.

2. PROJECT CONTACT

[] Applicant [] Owner [] Other (Consultant, etc.)

Form fields for project contact information including: NAME, ADDRESS, CITY/TOWN, STATE, ZIP CODE, TELEPHONE, EMAIL ADDRESS, FAX.

HAS THE „CONTACT“ EVER BEEN CONVICTED OF A VIOLATION OF THE LAWS OF ANY STATE AND, OR FEDERAL LAW?

[] YES [] NO

IF YES, PROVIDE THE DATE, THE COURT, THE CHARGES AT DISPOSITION AND THE CASE NUMBER.

3. SPORTING EVENT INFORMATION (ATTACH ADDITIONAL PAGES IF NECESSARY)

TYPE OF EVENT

EVENT ADDRESS

CITY/TOWN

STATE

ZIP CODE

COUNTY

EVENT DATE

4. EXPECTED EVENT TICKET AND PAID REGISTRANTS ATTENDANCE INFORMATION (ATTACH ADDITIONAL PAGES IF NEEDED)

EXPECTED ATTENDANCE

ESTIMATED LOCAL ATTENDEES

ESTIMATED OUT-OF-STATE ATTENDEES

ESTIMATED TICKETS SOLD AT FACE VALUE OR ESTIMATED PAID REGISTRANTS, IF APPLICABLE

ARE LOCAL SPORTS TEAMS LIKELY TO PARTICIPATE IN THE SPORTING EVENT?

IF SO, WHAT TEAMS?