



**Fill and print application**

# Application for Tax Abatements

Stone County Enhanced Enterprise Zone

P.O. Box 19  
108 East 4th Street  
Galena, MO 65656

417-357-8141 • fax 417-357-3098  
e-mail: sccdenise@centurytel.net

Name of Business / Company		Federal Employer Identification Number	
		MITS/ MO Tax I.D. Number	
Address of Proposed Development / Improvement			
County Parcel		Number Facility NAICS Code	
Tax Abatement Applying for (percentage and term):		Effective Date: Tax Year      Beginning: Ending:	
Description of Project / Development:			
Estimated Completion Date of construction / expansion:		Total Project Cost Real Property Personal Property	
Benefits to the County: (estimate # of jobs created, salaries, benefits, etc.) Attach a backup such as an itemized listing of equipment and other costs associated with this project.			
Primary Contact (Print Name)		Title	Address
Signature		Date	
<b>Under penalty of perjury, I declare that I have examined this application and to the best of my knowledge and belief, the information contained herein is true, correct, and complete.</b>			
<p><b>Mail application and related inquiries to:</b> Stone County EEZ Commission C/O Commissioners' Secretary P.O. Box 19 108 East 4th Street Galena, MO 65656 or fax 417-357-3098 - contact phone 417-357-8141</p>			
<b>FOR COUNTY STAFF USE ONLY</b>			
Approved by: _____		Distributed to: _____	
Title: _____		County Assessor: _____	
Date: _____		County Clerk: _____	
Abatement at: _____ % for _____ years		Planning and Zoning: _____	
		City Hall (if applicable): _____	