

Minnesota Forward Fund Application

APPLICATION PROCEDURES

The Minnesota Forward Fund (MFF) serves as a closing fund to facilitate private investment that supports attraction, retention, and expansion of businesses in existing and new industries and to develop properties for business use. The program is available statewide. Applications are accepted on an ongoing basis until all funds are committed. Competitive projects will invest at least \$75 million of capital expenditures at the project site in the Metro or \$35 million in Greater Minnesota. Projects are scored based on criteria such as economic impact, job creation, job retention, capital expenditure, etc.

Submit an application with all required documents by email to: ForwardFund.DEED@state.mn.us. DEED email is limited to 24.9MB; multiple emails due to file size is acceptable. All submissions will receive confirmation of receipt.

As part of the forward fund application, your business should clearly identify and flag any material that you believe contains the business's trade secrets.

PRE-AWARD PROCESS

1. Prospective applicants must procure a resolution of support from the municipality or local unit of government in which the project will be located. A resolution template is included in this application.
2. The applicant submits a complete Minnesota Forward Fund application including attachments to DEED.
3. DEED reviews, evaluates, and scores the application. A program official will also conduct due diligence through ongoing correspondence with the applicant until a determination is made. DEED notifies the business of acceptance or denial for a proposed award.
4. If accepted for a proposed award, DEED will conduct a public hearing prior to making an award. Upon award approval, DEED will inform the applicant via an award letter that indicates the award amount.

POST-AWARD PROCESS

5. Agreements are signed by the parties after the award in the form of a Grant and Loan Agreement specifying the terms including job creation or retention requirements, capital investment goals, and other applicable legal documents. The date of final signature in the Grant and Loan Agreement is considered the project Effective Date.
6. Submission of annual progress report is required including payment request documentation, and other information requested by DEED.
7. A final report is required to be submitted prior to project close out.

For more information or to schedule a pre-application consultation, email ForwardFund.DEED@state.mn.us.

Project Compliance with State Statutes

All applicants receiving a Minnesota Forward Fund subsidy shall abide by the following statutes:

1. Minnesota Statutes, Section 181.59. Prohibits discrimination in contracts.
2. Minnesota Statutes, Section 363A.08. Prohibits unfair discrimination practices related to employment or unfair employment practices.
3. Minnesota Statutes, Chapter 363A Minnesota Human Rights Act. Requires that all public services be operated in such a manner that does not discriminate against any person in the access to, admission to, full utilization of or benefit from such public service.
4. Minnesota Statutes, Section 176.181, subd. 2. Requires recipients and subcontractors to have worker's compensation insurance coverage.
5. Minnesota Statutes, Sections 290.9705. Requires that 8 percent of payments made to out-of-state contractors be withheld once cumulative payments made to the contractor for construction work done in Minnesota exceed \$50,000 in a calendar year unless a waiver is granted by the Department of Revenue.
6. Minnesota Statutes, Section 116J.871. Requires recipients of \$500,000 or more of state loan funds to be used for construction to ensure that prevailing wages are paid to laborers and mechanics at the project construction site.
7. Minnesota Statutes, Section 16B.98 and Department of Administration, Office of Grants Management, Policy Number 08-01 Conflict of Interest Policy for State Grant-Making. Forbids public officials from engaging in activities which are, or have the appearance of being, in conflict of interest.
8. Minnesota Statutes, 116J.993-995. Business Subsidy laws apply to this project.
9. Minnesota Statutes, 116J.8732. Minnesota Forward Fund laws apply to this project.
10. Minnesota Statutes, Chapter 13. The Minnesota Government Data Practices Act provides guidance on data privacy related to this project.

SECTION 1 – Local Government Certification

Local Government Information	
Local Government Project Sponsor (Town, City, County):	Local Government Contact Name and Title:
Email:	Telephone:
Address:	City/State/Zip:

I hereby certify that as the local government contact for the proposed Minnesota Forward Fund project, I have reviewed the application and business information. I agree to work with the Minnesota Forward Fund program business applicant to supply information requested by the Minnesota Department of Employment and Economic Development. I understand that a Resolution of Support is required and acknowledge receipt of the sample resolution included herein.

