



City of Waynesboro

## **Tourism Development Zone**

### Information and Sample Application

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## **Information**

A Tourism Development Zone (TDZ) is a designated geographic area of the city identified for increased growth in tourism-related businesses. Targeted businesses, identified using the North America Industry Classification System (NAICS) code, may be eligible for special incentives based on business criteria. In the City of Waynesboro there are three (3) designated areas: Downtown, East Main Street, and Interstate. Please refer to the maps, qualified business criteria, and possible incentives for each area by visiting <http://www.waynesborobusiness.com/Tourism-Development-Zone.aspx>. An address search feature and detailed maps are available at <http://www.waynesboro.va.us/161/GIS>.

## **Procedures**

A new or existing (prior to January 2013) Tourism Business (see definition beginning on page 2) may apply to become a Qualified Tourism Business. Please complete or download all forms from <http://www.waynesborobusiness.com/Tourism-Development-Zone.aspx>.

### **To apply:**

1. Prepare a letter or email of interest to the Waynesboro Economic Development Authority (EDA) stating your desire to submit an application and possibly receive TDZ benefits. The letter should be addressed to the Director of Economic Development and Tourism and briefly discuss your businesses capital investment and employment plans.
2. Meet with the Waynesboro Office of Economic Development and Tourism to describe your interest.
3. Complete the online application and worksheets (pages 3 and 4), print and sign. Mail or deliver the application and any requested attachments to the Economic Development office at 301 West Main Street by the first of the month for consideration at the next EDA meeting. Regular meetings are held the second Friday of each month.
4. The EDA will review your application at the next regularly scheduled meeting. You may be asked to attend the meeting to review your plan.
5. If the EDA approves your application a performance agreement will be drafted for your signature.
6. To remain eligible for ongoing inclusion in the program, annually submit a tourism zone program review application (pages 7 & 8 of this information packet) to the Waynesboro Commission of Revenue on or before March first (1) of each year of the incentive period.

## **Definitions**

**Business** means any corporation, partnership, electing small business, corporation, limited-liability company or sole proprietorship authorized to conduct business in the Commonwealth of Virginia. The term “Business” does not include organizations that are exempt from state income tax on all income **except** unrelated business taxable income as defined in the Internal Revenue Code, Section 512; nor does it include homeowner associations as defined in the Internal Revenue Code, Section 528.

**Capital Investments** means money used by a Tourism Business to purchase Fixed Assets, **not** money used for day-to-day operating expenses.

**Full Time Equivalent (FTE)** employees is the total number of full time (40 hours per week) and part time employees (20-30 hours per week) where full time employees are counted as one (1) and part time employees are counted as one-half (1/2).

**Existing Tourism Business** means a tourism-related business that was actively engaged in the conduct of trade or business in the City prior to an area being designated as a Tourism Development Zone, pursuant to this Article.

**Internal Revenue Code** means the Internal Revenue Code of 1986, as amended, Title 26 of the United States Code.

**North American Industry Classification System (NAICS)** is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. To determine your business NAICS refer to the U.S. Census website @ <http://www.census.gov/eos/www/naics>

**New Tourism Business** means a Tourism Business not already existing within the City prior to an area being designated as a Tourism Development Zone, pursuant to this Article.

**Qualified Tourism Business** means a Tourism Business that has met the qualifications set forth in Chapter 38, Title 58.1 of the Code of Virginia of 1950, as amended and described herein, and continues to meet such qualifications as required by this Article.

