## ESTIMATE OF BENEFITS

1.	Name of Project Pa	rty.		
2.	Description and Loc	cation of project.		
3.	respect to the project employment position	et and the basis of such es	ording estimated new employm timates. Such information may ior to the undertaking of the proking of the project.	y include only such
Positio	Emp	Number of loyees Employed a such Position	Nature of Responsibilities	Estimated Annual Salary \$
4.	operation of the proshall include any include	ject directly resulting from come, real property, "rosa	d to be paid in the calendar yearm the undertaking of the project income, franchise, or other taxeflect the basis of such estimate	et. Such information ses directly payable by
5.		nefits to the State in terms g from the undertaking of	of new employment and addit f the project.	ional taxes indirectly or
I-803			-1-	

This estimate of benefits shall be accompanied with a determination of an independent feasibility consultant or another person approved by the Department of Budget and Finance that the methodology, assumptions and data employed in making the estimate as presented here constitutes a reasonable bases for such estimate.

The undersigned authorized representative(s) of the applicant hereby acknowledge(s) that the intentional misrepresentation or falsification of any information furnished in connection with this formal application for financing is subject to the criminal sanctions of the Hawaii Penal Code, Part V, Sections 710-1063, HRS, and shall constitute a misdemeanor.

[Seal]		(Title)
		(Title)
State of	) : SS. )	
the foregoing application	on the authorized represented in the foregoing applic	nd says that deponent is and was at all times mentioned in ntative of the applicant, and being the authorized ration that the statements made in said application are in all
		(Signature of Applicant)
Subscribed and sworn this day of		
Notary Public State of Hawaii		
My commission expire	s:	

State of	)						
	: SS.						
County of	)						
1 ,	duly sworn, deposes and says that deponent is and was at all times mentioned in						
the foregoing application the authorized representative of the applicant, and being the authorized							
representative mentioned in the foregoing application that the statements made in said application are in all							
respects true and correct.							

	(Signature of Applicant)	
Subscribed and sworn to before me		
this, 19		
Notary Public		
State of Hawaii		
My commission expires:		

Resolution of the board of directors, certified by the secretary, authorizing the officer(s) to execute the document on behalf of the corporation. Said resolution shall be in a form acceptable to the Department.