

## GigaCrete, Inc.

4550 Engineers Way, Suite 101, North Las Vegas, NV 89081

Andrew Dennis, Founder and Chairman

Manufacturing - Green Building

Regional Development Authority:

Perry Ursem, LVGEA

Date: December 2, 2020

Meeting Location: Virtual

### APPLICATION HIGHLIGHTS

- GigaCrete, Inc. (GigaCrete) plans to expand it's existing North Las Vegas facility from m 26,000 sq ft to 92,500 sq. ft. within the next few months.
- The company prides itself as a recognized industry leader in Green building materials technologies. At the heart of GigaCrete' s products is its proprietary binder that is derived from a combination of common natural and low carbon footprint materials.
- GigaCrete is a Nevadan born company. It was established in Nevada, in 2005, and has grown in the state ever since.

### COMPANY PROFILE

GigaCrete is a Nevada based company, incorporated in January of 2005. GigaCrete is a next generation ‘green’ building materials company with products that truly push the building envelope on performance and sustainability. GigaCrete manufactures some of the most innovative, functional, high-performance coatings and high speed house building systems on the market. The company ships globally to many different countries needing housing and better high impact/abuse resistant coating solutions. “Clean tech” or “green tech” is now a mainstream category of innovation that is changing the manufacturing and building. Using advances in industrial and construction ecology, GigaCrete is applying green technology to push the industry ahead and create new, higher standards in global housing, and high performance green coatings. *Source: GigaCrete, Inc.*

<b>Business License:</b>	<input checked="" type="checkbox"/> Current <input type="checkbox"/> Pending <input type="checkbox"/> Has confirmed will comply
<b>Industry &amp; Nevada Operations:</b>	Manufacturing - Building Materials
<b>Location:</b>	Clark County

### INCENTIVES

<b>Application:</b>	Expansion			
<b>Requirements:</b>	<b><u>Statutory</u></b>	<b><u>Application</u></b>	<b><u>Sufficient</u></b>	<b><u>% Over / Under</u></b>
Job Creation	25	25	Yes	0%
Average Wage	\$24.16	\$26.10	Yes	8%
Equipment Capex (SU & MBT)				
Equipment Capex (PP)	\$9,947	\$5,967,600	Yes	59893%
<b>Abatements:</b>	<b><u>Requested Terms</u></b>	<b><u>Estimated \$ Amount</u></b>		
Sales Tax Abmt.	4.6% for 2 years	\$225,277		
Modified Business Tax Abmt.	50% for 4 years	\$27,809		
Personal Property Tax Abmt.	50% for 10 years	\$201,251		
<b>Total:</b>		<b>\$454,337</b>		

### EMPLOYEE BENEFITS

<b>Health Insurance:</b>	Company Coverage of employee healthcare premiums: 65%
<b>Other Benefits Offered:</b>	PTO/Sick/Vacation, Merit Increases

### SIGNIFICANCE OF ABATEMENTS

<b>Company:</b>	<b>Gigacrete also considered Florida, Georgia, Virginia, Pennsylvania, Texas, Louisiana, New Mexico, California, Washington, Montana, and Puerto Rico as potential locations.</b> The abatement program will allow the company to hire additional staff with resources saved through Nevada's tax abatements. The company started in Southern Nevada in 2005 and it would like to continue doing business in Nevada. GigaCrete's product is gaining national and international recognition, creating the opportunity to expand. Multiple states have offered lucrative incentives to relocate. However, the company would like to stay and grow here in Nevada as long as business costs remain competitive. <i>Source: GigaCrete, Inc.</i>
-----------------	---

### ECONOMIC IMPACT

<b>Job Creation:</b>	<b><u>Contracted</u></b>	<b><u>2-Year</u></b>	<b><u>5- Year</u></b>
	25	25	50
<b>Other Capital Investments:</b>	<b><u>Land</u></b>	<b><u>Building Purchase</u></b>	<b><u>BTS / Building Improvements</u></b>
	\$0	\$0	\$20,000
<b>Economic Impact (10 Yrs. cumulative)</b>	<b><u>Total</u></b>	<b><u>Construction</u></b>	
Total Jobs Supported	70	0	
Total Payroll Supported	\$32,225,772	\$10,689	
Total Output Estimate	\$114,693,517	\$28,229	

Estimate includes jobs, payroll & output by the company assisted as well as the secondary impacts to other local businesses.

