commerce.wi.gov
Wisconsin
Department of Commerce

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TDY: Contact Through Relay

**Jim Doyle, Governor**
**Richard J. Leinenkugel, Secretary**

COM176 (10/99)

# Notice of Intent to Obtain a Municipal Industrial Revenue Bond

Section 66.1103 (4m) (a) 1 of the Wisconsin Statutes requires the person or business who intends to obtain an industrial revenue bond issue from a Wisconsin municipality to notify this intention to the Department of Commerce and to any collective bargaining agent in the state with whom the person or business has a collective bargaining agreement. This notification must occur at least 30 days prior to entering into the revenue agreement or signing the loan contract. The person or business must provide information on the number of full-time jobs that are expected to be eliminated, created, or maintained at the project site and elsewhere in Wisconsin as a result of the project which is the subject of this notice. The person or business named below hereby gives notice of intent to obtain an Industrial Revenue Bond pursuant to s. 66.1103 of the Wisconsin Statutes.

## I. Project

A. Person: _____
Business: _____
Address: _____
Post Office/ZIP: _____

B. Project site: _____
(Name of city, village or town in which the project is located)

C. Project type: ☐ Expansion at Present Location ☐ Relocation Within Same Municipality

☐ Relocation From Within State ☐ Relocation from Out-of-State ☐ New Business

☐ Branch-Wisconsin Operation ☐ Branch-Out-of-State Operation ☐ Other: _____

D. Maximum amount of IRB financing: $ _____

## II. Employment Estimates (to result within the next 3 years)

| Number of Full-Time Jobs | Before Project | To Be Maintained | To Be Created | To Be Eliminated | Net Total Number of Jobs |
|---|---|---|---|---|---|
| A. At the Project Site | | | | | |
| B. At All Other Wisconsin Operations | | | | | |
| C. Net Totals | | | | | |

D. Will any jobs transfer from one or more locations to the project site? Yes ☐ No ☐

Number of jobs to transfer: _____

Location(s) the jobs will transfer from: (municipality) _____

_____ _____ _____
Signed/Person completing this form | Title | Date

_____
Telephone Number