

FORM A – SCORING Certificate of Conditional Eligibility

Tennessee Entertainment Commission (615) 741 – FILM (3456)

TN.Entertainment@tn.gov

Name of Eligible Company (Applicant)	Name of Person Completing Application	Title	
E-mail Address	Telephone Number	Fax	
Company Address	Company City, State, Zip	Company Phone	
Website	State where Incorporated or Organized	Federal Tax ID Number (FEIN)	
Type of Production:			
a. Budget (entire project)	b. Total TN Expenditures (paid to TN residents and vendors)	c. Anticipated Incentive (based on 25% grant)	
d. TN Wage Amount (<i>paid to TN residents</i>)	e. TN Vendor Spend Amount (<i>paid to TN</i> Vendors)	f. Total Number of TN Hires	

- (i) The applicant shall provide the Tennessee Entertainment Commission ("TEC") with the information the TEC deems necessary to verify project expenditures, personnel expenditures and eligibility for an incentive;
- (ii) Any expenses incurred before the date of effective date of the Grant Contract do not qualify as eligible expenditures, and thus cannot be used to calculate the incentive amount; and
- (iii) The Department of Economic Community Development can reclaim the incentive amount awarded if a project has not met the responsibility of commencing work in Tennessee within the required limits set forth in Part 2 herein.

Part 2: Project Schedule

Work must begin in TN within 120 days from the Effective Date of the Grant Contract, unless a written request is submitted by the applicant to the TEC to extend the period for commencement of work and good cause for a delay is shown. In addition, projects must complete within the **Qualification Period** and submit all required documents for audit within the **Submission Date** agreed upon in the Grant Contract.

Date of expected commencement of work in TN	Date of expected completion of work in TN
Date of expected commencement of work in Th	Date of expected completion of work in the
Number of days estimated for project in TN	

Part 3: Additional Documentation to be supplied by Applicant		
a. Detailed preliminary budget		
b. Written description of project		
c. List of creative elements		
d. Plans for distribution		
e. Description of the source(s) of financing		
f. W9 / Pre-Grant Reimbursement Form/ Direct Deposit Form		

Part 4: Key Persons

Please list the full name of each individual that is a director or officer of the applicant or that directly or indirectly holds an ownership interest greater than 20% in the applicant (each such person is hereby referred to as a "Key Person"). Each listed person must complete Annex I and return to the TEC with this Form A. Application will not be brought before the ECD Grants Committee until a completed Annex I has been returned for each key person.

Name	Affiliation with Applicant	(Ownership Interest in Applicant
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Part 5: Financing Sources

Please list each financing source the applicant intends to utilize to finance the project. Supporting documentation (including bank statements, commitment letters, term sheets, etc.) to be included with submission.

Financial Sources	Amount

Signature

Date

I hereby certify that the information provided in this Form A and Annex I is true and correct, and I am aware that any applicant that obtains any incentive from the State of Tennessee by filing a knowingly false or fraudulent claim shall be liable to the State of Tennessee for reimbursement of all monies received. I acknowledge that the submission of this Form A does not in any way guarantee the receipt of any incentive funds.

> SEND COMPLETED FORM A TO: Tennessee Entertainment Commission <u>TN.entertainment@tn.gov</u>