### NEW TAX REVENUE ESTIMATES

<b>Local Taxes</b>	<b><u>Direct</u></b>	<b><u>Indirect</u></b>	<b><u>Total</u></b>
Property	\$452,113	\$1,135,494	\$1,587,607
Sales	\$155,986	\$598,650	\$754,636
Lodging	\$0	\$32,114	\$32,114
<b>State Taxes</b>	<b><u>Direct</u></b>	<b><u>Indirect</u></b>	<b><u>Total</u></b>
Property	\$24,728	\$66,069	\$90,797
Sales	\$119,612	\$199,800	\$319,412
Modified Business	\$188,840	\$132,540	\$321,380
Lodging	<u>\$0</u>	\$10,317	\$10,317
<b>Total</b>	<b>\$941,279</b>	<b>\$2,174,984</b>	<b>\$3,116,263</b>

### NOTES:

- Percentage of revenue generated by the new jobs contained in this application from outside Nevada: 95%.



October 23, 2020

Mr. Michael Brown  
Executive Director  
Nevada Governor's Office of Economic Development  
555 E. Washington Avenue, Suite 5400  
Las Vegas, Nevada 89101

Dear Mr. Brown,

GigaCrete Incorporated is applying to the State of Nevada for the Sales and Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement programs. We request their application be placed on the agenda for the December 2020 GOED Board Meeting.

GigaCrete is exploring their options to expand operations in Southern Nevada from a current staff of seven by hiring 25 additional employees over the next 24 months. These new hires will make an average hourly wage of \$26.10 and be provided with a comprehensive health benefits package. GigaCrete will make a capital investment of approximately \$6 million dollars through this expansion.

Our team has reviewed GigaCrete's application and found it to comply with Nevada's statutory requirements for tax abatements. This application has the full support and endorsement of the Las Vegas Global Economic Alliance. Thank you for your consideration and attention to this matter.

Sincerely,

A handwritten signature in blue ink, appearing to read "Perry Ursem". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Perry Ursem  
Vice President, Business Retention and Expansion

Enclosures



October 23, 2020

Mr. Michael Brown  
Executive Director  
Nevada Governor's Office of Economic Development  
555 E. Washington, Suite 5400  
Las Vegas, NV 89101

Dear Mr. Brown,

By way of this letter and the attached application, GigaCrete Incorporated is requesting tax incentives to assist with our expansion efforts. Recent strategic planning has the company focused on creating a greater presence in Nevada. A significant part of this consideration is the economic incentives offered by the state. We are projecting to add 25 full-time employees with an average wage of \$26.10 over the next two years of operations, and a total of 50 full-time employees with an average hourly wage of \$27.00 over the next five years of operations.

A brief history of our company along with an overview of our products is included with submission. GigaCrete manufactures some of the most innovative, functional, high-performance coatings and high-speed house building systems on the market. We ship globally to many different countries needing housing and better high impact/abuse resistant coating solutions. Our products are cost-competitive, unmistakably 'green' and capturing the attention of world markets anxious to leave behind old and inferior ways to build.

The economic development incentives offered by the State of Nevada have been an integral factor in our expansion strategy. The projected cost savings from the support of these incentives will allow GigaCrete Incorporated to hire a greater number of full time employees, supporting the Governor's initiative for providing more Nevadan's with long term work and career opportunities. Additionally, Nevada's pro business climate provides GigaCrete Incorporated with a sustainable location for ongoing strategic growth.

We will be expanding from 26,000 sq ft to 92,500 sq. ft. within the next few months. Capital projections forecast approximately \$6 Million in investment into the company.

Our experience with representatives from the Las Vegas Global Economic Alliance has been positive and we look forward to your approval in supporting our expansion efforts. We appreciate for your time and consideration.

Sincerely,

A handwritten signature in blue ink, appearing to read "Andrew Dennis", written over a white background.