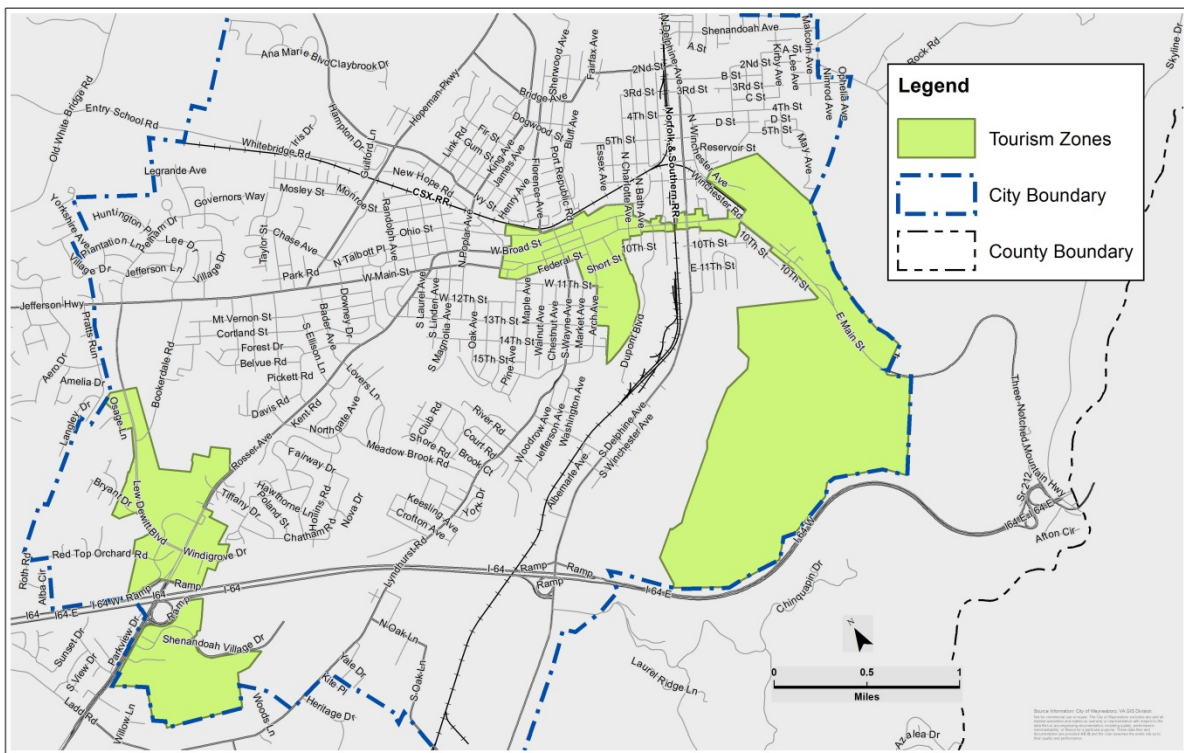
**SWaM:** The Small, Women-owned, and Minority-owned Business certification program is a state program of the Commonwealth of Virginia, intended to enhance procurement opportunities for these types of businesses. For more information and to be certified, visit <http://www.dmbv.virginia.gov/>.

**Tourism Business** means a Business whose primary purpose is to establish a desirable destination to attract tourists from outside of the community and create an environment for those visitors that will deliver a memorable experience or promote educational opportunities while increasing travel-related revenue. Each zone area has specific business types for qualification.

**Tourism Development Zone** means a specific geographic area or areas created pursuant to Chapter 38, Title 58.1 of the Code of Virginia of 1950, as amended, to foster the development and expansion of tourism-related businesses in the City.

**Tourism Zone Program Qualification Application** means an application available from the Waynesboro Economic Development office to qualify to receive Tourism Development Zone incentives established by this Article.

**Waynesboro Tourism Zone Locations:** there are three (3) designated areas: Downtown, East Main Street, and Interstate. Please refer to the overview map below and zone found at <http://www.waynesborobusiness.com/Tourism-Development-Zone.aspx>.



**Program Qualification Application** (page 1 of 3)

1. Tourism Zone Location:      \_\_\_ East Main      \_\_\_ Downtown      \_\_\_ Interstate

2. Business Firm Identification (FEIN): \_\_\_\_\_

3. Local Name: \_\_\_\_\_ Trading Name: \_\_\_\_\_

4. Physical Address: \_\_\_\_\_

5. Mailing Address: \_\_\_\_\_

6. Date: \_\_\_\_\_

7. Contact Name & Title: \_\_\_\_\_

8. Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

9. Description of qualifying business activity:

\_\_\_\_\_

\_\_\_\_\_

10. Do you have a valid Business License with the City of Waynesboro?

Yes \_\_\_ No \_\_\_ Date \_\_\_\_\_

If "no" please explain: \_\_\_\_\_

11. When did your business start? \_\_\_\_\_

If business is a "Start-up" describe schedule to begin operations and attach a complete business plan.

