



ECONOMIC DEVELOPMENT AUTHORITY

Historic Property Reinvestment Program Application

1. Welcome

The Historic Property Reinvestment Program focuses on historic preservation as a component of community development. The program, which is capped at \$300 million over six years, encourages long-term private investment into the State, while preserving properties that are of historic significance. The program can be used to leverage the federal Historic Tax Credit Program to incentivize rehabilitation of identified historic properties.

The Historic Property Rehabilitation Program awards are calculated based on a percentage of the cost of rehabilitation (eligible costs), with the percentage dependent on both whether the project includes a qualified property or a transformative property and on location of the project. Most eligible projects can receive tax credits worth up to 40 percent of eligible costs with a maximum project cap of \$4 million for qualified properties. Eligible projects located within a qualified incentive tract or in government-restricted municipalities can receive tax credits worth up to 45 percent of eligible project costs with a maximum project cap of \$8 million for qualified properties. Transformative projects can receive tax credits worth up to 45 percent of eligible project costs with a maximum project cap of \$50 million. Awards are scored on a competitive basis.

“Business entity”, “developer” or “applicant” means a person who enters or proposes to enter into a rehabilitation agreement pursuant to the provisions of section 4 of P.L. 2020, c. 156 (N.J.S.A. 34:1B-272) and that has or will have site control over the qualified property or transformative property, including, but not limited to, a lender that completes a rehabilitation project, operates a rehabilitation project, or completes and operates a rehabilitation project.

“Co-applicant” means an entity that is non-profit for taxation purposes under the provisions of Section 501(c)3 of the Internal Revenue Code; contributes capital, real property, or services related to the project that directly affect and serve the anticipated residents, tenants, or customers of the tenants of the redevelopment project; and enters into a participation agreement with the business entity that specifies the co-applicant’s participation in the redevelopment project.

“Rehabilitation project” means a specific construction project or improvement or phase of a project or improvement undertaken by a business entity that includes the rehabilitation of a qualified property, or transformative property.

“Qualified property” means a property located in the State of New Jersey that is an income producing property, and that is:

1. Individually listed, or located in a district listed on the National Register of Historic Places in accordance with the provisions of chapter 3021 of Title 54, United States Code (54 U.S.C. s.302101 et seq.), and if located within a district, certified by the Officer as contributing to the

historic significance of the district; or

2. Individually listed, or located in a district listed on the New Jersey Register of Historic Places pursuant to P.L. 1970, c. 268 (N.J.S.A. 13:1B-15.128 et seq.), and if located within a district, certified by the Officer as contributing to the historic significance of the district; or
3. Individually designated, or located in a district designated, by the Pinelands Commission as a historic resource of significance to the Pinelands in accordance with the Pinelands comprehensive management plan adopted pursuant to the "Pinelands Protection Act," P.L. 1979, c. 111 (N.J.S.A. 13:18A-1 et seq.), and if located within a district, certified by the Pinelands Commission as contributing to the historic significance of the district; or
4. Individually identified or registered, or located in a district composed of properties or structures and such district is identified or registered, for protection as significant historic resources in accordance with criteria established by a municipality in which the property, structure or district is located if the criteria for identification or registration has been approved by the Officer as suitable for substantially achieving the purpose of preserving and rehabilitating buildings of historic significance within the jurisdiction of the municipality, and if located within a district, certified by the Officer as contributing to the historic significance of the district.

"Transformative property" means a property that is:

1. An income producing property, not including a residential property, whose rehabilitation the Authority determines will generate substantial increases in State revenues through the creation of increased business activity within the surrounding area;
2. Individually listed on the New Jersey Register of Historic Places pursuant to P.L. 1970, c. 268 (N.J.S.A. 13:1B-15.128 et seq.) and which, before the enactment of P.L. 2020, c. 156 (N.J.S.A. 34:1B-269 et al.), received a determination of eligibility from the Keeper of the National Register of Historic Places in accordance with the provisions of Part 60 of Title 36 of the Code of Federal Regulations; and
3. Located within a one-half mile radius of the center point of a transit village, as designated by the New Jersey Department of Transportation, and located within a city of the first class, as classified under N.J.S.A. 40A:6-4, or located within a government-restricted municipality.

"Archeology and historic preservation standards" means the Secretary of the Interior's Standards and Guidelines for Archeology and Historic Preservation, 48 Fed. Reg. 44716, as updated and revised by the National Park Service.

The full application requires detailed information and supporting documentation about your company, affiliates, and the proposed project for which you are applying for tax credits. Please be advised that the application fee is **non-refundable**.

The application is broken down into 18 sections. You will not be able to proceed further into the application without completing all required fields and uploads within the current section. Progress on the application can be saved as you complete each section. At all times, you will be able to go back to sections that you have already completed.

This full application will take several hours to complete. Please read the prompts to questions carefully and provide professionally written responses that address all details requested in the questions in the suggested length of text.

It is **HIGHLY RECOMMENDED** that you download a copy of the example application and collect written

responses and required documents prior to filling them in on this online form.

It is also **HIGHLY RECOMMENDED** to use file naming conventions that facilitate rapid application completeness review.

Uploaded file names should:

- Be identifiably connected to the project;
- Accurately describe file contents and application element; and
- Denote date modified or file version number

In the event of any questions, please contact: C. Aidita Milsted, Director, Historic Preservation, at historictaxcredit@njeda.com

Please be advised that any applicant who applies and is approved for the Historic Property Reinvestment Program under the proposed rules is subject to the rules as finally adopted, which may differ from the proposed rules. Furthermore, the Authority is not able to authorize the issuance of tax credits until the regulations are finally adopted.

The Historic Property Reinvestment Program is a competitive program and all applications submitted will be evaluated based on preestablished evaluation criteria which will be used to allocate tax credits in circumstances where the request for tax credits exceed the annual maximum cap established by the statute. The applicant is strongly encouraged to carefully review entirety of the application and all attachments prior to submission, as no changes or additions will be permitted once application is submitted.

This application round is exclusively for projects meeting the definition of Transformative Project under the Historic Property Reinvestment Program. Applicant is strongly encouraged to carefully review and confirm that their project meets the definition of Transformative Project prior to submitting an application. Any application fee paid as part of an application submission is non-refundable.

2. Contact Information

Throughout the life of an incentive project – from application, to approval, to certification and servicing – NJEDA will need to engage with various members of your team. This section collects contact information for individuals we may need to speak with as part of this project.