Andrew Dennis  
Co-Founder & CEO  
GigaCrete Incorporated

Enclosures

Mayor  
John J. Lee

City Manager  
Ryann Juden

Council Members  
Isaac E. Barron  
Pamela A. Goynes-Brown  
Scott Black  
Richard J. Cherchio



*Your Community of Choice*

**Department of the Mayor and City Council**

2250 Las Vegas Boulevard, North · Suite 910 · North Las Vegas, Nevada 89030  
Telephone: (702) 633-1007 · Fax: (702) 649-1302  
[www.cityofnorthlasvegas.com](http://www.cityofnorthlasvegas.com)

October 21, 2020

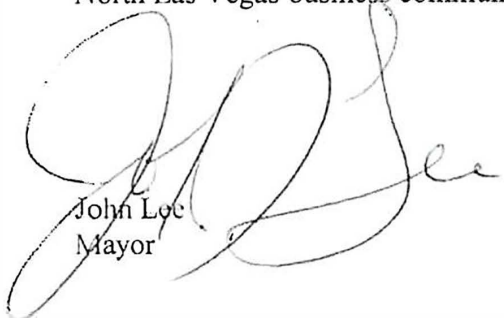
Michael Brown  
Executive Director  
Nevada Governor's Office of Economic Development  
555 E. Washington, Suite 5400  
Las Vegas, NV 89101

Dear Michael:

By way of this letter, the City of North Las Vegas is in full support of GigaCrete and their incentive application to be reviewed by the GOED Board at their next scheduled meeting.

We are pleased GigaCrete has chosen to expand their base of operations here in North Las Vegas to produce the most advanced "Green" and abuse resistant building materials in the world. These materials have proven to be durable, strong, and waterproof. GigaCrete has a global presence and plans to hire 25 full-time employees with an average wage of \$26.10 over the next two years and employ a total of 50 full-time employees with an average wage of \$27.00 over the next five years. They plan to invest approximately \$6 Million into the company.

It is our pleasure to support their application and welcome GigaCrete and their plans to expand here in the North Las Vegas business community.

  
John Lee  
Mayor

  
Gina Gavan  
Chief Innovation Officer



**ECONOMIC DEVELOPMENT****Incentive Application**Company Name: GigaCrete IncorporatedDate of Application: October 23, 2020

Company is an / a: (check one)

☐ New location in Nevada☒ Expansion of a Nevada company**Section 1 - Type of Incentives**

Please check all that the company is applying for on this application:

☒ Sales & Use Tax Abatement☐ Sales & Use Tax Deferral☒ Modified Business Tax Abatement☐ Recycling Real Property Tax Abatement☒ Personal Property Tax Abatement☐ Other: \_\_\_\_\_**Section 2 - Corporate Information**

COMPANY NAME (Legal name under which business will be transacted in Nevada) <u>Gigacrete Incorporated</u>		FEDERAL TAX ID # <u>20-2009032</u>	
CORPORATE ADDRESS <u>4550 Engineers Way, Suite 101</u>	CITY / TOWN <u>North Las Vegas</u>	STATE / PROVINCE <u>NV</u>	ZIP <u>89081</u>
MAILING ADDRESS TO RECEIVE DOCUMENTS (If different same as above)	CITY / TOWN	STATE / PROVINCE	ZIP
TELEPHONE NUMBER <u>(702) 643-6363</u>	WEBSITE <u><a href="http://www.gigacrete.com">www.gigacrete.com</a></u>		
COMPANY CONTACT NAME <u>Andrew Dennis</u>	COMPANY CONTACT TITLE <u>Founder and Chairman</u>		
E-MAIL ADDRESS <u><a href="mailto:andrew@gigacrete.com">andrew@gigacrete.com</a></u>	PREFERRED PHONE NUMBER <u>(702) 643-6363</u>		

Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development? ☐ Yes ☒ No

If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

**Section 3 - Program Requirements**

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- ☒ A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.
- ☒ New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.
- ☒ In urban areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly in rural areas, the average hourly wage will equal or exceed the lesser of the county-wide average hourly wage or statewide average hourly wage.

Note: Criteria is different depending on whether the business is in a county where the population is 100,000 or more or a city where the population is 60,000 or "urban" area), or if the business is in a county where the population is less than 100,000 or a city where the population is less than 60,000 (i.e., "rural" area).

