

GRANT APPLICATION

Title

Virginia Offshore Wind Supplier Development

Company Informa	tion						
SCC Registered Name _			Trade Name				
Virginia Address							
Headquarters							
FEIN		NAICS	NAICS		Locality		
Full-Time Jobs: Virginia		Compar	Company-wide		Project Site		
Year company began op	erations in Vi	rginia	Website				
Briefly describe compar	ny's products a	and/or services delivere	d from project facility.				
Registered with eVA?	Yes	No	SWAM Certification?	Yes	No		
ISO certification?	Yes	No	In Process				
Registered in Virginia O	ffshore Wind	Supply Chain Directory?	Yes	No			
Contact Information	on						
Primary Contact			Ema	nil			
Title Secondary Contact			Pho	ne			
Nam	е		Ema	ail			

1

Project Info					
Project Narrative					
Offshore wind-related training Offshore Wind 101	courses completed: Foundation 2 Blade	Othor	(nlassa spasifi		
Offshore while for	Foundation 2 blade	Other	(please specify	y)	
Capital Investment Projections	3				
Describe planned capital inves	<u>-</u>	f goods to support	the offshore wind	industry (type of equipm	nent,
machinery, tools, etc.).					
		Planned Capital Investment (\$ per fiscal year)			
	_	2024	2025	2026	Tota
Production-Related Machinery	& Tools				
Tangible Personal Property (FF	FE)				
Total Capital Investment					
Labor Estimate (if Applicable) If this project will result in the	propries of not now jobs, place	so uso the table be	low to indicate the	ich catagories and W-2	wage of the
projected new jobs.	creation of fiet fiew jobs, piea	se use the table be	low to indicate the	Job categories and W-2	wage of the
		Pi	Projected New Jobs (per fiscal year)		
Job Classification	Starti Hourly Wage		4 202!	5 2026	Tota
	,ago	(4) =0=			
Total Personnel Requirements					



Terms & Conditions

- Final approval of the grant is contingent on executed commitment letter between the Virginia Economic Development Partnership and the company.
- Grant may be rescinded for companies that are consistently non-responsive or no longer pursuing engagement in the offshore wind supply chain.
- If company receives refund for any equipment reimbursed through the program, the company must pay back funds received related to refunded equipment.

Sig	nature)
-----	--------	---

Name	Title	Date

For more information, contact:

Courtney Owens

Senior Data Manager, Incentives

Phone: 804.545.5731 Email: cowens@vedp.org