Primary Point of Contact (Applicant Company)

Please provide contact information for the primary point of contact within the applicant company that NJEDA will keep updated on the status of this application.

Name

<input type="text" value="Sally"/>	<input type="text" value="Sample"/>
First	Last

Title

Company

Mailing Address

Address Line 1

Address Line 2

<input type="text" value="Trenton"/>	<input type="text" value="New Jersey"/>	<input type="text" value="08601"/>
City	State	Zip Code

Phone

Email

Email (Confirm)

Please be sure the email address you enter is a valid email address, as this will be the primary address by which NJEDA contacts you on the status of this application.

Are you a representative of the applicant company that is legally authorized to submit this application on behalf of the applicant company?

Yes

No

Authorized Representative

This application includes company representations and certification and must be submitted by an individual who is legally authorized to sign documents on behalf of the applicant company.

Name

<input type="text" value="Mary"/>	<input type="text" value="Representative"/>
First	Last

Title

Authorized

Company

Sample Company 123

Phone

(123) 456-7897

Email

adagostino@njeda.com

Email (Confirm)

adagostino@njeda.com

Would you like the Authorized Representative to receive email communications from NJEDA about the status of your application?

Yes

No

Are you the Owner, Chief Executive Officer/equivalent officer for North America operations, or equivalent highest-ranking executive for the applicant company?

Yes

No

CEO or Equivalent

As part of the application and approval process, the owner, CEO, or equivalent highest ranking officer of the applicant company will need to certify that the information included in this application is accurate and that the award of tax credits is a "material factor" in the applicant's decision making. If the Primary Point of Contact does not hold this role, please provide the contact information for the owner, CEO, or equivalent highest-ranking executive for the applicant company.

Name

Karen

First

CEO

Last

Title

CEO

Company

Sample Company 123

Phone

(123) 456-7897

Email

adagostino@njeda.com

Email (Confirm)

adagostino@njeda.com

Would you like the CEO or equivalent to receive email communications from NJEDA about the status of your application?

Yes

No

Consultant

While not required, we understand that some applicants may choose to utilize consultants for support on

tax credit applications. While the NJEDA will direct all communications to the Primary Point of Contact, please also provide us with information about any consultants supporting you on this application.

Are you, the applicant company, using a consultant to assist with this application?

- Yes
- No

Consultant

Consultant Contact Name

Ted	Consultant
First	Last

Title

Company

Address

Address Line 1
Address Line 2

Trenton	New Jersey	08601
City	State	Zip Code

Phone

Consultant Contact Email

Email (Confirm)

Is the consultant a registered lobbyist?

- Yes
- No

Would you like the listed Consultant Contact to receive email communications from NJEDA about the status of your application?

- Yes
- No

Legal Counsel

If approved for tax credits, NJEDA will utilize form contractual documents, such as an approval letter and a commitment agreement. Applicants will have limited opportunity to request non-standard modifications of the agreements. However, NJEDA will often work with an applicant's legal counsel to answer questions on these agreements. If you would like, please provide the contact information for the applicant company's Legal Counsel that will support on this project. This contact may be either internal or external counsel.

Would you like to designate a Legal Counsel Contact?

Yes

No

Contact

Legal Counsel Contact Name

T.

First

Tester

Last

Title

Associate

Legal Counsel Company

Legal Counsel Company

Phone

(123) 456-7890

Legal Counsel Contact Email

adagostino@njeda.com

Email (Confirm)

adagostino@njeda.com

Would you like the listed Legal Counsel Contact to receive email communications from NJEDA about the status of your application?

Yes

No

Accountant

NJEDA often works with an applicant company's internal or external accounts to confirm information included in the application and support on project certification and ongoing compliance requirements. If you would like, please provide the contact information for the applicant company's Accountant that will support on this project.

Would you like to designate an Accountant Contact?

Yes

No

Contact

Accountant Contact Name

Alan

First

Accountant

Last

Title

Accountant

Accountant Company

Accounting Company ABC

Phone

(123) 456-7789 x1

Accountant Contact Email

Email (Confirm)

Would you like the listed Accountant Contact to receive email communications from NJEDA about the status of your application?

Yes

No

Media Contact

NJEDA often works with an applicant company's public relations or media relations representatives on press releases and press inquiries regarding approved projects. If you would like, please provide the contact information for the applicant company's Media Contact that will support on this project.

Would you like to designate a Media Contact?

Yes

No

Contact

Media Contact Name

First

Last

Title

Media Contact Company

Phone

Media Contact Email

Email (Confirm)

3. Applicant Organization

We now need to collect information about the company that is applying for the Historic Property Reinvestment Program. For this section, we are focused on the primary applicant only. We will collect information on affiliates, parent companies, holding companies, or other related entities in the following sections of the application.

Legal Organizational Information

Applicant Organization Name

Sample Company 123-ABC

The full name of your registered legal entity.

Applicant Doing Business As (DBA)

Sample Company 123

Does your business operate under a different name?

Applicant Entity Type

Partnership

What is the ownership structure of the applicant

Applicant Country of Incorporation/Establishment/Formation

United States

Country

Applicant State of Incorporation/Establishment/Formation

Massachusetts

State

Applicant Year of Incorporation/Establishment/Formation

2000

Please upload any formation documents for the applicant organization

Test Document.pdf

Applicant Federal Employer Identification Number (FEIN)

12-3456789

The 9 digit Federal Tax ID number of your organization.

Applicant New Jersey Tax ID Number

123456789012

Addresses

Applicant Organization's Headquarters Address

36 West State St.

Address Line 1

Address Line 2

City

State

Zip Code

If the NJEDA needs to mail the Applicant Organization any information, which address should be used?

- The headquarters address
 A different address

Does the applicant have or anticipate a prospective future address?

- Yes
 No

Applicant Organization's Phone

Applicant Organization's Website

Please upload New Jersey Tax Clearance Certificate from the NJ Division of Taxation.

Test Document.pdf

Certificates may be requested through the [State of New Jersey's online Premier Business Services \(PBS\) portal](#). Under the Tax & Revenue Center, select Tax Services, then select Business Incentive Tax Clearance. If the applicant's account is in compliance with its tax obligations and no liabilities exist, the Business Incentive Tax Clearance can be printed directly through PBS.