**Section 4 - Nevada Facility**

Type of Facility:

☒ Headquarters☐ Service Provider☐ Technology☐ Distribution / Fulfillment☐ Back Office Operations☒ Manufacturing☒ Research & Development / Intellectual Property☐ Other: \_\_\_\_\_

PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA <u>95%</u>	EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) <u>Apr-2021</u>		
NAICS CODE / SIC <u>332311</u>	INDUSTRY TYPE <u>Prefabricated Metal Buidling and Component Manufacturing</u>		
DESCRIPTION OF COMPANY'S NEVADA OPERATIONS <u>Manufacturing of stucco coating products. 100% environmentally safe and organic with almost no carbon footprint</u>			
PROPOSED / ACTUAL NEVADA FACILITY ADDRESS <u>same as above</u>	CITY / TOWN	COUNTY	ZIP
WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP? <u>Florida, Georgia, Virginia, Pensylvania, Texas, Louisiana, New Mexico, California, Washington, Montana, and Puerto Rico</u>			

**Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)**

Check the applicable box when form has been completed.

- 5 (A) ☒ Equipment List
- 5 (B) ☒ Employment Schedule
- 5 (C) ☒ Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.
- 5 (D) ☒ Company Information Form

**Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up - Plans Over the Next <u>Ten Years</u>	Expansions - Plans Over the Next <u>10 Years</u>
Part 1. Are you currently/planning on leasing space in Nevada? _____ <b>If No, skip to Part 2. If Yes, continue below:</b> What year(s)? _____ How much space (sq. ft.)? _____ Annual lease cost of space: _____ Do you plan on making building tenant improvements? _____ <b>If No, skip to Part 2. If Yes *, continue below:</b> When to make improvements (month, year)? _____	Part 1. Are you currently leasing space in Nevada? <u>Yes</u> <b>If No, skip to Part 2. If Yes, continue below:</b> What year(s)? <u>2019 - Present</u> How much space (sq. ft.)? <u>28,000</u> Annual lease cost at current space: <u>\$156,000.00</u> Due to expansion, will you lease additional space? <u>Yes</u> <b>If No, skip to Part 3. If Yes, continue below:</b> Expanding at the current facility or a new facility? <u>Current</u> What year(s)? <u>2021</u> How much expanded space (sq. ft.)? <u>66,000</u> Annual lease cost of expanded space: <u>\$340,560.00</u> Do you plan on making building tenant improvements? <u>Yes</u> <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? <u>January, 2021</u>
Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> Purchase date, if buying (month, year): _____ How much space (sq. ft.)? _____ Do you plan on making building improvements? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? _____	Part 2. Are you currently operating at an owner occupied building in Nevada? <u>No</u> <b>If No, skip to Part 3. If Yes, continue below:</b> How much space (sq. ft.)? _____ Current assessed value of real property? _____ Due to expansion, will you be making building improvements? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? _____
Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? _____ <b>If Yes *, continue below:</b> When to break ground, if building (month, year)? _____ Estimated completion date, if building (month, year): _____ How much space (sq. ft.)? _____	Part 3. Do you plan on building or buying a new facility in Nevada? <u>No</u> <b>If Yes *, continue below:</b> Purchase date, if buying (month, year): _____ When to break ground, if building (month, year)? _____ Estimated completion date, if building (month, year): _____ How much space (sq. ft.)? _____
<b>* Please complete Section 7 - Capital Investment for New Operations / Startup.</b>	<b>* Please complete Section 7 - Capital Investment for Expansions below.</b>

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):

Tenant improvements for office space. Minimal impact as this additional warehouse currently exists.

**Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How much capital investment is planned? (Breakout below):	How much capital investment is planned? (Breakout below):
Building Purchase (if buying): _____	Building Purchase (if buying): <u>\$0</u>
Building Costs (if building / making improvements): _____	Building Costs (if building / making improvements): <u>\$20,000</u>
Land: _____	Land: <u>\$0</u>
Equipment Cost: _____	Equipment Cost: <u>\$5,967,600</u>
<b>Total:</b> _____	<b>Total:</b> <u>\$5,987,600</u>
	Is the equipment purchase for replacement of existing equipment? <u>No</u>
	Current assessed value of personal property in NV: <u>\$49,736</u>
	(Must <b>attach</b> the most recent assessment from the County Assessor's Office.)

**Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: _____	How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: <u>25</u>
Average hourly wage of these <u>new</u> employees: _____	Average hourly wage of these <u>new</u> employees: <u>\$26.10</u>
	How many FTE employees prior to expansion?: <u>7</u>
	Average hourly wage of these <u>existing</u> employees: <u>\$25.00</u>
	Total number of employees after expansion: <u>32</u>

\* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- |   |   |  |                                       |
|---|---|--|---------------------------------------|
| <input type="checkbox"/> Overtime                         | <input checked="" type="checkbox"/> Merit increases | <input type="checkbox"/> Tuition assistance                        | <input type="checkbox"/> Bonus        |
| <input checked="" type="checkbox"/> PTO / Sick / Vacation | <input type="checkbox"/> COLA adjustments           | <input type="checkbox"/> Retirement Plan / Profit Sharing / 401(k) | <input type="checkbox"/> Other: _____ |

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

**Section 9 - Employee Health Insurance Benefit Program**

Is health insurance for employees and is an option for dependents offered?: ☒ Yes (**copy of benefit plan must be attached**) ☐ No

Package includes (check all that apply):

- ☒ Medical ☒ Vision ☒ Dental ☐ Other: \_\_\_\_\_

Qualified after (check one):

- ☐ Upon employment ☒ Three months after hire date ☐ Six months after hire date ☐ Other: \_\_\_\_\_

Health Insurance Costs:	Percentage of health insurance premium by (min 65%):
Plan Type: <u>PPO and HMO</u>	
Employer Contribution (annual premium per employee): <u>\$ 8,964.43</u>	Company: <u>65%</u>
Employee Contribution (annual premium per employee): <u>\$ 4,827.00</u>	Employee: <u>35%</u>
<b>Total Annual Premium:</b> <u>\$ 13,791.43</u>	

[SIGNATURE PAGE FOLLOWS]

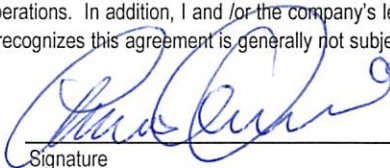
## Section 10 - Certification

I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

Andrew Dennis

Name of person authorized for signature



Signature

Founder and Chairman

Title

October 23, 2020

Date

**Nevada Governor's Office of Economic Development**

555 E. Washington Ave., Ste 5400 • Las Vegas, Nevada 89101 • 702.486.2700 • (Fax) 702.486.2701 • [www.diversifynevada.com](http://www.diversifynevada.com)



## Site Selection Factors

Company Name: GigaCrete Inc.

County: Clark

---

### Section I - Site Selection Ratings

---

Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

---

Availability of qualified workforce: 5

Labor costs: 5

Real estate availability: 5

Real estate costs: 5

Utility infrastructure: 5

Utility costs: 2

Transportation infrastructure: 5

Transportation costs: 3

State and local tax structure: 5

State and local incentives: 5

Business permitting & regulatory structure: 5

Access to higher education resources: 5

---

Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):

These programs will allow the company to hire additional staff with resources saved through Nevada's tax abatements. Our company started in Southern Nevada in 2005 and we would like to continue doing business in Nevada. Our product is gaining national and international recognition, creating the opportunity to expand. Multiple state have offered lucrative incentives to relocate. We would like to stay and grow here in Nevada so long as our costs remain competitive.

Company Name: GigaCrete Inc.

Company Name: GigaCrete Inc.

Directions: Please provide an estimated list of the equipment [columns (a) through (c)] which the company intends to purchase over the two-year allowable period. For example, if the effective date of new / expanded operations begins April 1, 2015, the two-year period would be until March 31, 2017. Add an additional page if needed. For guidelines on classifying equipment, visit: [tax.nv.gov/LocalGovt/PolicyPub/ArchiveFiles/Personal\\_Property\\_Manuals](http://tax.nv.gov/LocalGovt/PolicyPub/ArchiveFiles/Personal_Property_Manuals). Attach this form to the Incentives Application.

Is any of this equipment\* to be acquired under an operating lease? ☐ Yes ☒ No

Is any of this equipment\* to be acquired under an operating lease?

☐ Yes

**N** ☒

6

## 5(B) Employment Schedule

Company Name: GigaCrete Inc.

