



# Manatee County Government Rapid Response Team Services Application

Last Reviewed: 01.13.15

**Office Use Only:**  
**Job Code:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Request Confidentiality:**  Yes  No  
 PORT-EZ  ENT-Z  SWTIF  EDC  
**Project Code Name** \_\_\_\_\_

**\*An officer, owner, partner or sole proprietor of the Company applying must sign this form\***

**Company:** \_\_\_\_\_ **Product/Service:** \_\_\_\_\_

**Legal Structure of your Company:**  Sole Proprietorship  Limited Liability Company  Corporation  
 S Corporation  Non Profit  Cooperative  
**Status(Active/Pending/other – specify):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Company Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Project Type:** Expansion  Relocation  Start-up  *If start-up, provide copy of business plan not less than 3 years old.*

**Building Type:** New Build  Existing  **Size of Building:** \_\_\_\_\_ **Sq. Ft.**

**Proposed Location(s)/Address (es) with Property ID# if known:** \_\_\_\_\_

**Critical Time-Lines:** \_\_\_\_\_

**Project Description:** (Describe what will take place from a user standpoint and from a construction standpoint)  
\_\_\_\_\_

**Requested Incentive:**

**Customized County Rapid Response** - new and expanding business development is provided with an expedited review of all County permitting pertaining to the planning and building process. In addition, a project manager is assigned to act as a liaison with all reviewing agencies to ensure a customized approach.

**# of jobs to be created over 5 years** \_\_\_\_\_ **Capital Investment** \_\_\_\_\_

**CONSULTANTS (Rapid Response)**

**Local professionals familiar with Manatee County & the Rapid Response process are highly recommended**

<u>Name</u>	<u>Company</u>	<u>Role</u>	<u>Phone</u>
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**PUBLIC RELATIONS**

I, \_\_\_\_\_, of \_\_\_\_\_  
(Print Name) (Title) (Company)

agree to work with Manatee County Government and the Bradenton Area Economic Development Corporation in preparing a joint press release to announce the Company and the Rapid Response initiative by Manatee County Board of County Commissioners at a mutually agreed upon time.

After announcement of initiative, I would like to make a presentation to the Board of County Commissioners regarding the partnership between our company, Manatee County Government, and the Economic Development Council at a mutually agreed date.

Yes  No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REQUEST FOR CONFIDENTIALITY (Optional)**

I, \_\_\_\_\_, of \_\_\_\_\_  
(Print Name) (Title) (Company)

request that any and all documents, records, reports, correspondence, conversations, applications, data and other sources of information concerning our business plans, interests, or intentions to evaluate or locate in Florida be kept confidential as authorized in Section 288.075, Florida Statutes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submission Date:** \_\_\_\_\_

**PLEASE SIGN AND NOTARIZE BELOW:**

**Please mail/e-mail the completed/notarized original copy of the form to  
Karen Stewart, CEcD Economic Development Program Manager  
Manatee County Neighborhood Services Department  
Economic Development Division, P. O. Box 1000, Bradenton, FL 34206-1000  
Email: karen.stewart@mymanatee.org**

I, \_\_\_\_\_, of \_\_\_\_\_  
(Name) (Title) (Company)

verify that the information submitted in the Rapid Response Application is true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STATE OF FLORIDA, COUNTY OF MANATEE**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, by \_\_\_\_\_.  
Who is (personally known/showed identification) to me, and who (did/did not) take an oath.

My Commission Expires: \_\_\_\_\_

Notary Public (Signature): \_\_\_\_\_

Notary Public (print name): \_\_\_\_\_

**An officer, owner, partner or sole proprietor of the applying company must sign and notarize this form.**