Operational Information

North American Industry Classification System (NAICS) Code

Please be sure to use the same code that is listed on your most recent business tax filings. For help, please see the [North American Industry Classification System \(NAICS\) U.S. Census Bureau website](#).

Has the applicant organization received NJEDA assistance in the past?

- Yes
 No

Please describe the NJEDA assistance the applicant company previously received. Please be as specific as possible in detailing the programs through which you received NJEDA assistance, the facilities or projects associated with that assistance, the timeframes in which the assistance was provided, and the status of any awards or agreements.

Is the applicant involved in religious activities or is religiously affiliated?

- Yes

No

Please note that this requires additional questions to determine eligibility of the requested financial assistance.

Religious Activity Form

Test Document.pdf

Please download and complete [this form](#), then attach it to your application here.

Permits & Approvals

Does the Applicant have any permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has an interest in.

Yes

No

Examples include permits or obligations and responsibilities with New Jersey Department of Labor and Workforce Development, the Department of Environmental Protections, and the Department of the Treasury.

Permit and Approvals

Please list all New Jersey Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has an interest in. The list shall identify the entity that applied for or received such permits and approvals or have such obligations and responsibilities, such as by program interest numbers or licensing numbers.

Name of Permit	Department Issuing the Permit	Type of Permit	Status
ABC Permit	DEP	Building permit	Anticipated

4. Co-applicant

In this section, we need more information about any entities that will be applying as a co-applicant.

“Co-applicant” means an entity that:

1. is non-profit for taxation purposes under the provisions of Section 501(c)3 of the Internal Revenue Code;
2. contributes capital, real property, or services related to the project that directly affect and serve the anticipated residents, tenants or customers of the tenants of the rehabilitation project; and
3. enters into a participation agreement with the developer that specifies the co-applicant's participation in the rehabilitation project.

Is there a co-applicant associated with this project?

Yes

No

Co-applicant

Co-applicant 1

Please provide the following information about the Co-applicant.

Co-applicant Organization Name

Co-applicant ABCDE

The full name of the registered legal entity.

Co-applicant Doing Business As (DBA)

Co-Applicant

Does the co-applicant operate under a different name?

Co-applicant Primary Point of Contact

CEO

Terry

Co-Applicant

Title

First

Last

Co-applicant Primary Point of Contact Address

36 West State St.

Address Line 1

Address Line 2

Trenton

New Jersey

08601

City

State

Zip Code

Primary Point of Contact Phone

(215) 801-4040

Primary Point of Contact Email

adagostino@njeda.com

Will the Co-applicant be contributing capital, real property, or services related to the project?

Yes

No

Please describe the Co-applicant's role in the project.

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Please describe any details that may help the NJEDA understand the co-applicant's role in the project, including but not limited to the capital, real property, or services that directly affect and serve anticipated residents, tenants, or customers of the tenants of the project that the co-applicant will be contributing.

Please describe the long-term participation agreement between co-applicant & business entity

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Please upload a participation agreement with the applicant that specifies the co-applicant's participation in the rehabilitation project

Test Document.pdf

Please describe the Co-applicant's need to receive tax credits.

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Co-Applicant Organizational Details

Co-applicant Entity Type

Nonprofit Organization

What is the ownership structure of the co-applicant?

Co-applicant Country of Incorporation/Establishment/Formation

United States

Country

Co-applicant State of Incorporation/Establishment/Formation

New Jersey

State

Co-applicant Year of Incorporation/Establishment/Formation

2010

Please upload any formation documents for the Co-applicant

Test Document.pdf

Co-applicant Federal Employer Identification Number (FEIN)

12-456778

The 9 digit Federal Tax ID number of the Co-applicant

Co-applicant New Jersey Tax ID Number

123456789012

Addresses

Co-applicant Organization's U.S. Headquarters Address

36 West State St.

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08016

Zip Code

If the NJEDA needs to mail the Co-Applicant Organization any information, which address should be used?

- The headquarters address
- A different address

Co-Applicant Organization Phone

(123) 456-7890

Co-Applicant Website

Please upload New Jersey Tax Clearance Certificate from the NJ Division of Taxation.

Test Document.pdf

Certificates may be requested through the [State of New Jersey's online Premier Business Services \(PBS\) portal](#). Under the Tax & Revenue Center, select Tax Services, then select Business Incentive Tax Clearance. If the affiliate's account is in compliance with its tax obligations and no liabilities exist, the Business Incentive Tax Clearance can be printed directly through PBS.

Please provide a high-level, 2-3 short paragraph description of the Co-applicant's organization.

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Please include information on the Co-applicant's relationship with the Applicant. Please describe the Co-applicant's mission, activities the Co-applicant is involved in, the markets or client base the Co-applicant

serves, and any other information about the Co-applicant that the NJEDA should understand to review your application.

Has the Co-applicant organization received NJEDA assistance in the past?

Yes

No

Is the co-applicant involved in religious activities or is religiously affiliated?

Yes

No

Please note that this requires additional questions to determine eligibility of the requested financial assistance.

Permits & Approvals

Does the co-applicant have any permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has an interest in.

Yes

No

Examples include permits or obligations and responsibilities with New Jersey Department of Labor and Workforce Development, the Department of Environmental Protections, and the Department of the Treasury.

Is the Co-applicant requesting or receiving development subsidies for the rehabilitation project?

Yes

No

Examples include but are not limited to State, Federal or local grants; Foundation grants; PILOT agreements (Payments In Lieu Of Taxes) etc.

Development Subsidies

Examples include but are not limited to State, Federal or local grants; Foundation grants; PILOT agreements (Payments In Lieu Of Taxes) etc.

Name of Granting Body	Anticipated or Committed	Date	Amount of Development Subsidy
Abc Granting	Anticipated	12/01/22	\$10,000.00

Total: \$10,000.00

Upload a copy of the Co-applicant's Legal Questionnaire

NJEDA Legal Questionnaire (rev'd 2-3-2021).pdf

[Click here](#) to download. This Legal Questionnaire should be completed and signed by the Co-applicant.

Please upload an organization chart and other materials that provide a summary description of the type of organization and its ownership structure.

Test Document.pdf

These materials should provide summary description of the type of organization and its ownership structure; an organizational chart identifying owners and percentages of ownership if multiple partners; any subscription agreements for all partners or members for investment funds contributing equity to the Project; and/or any other materials needed to delineate the applicant team's ownership, structure, and

roles.