Name/Title of Local Government Contact: _____

Signature of Local Government Contact: _____ Date: _____

SECTION 2 – Business Information

Business Information	
Business Legal Name:	Parent Company (If Applicable):
Street Address for Project Site:	Business Mailing Address:
City/State/Zip for Project Site:	Business Mailing City/State/Zip:
Primary Business Contact:	Contact Title:
E-mail:	Telephone:
Business Website:	FEIN:
NAICS Code (#####):	State of Minnesota SWIFT Vendor Number* (#####-###):
<p>1. Have you completed the DEED demographic survey?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If you answered "No" to this question, please complete the DEED demographic survey using the link contained on the Financial Assistance Demographic Form page of this application.</p>	

2. Does the property or the business have any outstanding local, state, or federal tax liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered "Yes" to this question, please describe.
3. Are there current or unsatisfied judgements or injunctions against the business or owners? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered "Yes" to this question, please describe.
4. Have any of the business current staff who will have authority to access the funds provided by DEED, or determine how the funds are used, been convicted of a felony financial crime in the last ten (10) years? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Is there current or pending litigation involving the business? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered "Yes" to this question, please attach a summary and disposition.
6. Within the past five (5) years, has there been any violation(s), citation(s), or complaint(s) of discrimination filed against the company in a state or federal court or before any state, federal, or local government agency? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered "Yes" to this question, please attach a copy of the violation(s), citation(s), or complaint(s) and the disposition of each.

* Every individual or organization doing business with the state is considered a vendor. If you are intending on submitting an application, you will need to register as a vendor by going to: <https://mn.gov/mmb/accounting/swift/vendor-resources/>. The vendor number will ensure proper payment via electronic funds transfer (EFT). For new vendors, please note that approval of your registration may take 3-4 business days. If you need assistance obtaining a Vendor Number or completing the registration process, please call 651-201-8100, Option 1

SECTION 3 – Business Summary

Summarize your business using the following information and include the response as attachments to the application:
1. Describe the activity/purpose of your business or what type of work the business is engaged in as attachment A .
2. Describe in detail the problem your product/service will solve as attachment B .
3. Describe your state of market readiness (when, timeline, etc.) as attachment C .
4. Describe/Identify your target market(s) (who, size, location, etc.) as attachment D .
5. Describe/Identify your competitor(s) and your competitive advantage(s) as attachment E .
6. Provide specifics why Forward Fund financing is needed as attachment F .

SECTION 4 – Business & Project Overview

7. Project Description:

Provide a detailed description of the project scope including background of the project site (square footage, lease versus ownership, machinery and equipment, acquisition and/or improvement (new facility or existing), future use information, how the MFF funds will be used etc. as **attachment F**.

Has the project started (i.e., contracts have been signed, leases, language have been executed, building permits have been issued, or construction started on-site)?

☐ Yes ☐ No If you answered “Yes” to this question, provide start date and description as **attachment G**.

Date: _____

8. Project Type:

☐ Start-up Company (New business with no parent company or current operations)

☐ Minnesota Expansion – On Site (Expansion of an existing facility)

☐ Minnesota Expansion – Off Site (Expansion of an existing MN company at a new site)

☐ Business Attraction (New MN operations by a company currently operating outside of MN)

9. Business type (provide documentation listed as **attachment H**):

☐ Corporation: Articles of Incorporation, By-Laws, Certificate of Incorporation

☐ Partnership: Partnership Agreement

☐ LLC: Articles of Organization, Operating Agreement, Member Control Agreement, Certificate of Organization

☐ Sole Proprietorship: Assumed Name Certificate, Affidavit of Publication

☐ Foreign Corporation: Certificate of Authority to Transact Business in Minnesota and in home state

10. Attach three years historical financials (profit & loss/balance sheets), 2 years financial projections, and year to date internally generated financials as **attachment I**. Audited or reviewed financials are required. If unavailable, copies of tax returns are required.

11. List holders of outstanding stock of 10% or more of business ownership. For holders over 10% that are active in the business and holders over 20%, personal financial statements must be submitted as **attachment J**.