County: Clark County

### Section 1 - Full-Time Equivalent (FTE) Employees

Directions: Please provide an estimated list of full time employees [columns (a) through (d)] that will be hired and employed by the company by the end of the first eighth quarter of new / expanded operations. For example, if the effective date of new / expanded operations is April 1, 2015, the date would fall in Q2, 2015. The end of the first eighth quarter would be the last day of Q2, 2017 (i.e., June 30, 2017). Attach this form to the Incentives Application. A qualified employee must be employed at the site of a qualified project, scheduled to work an average minimum of 30 per week, if offered coverage under a plan of health insurance provided by his or her employer, is eligible for health care coverage, and whose position of a "primary job" as set forth in NAC 360.474.

Please use the Bureau of Labor Statistics Standard Occupational Classification System (SOC) link to populate section (b): [https://www.bls.gov/soc/2018/major\\_groups.htm#11-0000](https://www.bls.gov/soc/2018/major_groups.htm#11-0000)

(a) New Hire Position Title/Description	(b) Position SOC Code	(c) Number of Positions	(d) Average Hourly Wage	(e) US Bureau of Labor Statistics Average Hourly Wage	(f) Average Weekly Hours	(g) Annual Wage per Position	(h) Total Annual Wages
Bookkeeping, Accounting, and Auditing Clerks	43-3031	1	\$28.84	\$19.29	40	\$59,987.20	\$59,987.20
Sales Managers	11-2022	1	\$36.05	U	40	\$74,984.00	\$74,984.00
Inspectors, Testers, Sorters, Samplers, and Weighers	51-9061	1	\$21.63	\$18.06	40	\$44,990.40	\$44,990.40
Office and Administrative Support Workers, All Other	43-9199	1	\$19.23	\$14.09	40	\$39,998.40	\$39,998.40
Human Resources Specialists	13-1071	1	\$31.25	\$28.66	40	\$65,000.00	\$65,000.00
Human Resources Assistants, Except Payroll and Timekeeping	43-4161	1	\$19.23	\$18.35	40	\$39,998.40	\$39,998.40
Market Research Analysts and Marketing Specialists	13-1161	1	\$29.98	\$29.98	40	\$62,358.40	\$62,358.40
Sales and Related Workers, All Other	41-9099	1	\$19.23	\$17.94	40	\$39,998.40	\$39,998.40
First-Line Supervisors of Production and Operating Workers	51-1011	2	\$36.06	\$28.78	40	\$75,004.80	\$150,009.60
Architectural and Engineering Managers	11-9041	1	\$67.30	\$65.97	40	\$139,984.00	\$139,984.00
Architectural and Civil Drafters	17-3011	2	\$33.65	\$24.89	40	\$69,992.00	\$139,984.00
Structural Iron and Steel Workers	47-2221	1	\$38.46	\$18.63	40	\$79,996.80	\$79,996.80
Mixing and Blending Machine Setters, Operators, and Tenders	51-9023	1	\$28.84	\$22.17	40	\$59,987.20	\$59,987.20
Metal Workers and Plastic Workers, All Other	51-4199	10	\$17.30	U	40	\$35,984.00	\$359,840.00
<b>TOTAL</b>		<b>25</b>	<b>\$26.10</b>				<b>\$1,357,116.80</b>

### Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete columns (b) and (c). These estimates are used for state economic impact and net tax revenue analysis that this agency is required to report. The company will not be required to reach these estimated levels of employment. [Please enter the estimated new full time employees on a year by year basis \(not cumulative\)](#)

(a) Year	(b) Number of New FTE(s)	(c) Average Hourly Wage	(d) Payroll
3-Year	10	\$27.00	\$540,800.00
4-Year	5	\$27.00	\$270,400.00
5-Year	10	\$27.00	\$540,800.00

\* Column (e) determines if wage is commensurate to current wage ranges in the region the company plans to locate/is located. For these purposes the mean average hourly wage for the location has been used.

U = Unknown / data set for region is not currently available.

Source: [US Bureau of Labor Statistics](#)

## 5(C) Evaluation of Health Plans Offered by Companies

Company Name: GigaCrete Inc.