5. Ownership

Is the applicant, or any person who controls the applicant or owns or controls more than 1% of the stock of the applicant, an officer or employee of any agency, authority or other instrumentality of the State of New Jersey?

- Yes
 No

Is there any individual or entity with a 10% or greater ownership of the company?

- Yes
 No

Owners

Owner 1

Percent Ownership Stake in Applicant Company

35%

Owner Type

- Individual
 Company
 Trust
 Other

Legal Name

Company-Owner

Address

36 West State St.

Address Line 1

Address Line 2

Trenton

City

nj

State / Province / Region

08601

Postal / Zip Code

United States

Country

Three consecutive years of Business Tax Returns & Financial Statements

Test Document.pdf

If you are unable to provide this information, please submit any available information that can show evidence to the applicant's professional and financial wherewithal to successfully completing the rehabilitation project, as appropriate, and please contact program staff by sending an email to HistoricTaxCredit@njeda.com. **The e-mail MUST:**

- Have “UNDERWRITING” in the subject line.
- Include project name and address within the body of the message
- Include a contact name, email, and phone number of the person within the applicant’s entity that would be best qualified to discuss the issue with and NJEDA underwriting team member.

6. General Project Information

Project Name

Sample Historic Project- Tavern

Historic Property Name(s)

Historic Sample Tavern 1640

This name should match all historic designation documents

Please provide a 1–2 paragraph description of the scale and scope of the proposed project.

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

What is the projected number of permanent employees at the rehabilitation project at completion?

100

Project Location

Project Address

36 West State St.

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08601

Zip Code

Block and Lot

Census Tract

Block

Lot

341345313

56

124

34XXXXXXXXXX

Note: The Census Tract is the number for the project location, not the borrower's company address(unless it is the same address)

The number must be in the following format 34XXXXXXXXXX the first two digits are the State of NJ code of 34, the next three digits will be the county code, and the remaining six digits, XXXX.XX, will be the census tract code.

Census Tract numbers can be obtained by typing the project's address into the FFIEC locator at <https://geomap.ffiec.gov/FFIECGeocMap/GeocodeMap1.aspx>

Is this project located in any of the following areas?

- Qualified Incentive Tract
- Government Restricted Municipality
- A City of the First Class
- Within a ½ mile radius of the center point of a NJDOT Transit Village
- Not Applicable

Please upload a copy of NJEDA mapping tool report

Test Document.pdf

The NJEDA has provided this [mapping tool](#) to assist potential applicants to determine if proposed projects may be eligible for certain aspects of the program.

A project located within an eligible area is not guaranteed participation in the Program, special incentives, or rates.

Please use the mapping tool to search for a location and then print the "Report" for that location and upload it here.

Please identify the selected Rehabilitation Period

- 24 months (Single phased)
- 60 months (Multi-phased)

How many phases will be included in this project?

2

Transformative Projects

“Transformative project” means a specific construction project or improvement or phase of a project or improvement undertaken by a business entity that includes the rehabilitation of a transformative property.

“Transformative property” means a property that is:

1. An income producing property, not including a residential property, whose rehabilitation the Authority determines will generate substantial increases in State revenues through the creation of increased business activity within the surrounding area;
2. Individually listed on the New Jersey Register of Historic Places pursuant to P.L. 1970, c. 268 (N.J.S.A. 13:1B-15.128 et seq.) and which, before the enactment of P.L. 2020, c. 156 (N.J.S.A. 34:1B-269 et al.), received a determination of eligibility from the Keeper of the National Register of Historic Places in accordance with the provisions of Part 60 of Title 36 of the Code of Federal Regulations; and
3. Located within a one-half mile radius of the center point of a transit village, as designated by the New Jersey Department of Transportation, and located within a city of the first class, as classified under N.J.S.A. 40A:6-4, or located within a government-restricted municipality.

Business entities applying for tax credits under this program as a transformative project shall submit a one-time non-refundable application fee of \$18,000.

Do you want to apply as a Transformative Project?

Yes

No

Transformative

Does the project meet the definition of Transformative Project?

Yes

No

Will the project generate substantial increases in State revenues through increased business activity within the surrounding area?

Yes

No

Please upload a study or report that shows the project will generate substantial increases in State revenues through increased business activity within the surrounding area.

Test Document.pdf

Has the property been individually listed on the New Jersey Register of Historic Places?

Yes

No

Has the property received a Determination of Eligibility the Keeper of the National Register of Historic Places prior to January 7, 2021?

Yes

No

7. Project Scoring Criteria

The Authority has established scoring criteria for the evaluation of proposed rehabilitation projects. These criteria can be used to set a required minimum score for reviewed rehabilitation projects and to allocate tax credits in circumstances where the requests for tax credits exceed the annual maximum cap established by the statute. To receive a tax credit award, a business entity's application must receive a minimum score of 50 out of 100 maximum total score.

Based on the statute's imposed annual cap for the Historic Property Reinvestment Program (HPRP), there is a possibility for the program to be oversubscribed (that is, more applications scoring above the minimum than can be satisfied with the amount of tax credits available). In such an event, preestablished scoring criteria will be used as a means to competitively rank or compare projects against each other. If the volume of HPRP tax credit award requests is less than currently anticipated, resulting in the program being undersubscribed for any particular year, the minimum score ensures that proposed rehabilitation projects receiving tax credits are consistent with the objectives, goals and principles of the HPRP.

Applications will be reviewed and scored by a committee comprised of a multidisciplinary team of professionals. Members of the committee will include NJEDA staff, as well as professional staff from DEP's Historic Preservation Office. At a minimum, the committee will include at least one staff with experience in the fields of historic preservation, and construction/project management. Staff may seek assistance from consultants hired by the EDA to participate in or support the committee.

The recommended system will score projects with respect to five criteria:

1. Historic Significance of Resource
2. Imminent Threat to Historic Resource
3. Project Concept and Team
4. Site Control
5. Positive Impact on Surrounding Neighborhood

Historic Significance of Resource

Project Name:

Sample Historic Project- Tavern

Project Location:

36 West State St., Trenton, New Jersey 08601

Historic Property Name:

Historic Sample Tavern 1640

Property's Significance

Upload documentation that describes and discusses the level of significance of the qualified or transformative property in its current status?