Name	Title	% of Ownership

12. List officers / key employees and include resumes (President, Vice President, etc.):

Name	Title	Years at Company

13. Have state environmental review requirements been met for the project?

☐ Yes ☐ No ☐ Not Applicable

14. What is the requested Forward Fund amount? \$_____

15. Project Timeframe:

Task:	Estimated Completion Date (MM/YYYY):
Commitment of Funds	
Start of Construction	
Purchase Equipment	
Complete Construction	
Begin Operations	

16. Project Sources and Uses:

Use of Funds	Bank(s)	Equity	State (e.g MFF)	Local Government	Other	Total
Property Acquisition						
Site Improvement						
New Construction						
Renovations of an Existing Building						
Purchase of Machinery & Equipment						
Other						
Total Project Cost						

Description of "Other" source of funds: _____

Description of "Other" use of funds: _____

Describe collateral offered and collateral position for each funding source, including proposed MFF award (e.g., Letter of Credit, Lien on Equipment, Mortgage) and what will the Forward Fund be used for:

17. List and provide amount of other public financial assistance and location which the business has received **within the last five years or expects to receive** related to this expansion from state or local governments, such as loans, grants, or project specific tax benefits (e.g., tax increment financing, tax abatements, tax refunds):

Subsidy Grantor	Subsidy Amount	Date Received/ Will be Received	Type of Subsidy	Location where Subsidy Received / Used
Example: City	\$100,000	01/01/16	Loan	St. Cloud, MN

SECTION 5 – Detailed Job and Wage Information

18. Current number of full-time equivalent (FTE) employees employed in Minnesota (full-time equivalent based on 2,080 hours per year): _____ (include most recent payroll report as **attachment K**)

19. Current number of full-time equivalent (FTE) employees employed at the proposed Minnesota Forward Fund project site: _____

Include employees that will relocate from another Minnesota site to the Minnesota Forward Fund project site if applicable.

20. Do you anticipate any reduction of positions (non-transfers) at your other Minnesota company sites during the next five years?

☐ Yes ☐ No ☐ Unknown If you answered "Yes" to this question, please describe: _____

21. Will any jobs be relocated from another Minnesota site to the proposed Minnesota Forward Fund project site:

☐ Yes ☐ No If you answered "Yes" to this question, which location(s) will the employees be relocated from?

Location	# of Employees

*If jobs will be relocating from another Minnesota location, a letter in support of the move from the city from which jobs will be moving must be included with this application.

22. Complete the table below with the number of new full-time equivalent (FTE) employees to be created in each year. The sum of job creation for years one through five is: _____ (this number needs to balance with the Job Creation Form in the following section)

	To be Created in Year 1	To be Created in Year 2	To be Created in Year 3	To be Created in Year 4	To be Created in Year 5
# of New Permanent, Full-Time Employees					

JOB CREATION FORM – List All Permanent Jobs to Be Created at the proposed Minnesota Forward Fund site in Years 1-5

(Attach as additional document if information exceeds space)

POSITION TITLE List Permanent FTE (full-time equivalent based on 2,080 hours) Positions Only*	YEAR	NUMBER OF POSITIONS	ANNUAL HOURS (e.g. 2,080 hours)	HOURLY CASH WAGE W/O BENEFITS****	HOURLY VALUE OF BENEFITS **	TOTAL HOURLY COMPENSATION INCLUDING BENEFITS***

Total Jobs to be Created in Years 1-5: _____

For the purposes of the Minnesota Forward Fund program, FTE jobs considered must be non-contract, non-seasonal, permanent positions. Only eligible non-mandated benefits to the employee. Social security tax, unemployment insurance, workers compensation insurance and other benefits mandated by law must be excluded. Minimum compensation including base wage and benefits must be at least 110% of the federal poverty income level for a family of

four (verify current wage levels with loan officer at the time of application). Each wage level should be indicated separately, do not use average wages.

SECTION 6 – Required Attachments

The following attachments must be clearly identified in your submission. It is a best practice to provide PDF file format and name the file as listed below. Incomplete applications will be considered; however, it may impact our ability to determine project eligibility, and the level of subsidy provided by the Minnesota Forward Fund.