\_\_\_\_\_

12. Is your business exempt from State Income Tax?      Yes \_\_\_      No \_\_\_

Qualification Criteria Worksheet (page 2 of 3)

1. Do you own the building described on page one (1)? Yes \_\_\_ No \_\_\_
2. Are you SWaM certified? Yes \_\_\_ No \_\_\_ ID #: \_\_\_\_\_
3. What is the primary NAICS code for your business? \_\_\_\_\_
4. Will this project be new construction or rehab of existing space?  
 New \_\_\_ Rehab \_\_\_ Scheduled Completion Date \_\_\_\_\_

Have you discussed your plans with:

- Architect? Yes \_\_\_ No \_\_\_
- Contractor? Yes \_\_\_ No \_\_\_
- Engineer? Yes \_\_\_ No \_\_\_
- City Building Dept.? Yes \_\_\_ No \_\_\_

5. What is the estimated capital investment for the first three years?

	Year 1	Year 2	Year 3
Real Estate			
Building Improvements			
Manufacturing Equipment			
Business Equipment			
<b>Total</b>			

6. How many employees are you planning to employ and what is the per-hour average wage?

	Year 1	Year 2	Year 3	Hourly Wage
Full Time (40 hrs/wk)				
Part Time (20-30 hrs/wk)				
Part Time (less than 20)				

Office Use Only

Qualification Criteria Worksheet (page 3 of 3)

7. Will you be providing any employee benefits? Yes \_\_\_ No \_\_\_

Describe: \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, attest that I am an authorized representative of the business firm for which this application is made.

_____ Signature	_____ Printed/Typed Name
_____ Title	_____ Date

<b>Office Use Only</b>

<b>Office Use Only</b>	
Date Received by Office of Economic Development: _____	
EDA Meeting Review Date: _____	EDA Action: _____
Performance Agreement Signed: _____	



# Annual Review Application (page 1 of 2)

**Due to Commissioner of the Revenue on or before March 1**

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

1. Tourism Zone Location:      \_\_\_ East Main              \_\_\_ Downtown              \_\_\_ Interstate
  
2. Business Firm Identification Number (FEIN): \_\_\_\_\_
  
3. Local Name: \_\_\_\_\_                      Trading Name: \_\_\_\_\_
  
4. Physical Address: \_\_\_\_\_
  
5. Mailing Address: \_\_\_\_\_
  
6. Contact Name & Title: \_\_\_\_\_
  
7. Phone Number: \_\_\_\_\_              E-mail Address: \_\_\_\_\_
  
- Website: \_\_\_\_\_
  
8. Date Qualified Tourism Business: \_\_\_\_\_              Date Business opened: \_\_\_\_\_
  
9. Has your primary business purpose or location (as described in the performance agreement) changed in the last 12 months? Yes \_\_\_ No \_\_\_ If 'yes', please describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

	Year 1 Calendar Year: _____	Year 2 Calendar Year: _____	Year 3 Calendar Year: _____
BPOL fee paid			
Property tax paid			
M&T tax paid			
Business property tax paid			
# Full time employees (as of December 31)			
# Part time employees (as of December 31)			
# Less than Part time employees (as of December 31)			
# FTE employees			
Average hourly wage			
SWAM ID # (if applicable)			

**Business Firm Representative:**

I, the undersigned, am an authorized representative of the business firm for which the request is made. I declare under penalty of perjury that this request has been examined by me and is, to the best of my knowledge, an accurate statement. I further affirm that the business firm has met the requirements for the Tourism Zone Program and understand the clawback provisions as set forth in the performance agreement. All records relevant to the requirements of this form shall be made available to the Director of Economic Development.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

This annual application was witnessed by me this day of \_\_\_\_\_  
month/day/year

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

**Office Use Only**

Date Received by Commissioner of the Revenue: \_\_\_\_\_

Tax information verified by: \_\_\_\_\_

Application forwarded to EDA: \_\_\_\_\_

Reimbursement approved: \_\_\_\_\_

Check # / date/ amount: \_\_\_\_\_

# Sample Performance Agreement

Currently being revised.