Test Document.pdf

Is it the only or one of a limited number of representative example(s) of a type/period/feature of historic significance, or is it the only existing known property associated with a significant historic figure, historical event, period, or historical feature?

The document could be either a new narrative providing the requested information or an existing document, such as a copy of a National Register Nomination form, or other documentation previously prepared to evaluate the property's historic significance.

Review will be guided by the Criteria for Evaluation as outlined in 36 CFR § 60.4, and N.J.A.C. 7:4-2.3

Historic Fabric / Integrity

Upload documentation that describes to the Historic Fabric / Integrity of the site.

Test Document.pdf

The narrative should answer at a minimum the follow questions.

Does the site retain the ability to convey its historic significance?

Are the aspects of integrity (location, design, setting, materials, workmanship, feeling, association) as outlined in the original designation remain?

Do the most significant historic features, finishes and materials remain in place?

Level of historic significance as identified within the historic resource designation

- National Significance
- State Significance
- Local Significance
- Not Identified within the designation

Please upload photographs and other materials that evidence the historical significance of the site.

Test Document.pdf

Photographs shall show all exterior building facades, significant and representative interior spaces, and examples of significant historic fabric being proposed for repair and/or removal as part of the rehabilitation project. Applicant must also include photographs showing all features identified within Form HP-SC3-4c – Detailed Description of Rehabilitation Work, as well as a key to photographs showing location and direction of all photographs included.

Please select all historical designations

- National Register
- New Jersey Register
- Pinelands Commission
- Certified Local Government
- None of the Above

To check if your property is located in the National or New Jersey Register of Historic Places, or has a Determination of Eligibility from the Keeper or the National Register, please visit New Jersey's Historic

Preservation Office's Cultural Resources Geographic Information System "LUCY", which can be accessed from their website at: <https://nj.gov/dep/hpo/1identify/gis.htm>

Information regarding designation by the Pinelands Commission must be confirmed by the Commission. Contact information for the Pinelands Commission can be found at their website: <https://www.state.nj.us/pinelands/>

A list of New Jersey's Certified Local Governments can be found thru the National Park Service's Certified Local Governments page at: <https://www.nps.gov/subjects/clg/index.htm>.

National Register Date

3/9/1995

Has the historic resource been recognized as a National Historic Landmark by the Secretary of the Interior?

Yes

No

8. Imminent Threat of Historic Resource

Project Name:

Sample Historic Project- Tavern

Project Location:

36 West State St., Trenton, New Jersey 08601

Historic Property Name:

Historic Sample Tavern 1640

Is the property in danger due to issues with the Building Envelope which are causing water infiltration (roof leaks, missing or leaking windows or doors)?

Yes

No

Please describe how the property is in danger due to issues with the Building Envelope which are causing water infiltration (roof leaks, missing or leaking windows or doors).

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Attach photographs, as needed to show current condition.

Test Document.pdf

Is there significant damage to structural components such as foundation, roof rafters, load bearing walls, columns and/or beams?

Yes

No

Please describe the damage to structural components

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Is the damage to such a degree that it is easily noticeable (such as in the case of partial collapse of a portion of the structure), or it already has been condemned or deemed unsafe by a building official with jurisdiction over the site or project?

Yes

No

Please upload a copy of a structural report from a licensed structural engineer.

Test Document.pdf

Attach photographs, as needed to show current condition.

Test Document.pdf

Has the building been fully vacant for at least 1 continuous year (without utilities)?

- 5+ years continuously vacant
- 4-5 years continuously vacant
- 3-4 years continuously vacant
- 2-3 years continuously vacant
- 1-2 years continuously vacant
- No long vacancy shown

Is there encroachment in the immediate vicinity that is believed to pose an immediate or near future threat to the historic resource?

- Yes
- No

Please provide brief narrative to convey nature of encroachment threat.

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Please attach additional information (maps, photographs, press articles, etc.) as needed.

9. Project Concept and Team

Project Name:

Sample Historic Project- Tavern

Project Location:

36 West State St., Trenton, New Jersey 08601

Historic Property Name:

Historic Sample Tavern 1640

Do you have a full set of construction documents (drawings and specifications) prepared in consultation with a professional meeting the professional qualifications for an architectural historian or historic architect?

Yes

No

Please upload Construction Drawings

Test Document.pdf

Construction documents must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards.

Construction drawings must be submitted in PDF Format and must be to scale

Please upload Construction Specifications

Test Document.pdf

Construction documents must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards.

Construction specifications must be submitted in PDF Format.

Permit and Approvals

Please provide a list and status of all required local, State, and Federal government permits and local planning and zoning board approvals that have been issued for the redevelopment project or will be required to be issued pending resolution of financing;

Permit or Approval	Issuing Entity	Type of Permit or Approval	Status
electrical permit	Local County Entity	Municipal	Received

Upload Anticipated Construction Schedule

Test Document.docx

Construction schedule shall show all project phases, if applicable, in accordance with the selected rehabilitation period.

Upload Form HP-SC3-2 Approach to Schedule

HP-SC3-2 Approach to Schedule 2022-02-23.pdf

[Click here](#) to download Form HP-SC3-2 Approach to Schedule.

Earlier in the application, it was indicated that this rehabilitation project would be completed in distinct phases. Are the distinct phases set forth in the written architectural plans and specifications and included in the construction schedule?

Yes

No

Construction Cost Estimate

\$1,500,000.00

Please upload a copy of the Construction Cost Estimate

Test Document.pdf

The construction cost estimate must be prepared by a qualified professional with experience preparing CCEs for projects addressing historic structures. The construction cost estimate for the rehabilitation project shall include, but is not limited to, all construction costs associated with the rehabilitation project, including but not limited to all phases of the selected rehabilitation period, cost breakdown by Construction Specification Institute MasterFormat Specification Standards 2018. The estimate shall include the total cost of rehabilitation and the cost of rehabilitation/eligible costs.

Upload Form HP-SC3-3 Approach to CCE

HP-SC3-3 Approach to CCE 2022-02-25.pdf

[Click here](#) to download Form HP-SC3-3 Approach to CCE

Total Cost of Rehabilitation (Total Project Costs)

\$950,000.00

“Total cost of rehabilitation” means any and all costs incurred for and in connection with the rehabilitation project by the business entity and any affiliate of the business entity until the issuance of a permanent certificate of occupancy, or upon such other event evidencing project completion as set forth in the rehabilitation agreement, which shall include, but is not limited to, project costs, soft costs, and cost of acquisition of land and buildings.