- ☐ Conflict of Interest Disclosure Form
- ☐ Job Listing Notice
- ☐ Prevailing Wage Certification
- ☐ Consent to Release Private Business Employment and Wage Data
- ☐ I Submitted the Financial Assistance Demographic Form online
- ☐ Resolution of Support (Section 1)
- ☐ Attachment A: Activity/Purpose (Section 3)
- ☐ Attachment B: Problem (Section 3)
- ☐ Attachment C: Market Readiness (Section 3)
- ☐ Attachment D: Target Market (Section 3)
- ☐ Attachment E: Competitor/Competitive Advantage (Section 3)
- ☐ Attachment F: Project Description (Section 4)
- ☐ Attachment G: If applicable, Project Disposition (Section 4)
- ☐ Attachment H: Business Formation Documents (Section 4)
- ☐ Attachment I: Three Years of Business Financials, Year to Date Financials, Two Years of Business Projections (Section 4)
- ☐ Attachment J: If applicable, Personal Financial Statements (Section 4)
- ☐ Attachment K: Provide most recent payroll report. Note that Social Security numbers must be redacted (Section 5)
- ☐ Attachment L: If applicable, Letter of Support (Section 5)

SECTION 6 – Business Acknowledgement and Certifications

Data Privacy Acknowledgement:

Privacy Notice: The Minnesota Department of Employment and Economic Development is requesting data from you to determine if you are eligible for an award under the Minnesota Forward Fund program. You are not required to provide the requested information, but failure to do so may result in denial of your application for this program. The data that you provide may be shared with other government entities or individuals, including, but not limited to, the Office of the Legislative Auditor or the State Auditor, or as otherwise required or permitted by state or federal law or court order.

Minnesota Government Data Practices Act: The disclosure and classification of any data you submit as part of your application is governed by the Minnesota Government Data Practices Act.

Business Certification:

Financial Assistance Certification: I hereby certify that the Minnesota Forward Fund program is necessary to our business start-up, expansion, or attraction and that without the Minnesota Forward Fund our business start-up, expansion, or attraction project would not happen to the extent outlined in the Minnesota Forward Fund Application. We certify that we will pay prevailing wages as required under the laws of the State of Minnesota, if applicable. We certify we will enlist the services of DEED's Employment and Training staff and will sign a Job Listing Agreement as a condition to receiving funds in excess of \$200,000 from the Minnesota Department of Employment and Economic Development.

I have read the above statements, and I agree to supply the information requested to the Minnesota Department of Employment and Economic Development with full knowledge of the information provided herein. I certify that all information provided herein is true and accurate and that the official signing this form has authorization to do so.

Name/Title of Business Official: _____

Signature of Business Official: _____ Date: _____

Conflict of Interest Disclosure Form

This form gives applicants and grantees an opportunity to disclose any actual or potential conflicts of interest that may exist when receiving a grant. It is the applicant/grantee's obligation to be familiar with the Office of Grants Management (OGM) [Grants Policy 08-01 Conflict of Interest Policy for State Grant-Making \(January 2022 Effective Date 1/1/22\)](#) and to disclose any conflicts of interest accordingly.

All grant applicants must complete and sign a conflict of interest disclosure form.

☐ I or my grant organization do NOT have an ACTUAL or POTENTIAL conflict of interest.

If at any time after submission of this form, I or my grant organization discover any conflict of interest(s), I or my grant organization will disclose that conflict immediately to the appropriate agency or grant program personnel.

☐ I or my grant organization have an ACTUAL or POTENTIAL conflict of interest. *(Please describe below):*

If at any time after submission of this form, I or my grant organization discover any additional conflict of interest(s), I or my grant organization will disclose that conflict immediately to the appropriate agency or grant program personnel.

Organization

Printed Name and Title of Business Contact

Phone

Signature

Date

Job Listing Notice

A business receiving financial assistance from the State of Minnesota in an amount in excess of \$200,000 for a single project shall work with DEED's Employment and Training staff to list any vacant or new positions related to the project on www.minnesotaworks.net site per Minn. Stat. 116L.66. The employer is also encouraged to enlist the services of DEED's Employment and Training staff to recruit and refer job candidates.

