

APPLICATION FOR ECONOMIC DEVELOPMENT FUNDS

Full legal name of Applicant: Holland's Office Supply of Lubbock, Inc. DBA Ascendant Hollands Office Technologies
Applicant Phone/Email: Office: 806-795-9560 Cell: 806-392-3506
Mailing Address of
Applicant: PO Box 97, Wolfforth, TX 79382
Amount of EDC funds requested: \$ 2994.16
Proposed use of the EDC funds: Purchase of Laser Engraver
What is the address of property for which Applicant is seeking to use the funds?: 608 Hwy 62, Wolfforth, TX 79382
Is Applicant seeking to expand an existing business in the City of Wolfforth? Yes No
If yes, what is the business: DBA Ascendant Hollands Office Technologies
Please describe the project in detail, including all estimated costs: Laser Engraver to produce Stamps and Name Plates, To continue to perform this service in-house.
Will the expansion create new jobs? Vos. No.

If yes, please provide details such as how many new employees within the next 5 years: 3-5
Does your business collect sales tax? (Ves) No
If yes, how much sales tax did you collect last year? \$47,031.40
Do you project an increase in sales tax collections from this expansion? If so, please provide details of estimate: Increase market share to Wolfforth and the surrounding area
Is Applicant seeking to construct a new facility in the City of Wolfforth?: Yes No
If yes, what is the business:
Please describe the project in detail, including all estimated costs:
Will this business create new jobs? Yes No
If yes, please provide details such as how many new employees within the next 5 years:
Does your business collect sales tax? Yes No
If yes, how much sales tax do you project your business to create in its first year?
Please provide details of estimate:
Is Applicant seeking to move into an existing facility in the City of Wolfforth?: Yes No
If yes, what is the approximate cost of the proposed improvements?

Does the applicant have a contract pending to purchase the property? Yes No	
If yes, what is the closing date of the purchase contract?	
Please describe the project in detail, including all estimated costs:	
Will your business regult in the greation of an actuation of in 10 Division (1)	
Will your business result in the creation of or retention of jobs? Please provided details:	
Does your business collect sales tax? Yes No	
If yes, how much sales tax do you project your business to create in its first year?	<u></u>
Please provide details of estimate:	
By signing below and submitting this application, you acknowledge and represent that all information provided in this application is true and correct. You also acknowledge that the Wolfforth EDC may recadditional information as a part of the evaluation of this application and prior to approval of the expension of any funds, and that refusal to provide any information requested may result in disqualification of you application. If you are determined eligible for funding assistance, you will be required to sign a perform agreement meeting the requirements of Section 501.158 of the Texas Local Government Code, with such agreement subject to the approval of the Wolfforth EDC Board of Directors and the Wolfforth City Con	diture ur nance h
Applicant's signature Date	
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