Total Soft Costs

\$150,000.00

“Soft costs” means costs not directly related to construction, including capitalized interest paid to third parties, real estate taxes, utility connection fees, accounting, title/bond insurance, fixtures/equipment with a useful life of five years or less, affordable housing fees, and all costs associated with financing, design, engineering, legal, or real estate commissions, including, but not limited to, architect fees, permit fees, loan origination and closing costs, construction management, and freight and shipping delivery. The term does not include early lease termination costs, air fare, mileage, tolls, gas, meals, packing material, marketing and advertising, temporary signage, incentive consultant fees, Authority fees, loan interest payments on permanent financing, escrows, reserves, pre-opening costs, commissions and fees to the developer, project management, or other similar costs.

Cost of Rehabilitation or Eligible Costs

\$10,000.00

“Cost of rehabilitation” or “eligible costs” means the consideration given, valued in money, whether

given in money or otherwise, for the materials and services which constitute the rehabilitation.

Eligible costs shall be all costs associated with the structural components, as defined by 26 CFR 1.48-1(e)(2), within the qualified property or transformative property, and any soft costs associated with the rehabilitation project. Eligible costs shall not include any costs associated with an increase in total building volume.

Guidance for eligible soft costs:

For applications submitted on or **after January 1, 2023**, soft costs incurred within **12 months** prior to the date of application.

For applications submitted **prior to January 1, 2023**, soft costs incurred within **24 months** prior to the date of application.

Upload Form HP-AR-a13 Project Cost Summary

HP-AR-a13 Project Costs Summary 2022-02-25.xlsx

[Click here](#) to download Form HP-AR-a13 Project Cost Summary

Please provide a narrative description of experience and qualifications of the business entity and relevant project team members' ability to complete project including examples showing demonstrated history of successful completion of projects of similar size and scope.

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Project Team

Do you have a Historic Architect under contract at the time of this application?

Yes

No

Historic Architect

Historic Architect Name

Tom Architect

Historic Architect Address

36 West State St.

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08601

Zip Code

Historic Architect Phone

Historic Architect Email

Historic Architect Website (if applicable)**Please upload Form HP-SC3-4b Resume for the Historic Architect.**

HP-SC3-4b Resume Form 2022-02-23.pdf

[Click here](#) to download Form HP-SC3-4b Resume**Do you have an Architectural Historian Consultant under contract at the time of this application?** Yes No

Untitled

Architectural Historian Consultant Name**Architectural Historian Consultant Address**

Address Line 1

Address Line 2

City

State

Zip Code

Architectural Historian Consultant Phone**Architectural Historian Consultant Email****Architectural Historian Consultant Website (if applicable)****Please upload Form HP-SC3-4b Resume for the Architectural Historian Consultant.**

HP-SC3-4b Resume Form 2022-02-23.pdf

[Click here](#) to download Form HP-SC3-4b Resume**Do you have additional Historic Architects/ Architectural Historian Consultants under contract at the time of this application?** Yes No

{if

(DoYouHaveAdditionalHistoricArchitectsArchietecturalHistorianConsultantsUnderContractAtTheTimeOfThis Application != null and

DoYouHaveAdditionalHistoricArchitectsArchietecturalHistorianConsultantsUnderContractAtTheTimeOfThisA pplication = "Yes")}}

Additional Consultants under contract at time of application

{ each AdditionalConsultantsUnderContractAtTimeOfApplication }

Additional Consultant {ItemNumber}

Name

{Name}

Address

{Address.Line1}

Address Line 1

{Address.Line2}

Address Line 2

{Address.City}

City

{Address.State}

State

{Address.PostalCode}

Zip Code

Phone

{Phone}

Email

{Email}

Website (if applicable)

{WebsiteifApplicable}

Please upload Form HP-SC3-4b Resume additional consultant.

{ each AdditionalConsultantsHPSC34b }

{Name}

{ end each }

[Click here](#) to download Form HP-SC3-4b Resume

{ end each }

{ end if }

Please provide a narrative of the proposed project approach that includes adequate consideration of the historic resource(s).

Test Document.pdf

Information shall be provided which fully addresses the requirements for compliance with the Secretary of the Interior's Standards for Rehabilitation and includes specific proposed treatment for interior and exterior historic fabric, materials, and spaces throughout the project. If the project includes ground disturbance, the project approach must clearly define how known, or previously unidentified archeological resources will be addressed if encountered during the course of the project.

Has the narrative information provided above fully addressed requirements for compliance with the Secretary of the Interior's Standards for Rehabilitation?

Yes

No

Has the project applied for the Federal Historic Preservation Tax Credit?

- Yes
- No

Upload Form HP-SC3-5 Detailed Description of Rehabilitation Work
HP-SC3-5 Detailed Description of Rehabilitation Work 2022-02-24.pdf

[Click here](#) to download HP-SC3-5 Detailed Description of Rehabilitation Work.

Will this project include ground disturbance?

- Yes
- No

Do you have an Archeologist under contract at the time of this application?

- Yes
- No

Untitled

Archeologist Name

G. Archeologist

Archeologist Address

36 West State St.

Address Line 1

Address Line 2

Trenton New Jersey 08601

City

State

Zip Code

Archeologist Phone

(123) 564-8134 x6

Archeologist Email

G.archeologist@njeda.com

Archeologist Website (if applicable)

Please upload Form HP-SC3-4b Resume for Archeologist

HP-SC3-4b Resume Form 2022-02-23.pdf

[Click here](#) to download Form HP-SC3-4b Resume

Please upload project team organizational chart.

Test Document.pdf

Please upload Form HP-SC3-4a Key Team Members.

HP-SC3-4a Key Team Members 2022-02-23.pdf

Include resumes (Form HP-SC3-4b Resume) for each team member if not previously identified as Architectural Historian, Historical Architect, or Archeologist, as they have been previously submitted.

[Click here](#) to download Form HP-SC3-4a Key Team Members

10. Site Control

Project Name:

Sample Historic Project- Tavern

Project Location:

36 West State St., Trenton, New Jersey 08601

Historic Property Name:

Historic Sample Tavern 1640

Does the Applicant own or have lease of entire site?

Yes

No

Does the Applicant own or have partial lease of the site?

Yes

No

Does the Applicant have agreement with current owner(s) for obtaining control of entire site?

Yes

No

Upload documentation evidencing site control

Test Document.pdf

This can include a formal agreement with owner, right of entry, and/or letter of intent.

11. Positive Impact on Surrounding Neighborhood

Project Name:

Sample Historic Project- Tavern

Project Location:

36 West State St., Trenton, New Jersey 08601

Historic Property Name:

Historic Sample Tavern 1640

Please provide a narrative detailing how the project will fulfill an unmet neighborhood, municipal, and/or regional need.

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Does the applicant have written letter(s) of support from a community group(s) from the neighborhood/area in which the property is located or the municipality for the rehabilitation of the qualified or transformative property, and for the applicant's project?

Yes

No

Please upload letter(s) of support

Test Document.pdf

Please describe how the redevelopment of the project site will grow the number of small businesses or attract employers to the municipality/region?

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

12. Project Elements

What are the proposed future uses of the project?

- Commercial
- Residential
- Both

Residential Units

Will this project consist of any newly constructed residential units?

- Yes
- No

Does this structure serve a residential rental purpose and also contain at least four dwelling units?

- Yes
- No

For a residential project or redevelopment project consisting of newly constructed residential units, are at least 20 percent of the residential units constructed reserved for occupancy by low- and moderate-income households with affordability controls as required under the “Fair Housing Act”?

- Yes
- No

Please provide a narrative description of project that includes breakdown of uses and related square feet.

Test Document.pdf

Project Construction

Has Construction or rehabilitation activity commenced at the site of the rehabilitation project?

- Yes
- No

Was construction or rehabilitation ordered by a building code or other official with jurisdiction over the site or the rehabilitation project to correct a health, safety, or other hazard?

- Yes
- No

Please provide a narrative evidencing the proposed construction or rehabilitation activity was limited to resolving the hazard.

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Please provide the NJEDA with supporting documentation evidencing the above order and the

rehabilitation completed.

Test Document.pdf

Documentation should include

1. A copy of the official order
2. Documents that evidence the proposed construction or rehabilitation activity was limited to resolving the hazard, including photographs.
3. The proposed construction or rehabilitation activity complies with the Secretary of Interior's Standards for rehabilitation 36 C.F.R. 67.7

What is the projected number of construction employees to be employed on the rehabilitation project?

100

13. Project Economics

Funding Sources

Funding Source 1

Name of Funding Source

ABC Bank

Funding Source Type

Debt Financing

Please describe funding source

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Proposed Terms

Describe Terms

Funding Amount

\$100,000.00

Please provide documentation supporting the funding source.

Test Document.pdf

For applicant equity, this may be a bank statement for a private company. For publicly traded companies, the Authority will look to the Form 10-K and Form 10-Q that was provided earlier in the application. For bank financing, please provide commitment letters, term sheets, letters of interest, or other documentation evidencing the bank financing commitment.

Is the Applicant requesting/receiving development subsidies as defined by P.L. 2007, c. 200 (N.J.S.A. 52:39-1)

Yes

No

Examples include but are not limited to State, Federal or local grants; Foundation grants; PILOT agreements (Payments In Lieu Of Taxes) etc.

Please upload a copy of a **market and/or feasibility study** for proposed use of the project site by an independent third party. This study must include the third party's position regarding the marketability and underwriting of the revenue and expense components of the proposed project for the duration of the rehabilitation period

The study must be dated within 90 days of the application and include the following:

Firm's advice and counsel regarding the marketability and underwriting of the revenue and expense

components of the proposed project.

The assessment should contain the following:

1. Findings from the inspection of the site and surrounding neighborhood
2. Research of comparable retail properties
3. Analysis of the retail trade area demand
4. Consideration of general market factors and national trends in similar neighborhoods.

This report also should include:

1. A comprehensive overview of the potential for the retail development in the market at the site through a demand and supply analysis of the markets
2. A Determination of the demand and achievable rents for retail space in the market
3. The recommended absorption/lease-up schedule for the retail component based on the potential market demand as well as recognition of current and proposed competitive supply.

The study should address positive features of the site as well as the challenging site influences should be addressed. New retail developments in the area should be listed as well as other demand drivers such as housing/population trends, cultural and entertainment projects in the vicinity, and the impact of the project on other residential and/or similar projects in the area (if any).

Upload Market and/or Feasibility Study

Test Document.pdf

Please upload a project pro forma providing comprehensive project-level financial information for the proposed (including for all phases), that includes, but is not limited to, estimated project costs and total development costs, any State or local financial assistance for the project, proposed terms of financing, projected reasonable and appropriate return on investment on developer's contributed capital, net margin, and cash on cash yield.

Upload Project Pro Forma

Test Document.pdf

Please upload project pro forma in excel only including all formulas.

Please provide adjusted basis of structure used for federal income tax purposes (i.e. the purchase price minus value of the land minus any depreciation already taken plus any capital improvements) as of the date of application

250000

Please provide adjusted basis of structure used for federal income tax purposes (i.e. the purchase price minus value of the land minus any depreciation already taken plus any capital improvements) as of the anticipated beginning of the selected rehabilitation period

250000

This number may be the same as the adjusted basis of structure at date of application.

Please provide a narrative of prior similar projects completed and related financial information for these projects.

Test Document.pdf

For the applicant entity please provide financial information including but not limited to, 3 years business federal tax return or CPA prepared financial statements, 3 years personal federal and New Jersey tax returns.

Test Document.pdf

If the applicant is a recently formed single purpose entity that is unable to provide the requested 3 years of tax returns, it is imperative that they provide this information for any and all affiliates or entities with an ownership interest in the business entity to evidence the applicant's professional and financial wherewithal to successfully completing the rehabilitation project. In such a case, please attach a list of all the parties with ownership for which documentation has been provided elsewhere within the application and attach requested information for any party for which such information has not been previously provided within other sections of this application. Additionally, please contact program staff by sending an email to HistoricTaxCredit@njeda.com. **The e-mail MUST:**

- Have "UNDERWRITING" in the subject line.
- Include project name and address within the body of the message
- Include a contact name, email, and phone number of the person within the applicant's entity that would be best qualified to discuss the issue with and NJEDA underwriting team member.

Please provide a narrative of how any required equity contribution will be met. Supporting documentation of the source of equity must be provided and may include financial information of the applicant and/or owners.

Test Document.pdf

Will the tax credit award be monetized?

