

[Organization](#)**Name of Organization:**

TIN or EIN:

[Primary Contact](#)

First Name:

Last Name:

Title:

Street:

Suite:

City:

State:

Zip:

Phone:

Ext:

Fax:

Email:

Detailed Description of Applicant:

NAICS (or SIC) Code:

Solid Waste Processor

☐

Solid Waste Recycler

☐[Secondary Contact](#)

First Name:

Last Name:

Title:

**Address:**

Street:

Suite:

City:

State:

Zip:

Phone:

Ext:

Fax:

Email:

[Ownership Structure](#)

Type of Entity

For Profit Corporation

☐

Partnership

☐

Entity type other:

☐

Will you be applying for State Volume Cap ?

Date of Incorporation:

State:

[Primary Billing Contact](#)

Organization:

First Name:

Last Name:

Title:

**Address:**

Street:

Suite:

City:

State:

Zip:

Phone:

Ext:

Fax:

Email:

Project Information

Project Information

Project Name:  
Estimated number of jobs created during construction:  
Estimated number of jobs created during the permanent financing:

Facility Information

Facility #1

Facility Name:  
Facility Bond Amount:  
Description of Project/Facility:

Project Address:

Street or general location:  
City:State:Zip:  
Is Project located in an unincorporated part of the County?YesNo  
☐☐

Has the City or County in which the project is located been contacted? If so, please provide name, title, telephone number and e-mail address of the person contacted:

Name of Agency:  
First Name:Last Name:  
Title:  
Phone:Ext:Fax:  
Email:

Financing Information

Financing Information

Proposed Closing Date:

Maturity Years: 0

Interest Rate Mode:

Fixed ☐ Variable ☐ Both ☐

Denominations: \$

Type of Offering:

Public Offering ☐ Private Placement ☐

Refunding ☐ New Construction ☐

Financing:

Credit Enhancement ☐ None ☐

Other ☐ Letter of Credit ☐

Name of Credit Enhancement Provider(if known):

Expected Rating:

Unrated ☒

Moody's:  S&P:  Fitch:

## Sources and Uses

## Sources and Uses

### Sources Of Funding

Tax-Exempt Bond Proceeds: §

Taxable Bond Proceeds: \$

Other Funds (Describe):

\_\_\_\_\_ \$ \_\_\_\_\_

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Total Sources:	<u>\$0.00</u>
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**Uses:**

Land Acquisition: \$

Building Acquisition:	\$
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Construction or Remodel:	\$
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Equipment Cost: \$

Cost of Issuance: \$

Capitalized Interest:	\$
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Reserves: \$

Other Uses (Describe):

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Total Uses:	<b><u>\$0.00</u></b>
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Financing Team Information

Bond Counsel

Firm Name:

Primary Contact

First Name: Last Name:

Address:

Street: Suite:

City: State: Zip:

Phone: Ext: Fax:

Email:

Bank/Underwriter/Bond Purchaser

Firm Name:

Primary Contact

First Name: Last Name:

Address:

Street: Suite:

City: State: Zip:

Phone: Ext: Fax:

Email:

Financial Adviser

Firm Name:

Primary Contact

First Name: Last Name:

Address:

Street: Suite:

City: State: Zip:

Phone: Ext: Fax:

Email: