## **Qualified Facility Tax Credit Program**

## INITIAL QUESTIONNAIRE

Your Name	
Your Email	
Organization Name	
Entity Type	
Annual Revenue	
Are you in good standing with the Arizona Dept of Revenue?	
Do you participate in the E-Verify program?	
Do you offer health insurance that covers at least 65% of health insurance for new employees?	
Was your investment to build a new facility or expand a facility that previously existed?	
Enter the total number of new jobs/positions created within the last 3 years due to new facility/expansion	
Were at least 51% of the new jobs created an annual wage of \$44,595 or higher?	
Enter the total invested in the new	