The Job Listing requirements follow these steps:

1. At the time of financing award, DEED's Business Finance Office will provide written notification of the award to DEED's Employment and Training staff. This notification will include the business name, address and phone number (as well as for the contact person) and the number and type of jobs to be created as a result of the DEED assistance.
2. The Employment and Training representative will contact the business to schedule a meeting to sign a Job Listing Agreement that details how positions will be posted on www.minnesotaworks.net. The employer is required to list only those job openings that are part of the project DEED is assisting.
3. Managerial positions, positions that require unusual skills, knowledge, abilities and/or experience not common to the labor market, and job openings to be filled by internal promotion will not subject to the Agreement and need not be listed on www.minnesotaworks.net.
4. The business will notify the Employment and Training staff of job openings and will ensure that job vacancies are entered into www.minnesotaworks.net at least 15 days prior to the anticipated hiring date. Employment and Training staff may refer the employer to free services that can expedite the job order entry.
5. Applicants will follow instructions on www.minnesotaworks.net to apply for open positions. However, the business will make all decisions on which candidates they will interview and hire.
6. The employer may continue to use other recruitment and job referral services in addition to www.minnesotaworks.net and may fill positions prior to meeting with Employment and Training staff and signing the Job Listing Agreement.

The Job Listing Notice is designed to help businesses recruit and hire qualified candidates. If you have questions about using www.minnesotaworks.net, please contact your local Employment and Training staff at <https://mn.gov/deed/business/help/workforce-assistance/wf-strategy.jsp> or the www.minnesotaworks.net Help Desk Specialist at (651) 259-7500.

Certification

I have read the above information and understand that as a recipient of state financial assistance in excess of \$200,000, a representative shall meet with DEED Employment and Training staff and agree to sign a job listing agreement and post project-related jobs on www.minnesotaworks.net following the meeting.

Printed Name of Business Contact

Title

Phone

Signature

Date

E-mail

Prevailing Wage Certification

To: Minnesota Department of Labor and Industry
Prevailing Wage Compliance Unit
443 Lafayette Road N.
St. Paul, MN 55155

Re: Prevailing Wage Certification – Minn. Stat. §116J.871

_____ is a recipient of financial assistance from the Minnesota Department of Employment and Economic Development for the Project identified below.

As required by Minn. Stat. §116J.871, subd. 2, [INSERT RECIPIENT NAME, ADDRESS, TELEPHONE NUMBER, AND EMAIL ADDRESS] _____,

_____ hereby certifies to the Commissioner of Labor and Industry, that laborers and mechanics at the project site during construction, installation, remodeling or repairs for which the financial assistance will be provided, in whole or part, will be paid the prevailing wage rate as defined in Minn. Stat. §177.42, subd. 6. Prevailing wages paid to laborers and mechanics at the project site shall comply with the prevailing wage rates determined for _____ County, Minnesota.

_____ understands that failure to pay prevailing wage is a misdemeanor and that each day of violation is a separate offense under Minn. Stat. §116J.871, subd. 3.

Project Name: _____

Project Start Date: _____

Project Site Address: _____

Financial Assistance Contract Number: _____

By: _____	Signature: _____
Print Name of Authorized Representative	Signature of Authorized Representative

Its: _____	Date: _____
Authorized Representative's Title	Date Signed and Certified

INFORMATION FOR RECIPIENTS

Recipients must ensure all laborers and mechanics at the project site during construction, installation, remodeling or repairs for which the financial assistance from a state agency will be provided is performed under contracts that specifically include the prevailing wage rate requirements of the Minnesota Prevailing Wage Act, Minnesota Statutes sections 177.41-.44 and Minnesota Rules, sections 5200.1000-.1120 (hereinafter “MPWA”).

Recipients also must ensure that contractors and their subcontractors will comply with the requirements of the MPWA, including recordkeeping, completion and submission of certified payroll reports, posting and contract requirements and the requirement that laborers and mechanics at the project site during construction, installation, remodeling or repairs for which the financial assistance will be provided are paid the applicable prevailing wage rate(s) for each classification of work they perform. These requirements and enforcement provisions are set forth at Minn. Stat. § 116J.871, subd. 2(a).

In accordance with the MPWA and because the Commissioner, pursuant to Minn. Stat. § 177.30(a)(7), has deemed certain payroll information necessary and appropriate, recipients must also ensure that each employer performing work at the project site during construction, installation, remodeling or repairs for which financial assistance from a state agency is provided will prepare, maintain as required, and provide to the Department of Labor and Industry upon request, certified payroll reports with respect to the wages and benefits paid to employees specifying for each employee: the employee’s name; prevailing wage job classifications; hours worked each day; total hours; rates of pay; gross amount earned; each deduction for taxes; total deductions; net pay for week; dollars contributed per hour for each benefit, including name and address of administrator; benefit account number; and telephone number for health and welfare, vacation or holiday, apprenticeship training, pension, and other benefit programs.

