



CITY OF BLAIR

LB840 Application

Please Answer Each Question (If Question Does Not Apply – Mark N/A). Please Type or Print in Black Ink.

Please Note: The Information Contained in this Document is Public Information and will NOT be Considered Confidential.

A. BUSINESS INFORMATION:

Name of Business Applying for Assistance: _____VIN Specific Enterprises, LLC_____

Business Address: _____15215 Harvest Lane, Bennington, NE, 68007_____
(City) (State) (Zip Code)

Contact Person: _____Tracy Hightower-Henne_____ Telephone Number: _____402-670-0877_____ Fax Number:

_____ Email Address: _____tsm@runvse.com_____ Federal Tax ID Number:

47-1087827_____

Type of Business: ☐ Start-Up ☐ Buyout ☒ Existing

If Existing, Number of Years in Business: _____15_____

Business Classification: (Please Choose One)

- | | | |
|---|---|---|
| ☐ Retail | ☒ Manufacturing | ☐ Research & Development |
| ☐ Headquarter | ☐ Telecommunications | ☐ Tourism |
| ☐ Warehouse/Distribution | ☐ Other | |

Business Type: (Please Choose One)

- | | | |
|---|--------------------------------------|--------------------------------------|
| ☐ Proprietorship | ☐ Corporation | ☐ Partnership |
| ☒ Other Limited Liability Company | | |

Does the Company have a Parent or Subsidiaries? ☐ Yes ☒ No

If Yes, Please List Name: _____While the Company does not have a parent or subsidiaries, the Company's owner also owns another entity, Jacob Lynn Enterprises, LLC, which will own the building in which the business expansion will occur._____

Address: _____
(City) (State) (Zip Code)

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

Full Name	Title	Ownership Percentage
Tom Henne	Owner	100%

Does the business qualify to receive any incentives from the State of Nebraska? ☒ Yes ☐ No

Has the business applied for any incentives from the State of Nebraska? ☒ Yes ☐ No

If yes, please explain: The Company expects to apply for incentives under the Imagine Nebraska program.

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: 17

Number of Full-Time Equivalent Positions to Be Created: 20

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Blair, their Two-Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Blair? ☒ Yes ☐ No

If no, please explain: _____

Does the Company Employ Any Seasonal Employees? ☐ Yes ☒ No

If Yes, How Many: _____
(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

B. PROJECT INFORMATION:

Please Provide a Brief Project Description:

Jacob Lynn Enterprises, LLC will acquire a \$9.875 million commercial facility in Blair, Nebraska, which will serve as the new operating location for Vin Specific Enterprises, LLC ("VSE"). VSE is an advanced manufacturing, engineering, and research and development company specializing in CNC-manufactured diesel truck components, diesel calibration, microcontroller technology, 3D printing, prototyping, and related engineering and product development. The project represents an anticipated capital investment of approximately \$12 million, including the acquisition of the facility, approximately \$250,000 in building improvements and buildout, and approximately \$2.5 million in machinery, tools, and advanced manufacturing equipment. VSE also anticipates continued investment in robotics and automated manufacturing technology to expand production capacity. VSE currently employs 17 employees and anticipates creating approximately 15–20 additional full-time positions over the next two years, with anticipated average annual compensation of approximately \$100,000. The project will bring significant private capital investment and high-paying skilled employment to Blair and Washington County while expanding advanced manufacturing and research and development activity in Nebraska.

Use of Funds	Total Project Cost	LB840 Funds Requested	CBDG Funds
Land or Facility Acquisition*	\$ 9,875,000	\$ 200,000	
Facility Renovation*	\$ 250,000	\$	
New Facility Construction*	\$	\$	
Machinery/Equipment Acquisition*	\$ 300,000	\$	
Business Recruitment Activities	\$ 50,000	\$	
Business Attraction/Location Expenses	\$	\$	
Small Business Development	\$	\$	
Working Capital (Includes Inventory)	\$	\$	
Job Training*	\$ 100,000	\$	
Other (Please Specify)	\$	\$	
Total Project Cost:	\$ 10,575,000		
	Total LB840 Funds Requested:	\$ 200,000	

* ITEMS THAT QUALIFY FOR LB840 FUNDING

C. FUNDING SOURCES AND EQUITY INJECTION:

Name of Lending Institution: Home Federal Bank

Address: 715 West 4th Street, Hastings, NE 68901
(City) (State) (Zip Code)

Contact Person: TiAnn Allen Telephone Number: 308-398-4974

Loan Amount: \$8,200,000 Loan Term (Years): 15

Interest Rate: To Be Determined ☐ Variable ☐ Fixed

Collateral Required: ☒ Yes ☐ No Equity Required: ☒ Yes ☐ No

If Yes, on Collateral or Equity, Please Specify: 83% equity (loan/value)

Amount Injected Into the Project by Business/Partners/Owners: \$1,600,000

D. PROJECT LOCATION:

Within the Blair City Limits? ☒ Yes ☐ No
Within the Blair Two-Mile Jurisdiction? ☐ Yes ☐ No
Land Owned by the City of Blair? ☐ Yes ☒ No

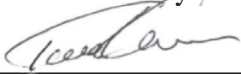
E. ATTACHMENTS: - Please Include the Attachments that Apply to Your Business Status

Please Note: The Information Contained in the Section Will be Deemed Confidential and will not be Available for Public Disclosure.

- ☒ Brief Description of the Business
- ☒ Resumes of all Owners/Co-Owners/Directors/Partners/Stockholders
- ☒ For Existing Businesses – Three (3) Yearly Financial Statements
- ☒ For Existing Businesses – Current Financial Statements (Less Than Sixty (60) Days Old)
- ☐ For Start-Up Businesses – Current Business Plan
- ☐ For Start-Up Businesses – Three Year Projections
- ☐ Personal Financial Statements for all Owners/Co-Owners/Directors/Partners/Stockholders
- ☐ For Existing Businesses - List of Current Obligations (Include Company Names and Amounts)
- ☒ Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required
- ☒ Letter from Lending Institution
- ☐ Please Note that Other Financial Documents May Be Required

F. APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Blair or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.



Applicant's Signature

9/8/26

Date