County: Clark

Total Number of Full-Time Employees: 25

Average Hourly Wage per Employee \$25.96

Average Annual Wage per Employee (implied) \$53,996.80

### COST OF HEALTH INSURANCE

Annual Health Insurance Premium Cost: \$13,791.00

Percentage of Premium Covered by:

Company 65%

Employee 35%

### HEALTH INSURANCE PLANS:

#### Base Health Insurance Plan\*:

#### HPN POS 2020 Solutions Gold 25/0/500/20%

Deductible - per employee \$ 500

Coinsurance 80% / 20%

Out-of-Pocket Maximum per employee \$ 6,000

#### Additional Health Insurance Plan\*:

Deductible - per employee \$ -

Coinsurance 0% / 0%

Out-of-Pocket Maximum per employee \$ -

#### Additional Health Insurance Plan\*:

Deductible - per employee \$ -

Coinsurance 0% / 0%

Out-of-Pocket Maximum per employee \$ -

\*Note: **Please list only "In Network" for deductible and out of the pocket amounts .**

### Generalized Criteria for Essential Health Benefits (EHB)

*[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]*

Covered employee's premium not to exceed 9.5% of annual wage 8.9% MMQ

Annual Out-of-Pocket Maximum not to exceed \$8,150 (2020) \$6,000 MMQ

Minimum essential health benefits covered (Company offers PPO):

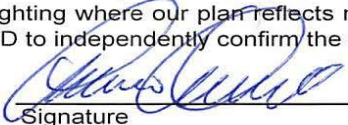
- |  |                                     |
|--|-------------------------------------|
| (A) Ambulatory patient services                                      | <input checked="" type="checkbox"/> |
| (B) Emergency services   | <input checked="" type="checkbox"/> |
| (C) Hospitalization  | <input checked="" type="checkbox"/> |
| (D) Maternity and newborn care                                       | <input checked="" type="checkbox"/> |
| (E) Mental health/substance use disorder/behavioral health treatment | <input checked="" type="checkbox"/> |
| (F) Prescription drugs   | <input checked="" type="checkbox"/> |
| (G) Rehabilitative and habilitative services and devices             | <input checked="" type="checkbox"/> |
| (H) Laboratory services  | <input checked="" type="checkbox"/> |
| (I) Preventive and wellness services and chronic disease management  | <input checked="" type="checkbox"/> |
| (J) Pediatric services, including oral and vision care               | <input checked="" type="checkbox"/> |

No Annual Limits on Essential Health Benefits ☒

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached a qualified plan with information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

Andrew Dennis

Name of person authorized for signature

  
Signature

Founder and Chairman

Title

10/23/2020

Date

## 5(D) Company Information

Company Name: GigaCrete Inc.

### Section 1 - Company Ownership List

Directions: Please provide a detailed list of owners and/or members of the company. (Conflict language to be provided by DAG)

(a) Name	(b) Title
Andrew Dennis	Founder and Chairman

### Section 2 - Company Affiliates and/or Subsidiaries

Are there any subsidiary or affiliate companies to be associated with the applicant company? No ☐ Yes ☒

If Yes, continue below:

Directions: In order to include affiliates/subsidiaries, under the exemption letter, they must to be added to the Contract. Per standard practice GOED requires a corporate schematic to understand the exact relationships between the companies. Please populate the below table to show the exact relationships between the companies and include:

1. The names as they would read on the tax exemption letter.
2. Which entity(ies) will do the hiring?
3. Which entity(ies) will be purchasing the equipment?

Name of Subsidiary or Affiliate Entity, Role and Legal Control Relationship
Balisticrete is a manufacturer directly associated with Gigacrete Incorporated with the controlling shareholder being the same as Gigacrete. May be involved in hiring and the purchase of equipment for Gigacrete Incorporated.
Gigacrete Roof is a manufacturer directly associated with Gigacrete Incorporated with the controlling shareholder being the same as Gigacrete Incorporated. May be involved in hiring and the purchase of equipment for Gigacrete Incorporated.

Please include any additional details below:

N/A



# SECRETARY OF STATE



## NEVADA STATE BUSINESS LICENSE

GIGACRETE, INC.

Nevada Business Identification # NV20051089251

Expiration Date: 01/31/2021

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.



Certificate Number: B20191228470326

You may verify this certificate  
online at <http://www.nvsos.gov>

IN WITNESS WHEREOF, I have hereunto set my  
hand and affixed the Great Seal of State, at my  
office on 12/28/2019.

*Barbara K. Cegavske*

BARBARA K. CEGAVSKE  
Secretary of State