These same certified payroll records must be submitted to the contracting authority no more than 14 days after the end of each pay period and retained by the employer for a minimum of three years after the final payment is made on the project. Minn. Stat. §§ 177.30, subd.(a)(7), .43, subd. 3. A sample certified payroll form is available at http://www.dli.mn.gov/sites/default/files/pdf/pw_certified_payroll_form.pdf. The state agency awarding the financial assistance is considered the contracting authority. Minn. Stat. § 116J.871, subd. 2(b).

Recipients of financial assistance from a state agency should contact the Department of Labor and Industry for applicable prevailing wage rates and guidance on how to comply with prevailing wage requirements in Minnesota Statutes, section 116J.871 and the MPWA:

Division of Labor Standards

Karen Bugar, State Program Administrative Director

443 Lafayette Road N, St. Paul, MN 55155

651-284-5091 or dli.prevwage@state.mn.us

Email completed copy to dli.prevwage@state.mn.us or mail to the Department of Labor and Industry at the address on page 1 of this form. A copy should also be submitted to the state agency awarding the financial assistance.

Consent to Release Private Business Employment and Wage Data

Collected and Maintained by the Minnesota Unemployment Insurance Program

To qualify for financial assistance from the DEED Office of Business Finance, your business must agree to create or retain a minimum number of jobs within a specific period of time. These jobs must also pay at or above specified wage levels.

To verify that these requirements have been met, the Office of Business Finance uses quarterly wage records submitted by businesses to the Minnesota Unemployment Insurance Program.

Because Unemployment Insurance records are private, we need your permission to access records about your business. The records we seek to access include:

- Aggregate Minnesota employment levels for your business
- Aggregate Minnesota employment levels at the relevant project site
- Information about your compliance with Unemployment Insurance tax and reporting requirements

It is important to note that we will not receive the names or social security numbers of your employees.

If you sign this form, your records will be securely transmitted by Unemployment Insurance Program staff to the Office of Business Finance. The Office of Business Finance will receive your Unemployment Insurance records on an ongoing basis until your business subsidy agreement expires or is terminated. We will not release any data from your Unemployment Insurance records to any other parties.

You are not legally required to grant us access to your Unemployment Insurance records. You also have the right to withdraw your permission at any time. Please note, however, that refusal to grant access to your Unemployment Insurance records may limit your eligibility for financial assistance.

If you have questions about this form, please contact Stephen Wolff, Executive Director, Office of Business Finance at 651-259-7415 or stephen.wolff@state.mn.us.

I give my permission for the Unemployment Insurance Program to release the records about my business (as described in this form) to the DEED Office of Business Finance. I understand that these records will be used by the Office of Business Finance to verify the satisfaction of requirements associated with my business subsidy agreement.

Signature of Business Official	Business Name	Date
Printed Name of Business Official	Position	
E-mail	Phone	
Employer Identification Number (EIN) Used for Project Site		
Other Employer Identification Numbers (EINs) Used by Business		

Notice: Accurately Reporting Business Units to the Minnesota Unemployment Insurance Program

This notice informs that Minn. Stat. § 268.044 requires your business to submit quarterly wage records to the Minnesota Unemployment Insurance Program by “reporting unit”.

You have the option to split reporting units for your business by physical location, financial centers, division of labor, or user security requirements. For the purposes of monitoring job creation and wage level performance per your business subsidy agreement, the Office of Business Finance strongly recommends creating a specific reporting unit for the relevant project site.

Reporting units can be added or modified as follows:

To add a reporting unit:

1. **Log in to your account** at www.uimn.org
2. On My Home Page, click **Account Maintenance**.
3. Click **Maintain Reporting Units**.
4. Click **Add New Reporting Unit**.
5. Enter reporting unit information.
6. Click **Next**. The Address Validation page opens.
7. Confirm the address, and then click **Next**.
8. Verify the reporting unit information.
9. Click **Submit**.

To inactivate a reporting unit:

1. **Log in to your account** at www.uimn.org
2. On My Home Page, click **Account Maintenance**.
3. Click **Maintain Reporting Units**.
4. Under Active Reporting Units, click the reporting unit link.
5. Under Inactivate Reporting Unit, check the checkbox **Inactivate Reporting Unit**.
6. Enter the date of last covered wages for this reporting unit.
7. Select the reason for inactivating this reporting unit from the drop down menu, and then click **Next**.
8. Verify the reporting unit information and benefit account mailing address.
9. Click **Save**.

If you have any questions about reporting units or other aspects of the Unemployment Insurance wage detail submission process, contact Aaron Tell, Unemployment Insurance Outreach Specialist, at 651-259-7567 or aaron.tell@state.mn.us.

Signature of Business Official	Company	Date
<hr/>		
Printed Name of Business Official	Position	
<hr/>		
E-mail	Phone	
<hr/>		

Financial Assistance Demographic Form

DEED's mission is to empower the growth of the Minnesota economy, for everyone. As part of our continuous improvement efforts, we collect demographic information about the owners of businesses seeking public assistance. We value your participation, as it assists the agency in measuring the effectiveness and reach of our financial assistance programing. This form is estimated to take approximately seven minutes to complete.

Tennesen warning Notice: DEED is requesting information from you so DEED can measure the effectiveness of our financial assistance programs. You are not legally required to provide this information, and there will be no consequences to you if you choose not to provide the information. If you do provide information, the information will be used by individuals within DEED whose job assignments reasonably require access to the information to assess DEED programs. By providing this information, you consent to this use. Certain information you provide to us is classified as private or nonpublic data and cannot be shared except as specified by statute or court order.

[Click here to complete the demographic form](#)

Check this box to confirm form completed ☐

Local Government Resolution Template

This resolution must be adopted in conjunction with the submission of the Minnesota Forward Fund program application. The resolution shall be adopted by the City Council, County Board, Town Board or Tribal Government where the project will occur. A resolution of support from the local Economic Development Authority, Housing & Redevelopment Authority or Port Authority does not satisfy program requirements.

CITY OF <<City Name>>, MINNESOTA

RESOLUTION NO. <<INSERT>>

RESOLUTION REGARDING THE SUPPORT OF A MINNESOTA FORWARD FUND APPLICATION IN CONNECTION WITH
<<BUSINESS NAME>>

WHEREAS, the City of <<City Name>>, Minnesota (the “City”), desires to assist <<Business Name>>, a <<company type>>, which is proposing to <<construct, improve>> a facility in the City and <<purchase machinery and equipment>>; and,

WHEREAS, the City of <<City Name>> understands that <<Business Name>>, through and with the support of the City, intends to submit or has submitted to the Minnesota Department of Employment and Economic Development an application for an award from the Minnesota Forward Fund program; and,

WHEREAS, the City of <<City Name>> held a city council meeting on <<date>>, to consider this matter.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF <<City Name>>, Minnesota, that, after due consideration, the Mayor and <<Authorized Official>> of the City of <<City Name>>, Minnesota, hereby adopts the following findings of fact related to the project proposed by <<Business Name>> and its application for an award and/or rebate from the Minnesota Forward Fund Program and express their approval.

The City Council hereby finds and adopts the reasons and facts supporting the following findings of fact for the approval of the Minnesota Forward Fund program application:

1. Finding that the project is in the public interest because it will encourage the growth of commerce and industry, prevent the movement of current or future operations to locations outside Minnesota, result in increased employment in Minnesota, and preserve or enhance the state and local tax base

List reasons and facts supporting this particular finding for the project.

2. Finding that the proposed project, in the opinion of the City Council, would not reasonably be expected to occur solely through private investment within the reasonably foreseeable future.

List reasons and facts supporting this particular finding for the project.

3. Finding that the proposed project conforms to the general plan for the development or redevelopment of the City as a whole.

List reasons and facts supporting this particular finding for the project.

4. Finding that the proposed project will afford maximum opportunity, consistent with the sound needs of the City as a whole, for the redevelopment or development of the project by private enterprise.

List reasons and facts supporting this particular finding for the project.

Sworn and Executed Under My Hand this ____ day of _____, ____.