Yes

No

Application for tax credit transfer certification, allows a business entity or co-applicant that is a holder of a credit, upon application to, and approval by, the Division of Taxation in the Department of the Treasury and the Chief Executive Officer of the Authority, to sell its credit, covering one or more years, under the tax credit transfer certificate program for consideration received by the business of not less than 85 percent of the transferred credit amount, except a developer of a residential project consisting of newly-constructed residential units that has received federal low income housing tax credits under 26 U.S.C. s.42(b)(1)(B)(i) may assign a tax credit transfer certificate for consideration of no less than 75 percent subject to the submission of a plan to the Authority and the New Jersey Housing and Mortgage Finance Agency to use the proceeds derived from the assignment of tax credits to complete the residential project.

Please provide a narrative of the financing structure, which must include a description of all the parties involved, the proposed timing of the tax credit(s) sale(s), transfer(s), assign, or pledge(s), and confirmation that the sale proceeds meet the required minimum sales price as set by legislation.

Test Document.pdf

Please attach any other documentation demonstrating economic and commercial viability pursuant to N.J.A.C. 19:31-26.3(a)

Test Document.pdf

Please attach the financial information of the rehabilitation project.

This shall include all phases, including by not limited to, any State or local financial assistance for the project, proposed terms of financing, projected reasonable and appropriate return on investment based on the business entity's equity, net margin, and cash on cash yield

Soft Costs

Please provide a list of all project soft costs associated with the rehabilitation project. Total must equal previously submitted total soft costs expense provided on the Project Concept and Team page of the Application (page 9).

“Soft costs” means costs not directly related to construction, including capitalized interest paid to third parties, real estate taxes, utility connection fees, accounting, title/bond insurance, fixtures/equipment with a useful life of five years or less, affordable housing fees, and all costs associated with financing, design, engineering, legal, or real estate commissions, including, but not limited to, architect fees, permit fees, loan origination and closing costs, construction management, and freight and shipping delivery. Eligible soft costs do not include early lease termination costs, air fare, mileage, tolls, gas, meals, packing material, marketing and advertising, temporary signage, incentive consultant fees, Authority fees, loan interest payments on permanent financing, escrows, reserves, pre-opening costs, commissions and fees to the developer, project management, or other similar costs.

Type of Soft Cost: Real estate taxes, accounting, title/bond insurance, fixtures/equipment with a useful life of five years or less, financing, capitalized interest paid to third parties, and consultants include, but is not limited to, architect, archeologist, engineer, construction management, legal, etc. Fees include affordable housing, permitting, utility connection, etc. Real estate commissions and taxes, loan origination and closing costs, and freight and shipping delivery. “Other” must be specified by applicant within the description category.

The description shall specify the exact type of soft cost, for example, ‘consultant’ shall include “architect”, “engineer”, etc. in the description category. “Other” must be specified by applicant within the description category.

Type of Soft Cost	Description	Amount
Freight	Description of Freight costs	\$60,000.00
Real Estate Taxes	Description of Real Estate Taxes	\$23,000.00
Accounting	Description of Accounting costs	\$50,000.00
Consultants	Description of Consultants costs	\$17,000.00
		\$150,000.00

Please upload any additional information that may be considered useful for the Authority to complete its underwriting process.

i The Authority may request additional financial information to complete the underwriting process.

14. Diversity, Equity, & Inclusion

In this section, we would like more information about the diversity of your company any actions your company has taken or is taking with respect to Diversity, Equity & Inclusion. This information is optional and for tracking purposes only.

With which of the following does the majority owner of the applicant organization self-identify (if applicable)?

- Minority
- Woman
- Veteran
- LGBTQ
- Disabled
- Prefer not to answer

Please indicate the majority owner's race(s)

- Black or African American
- American Indian and Alaskan Native
- Asian
- Native Hawaiian or Other Pacific Islander
- Some Other Race
- Prefer not to answer

Please select the ethnicity or ethnicities that the majority owner most closely identifies with

- Black
- East Asian (e.g. Chinese, Korean)
- Latino/a/x or Hispanic
- Middle Eastern/ Northern African (e.g. Egyptian, Iranian)
- North American Aboriginal, Alaska Native, First Nations, Metis, or Inuit
- South Asian (e.g. Thai Vietnamese)
- Other
- Prefer not to answer

Please select which of the following State of New Jersey certifications the applicant organization currently holds:

- Small Business Enterprise (SBE)
- Disadvantaged Business Enterprise (DBE)
- Minority-Owned Business Enterprise (MBE)
- Woman-Owned Business Enterprise (WBE)
- Veteran-Owned Business Enterprise (VOB)
- Disabled Veteran-Owned Business Enterprise (DVOB)
- None of the above / I do not wish to identify

Please provide documentation evidencing your entity's certification.

Test Document.pdf

Additional DE&I Information

In this section, we would like more information about any actions your company has taken or is taking with respect to Diversity, Equity & Inclusion. If these questions are not applicable, you may skip them.

Please describe whether your company's leadership team is made up of a diverse group of individuals. Please provide as much detail as possible about the composition of your leadership team as it relates to groups that have been historically underrepresented (minority, woman, veteran, LGBTQ, disabled).

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Please describe whether your company's Board of Directors is made up of a diverse group of individuals. Please provide as much detail as possible about the composition of your leadership team as it relates to groups that have been historically underrepresented (minority, woman, veteran, LGBTQ, disabled).

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Please describe any diversity initiatives, programs, or plans the applicant company has established.

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Please upload any documentation detailing diversity initiatives, if available.

15. Prevailing Wage and Affirmative Action Requirements

Construction and buildings services activities under Historic Property Reinvestment Program are subject to New Jersey affirmative action and prevailing wage requirements.

(a) The Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4 and N.J.A.C. 19:30-3, apply to the rehabilitation project. The affirmative action requirements shall apply until the later of the completion of the rehabilitation project or two years after the first tax credit is issued.

(b) The Authority's prevailing wage requirements, N.J.S.A. 34:1B-5.1 and N.J.A.C. 19:30-4 et seq., apply to construction contracts for work performed, including work performed by tenants, for the rehabilitation project during the selected rehabilitation period. The prevailing wage requirements shall apply until the later of the end of the selected rehabilitation period or two years after the first tax credit is issued.

(c) The Authority's prevailing wage requirements, N.J.S.A. 34:1B-5.1 and N.J.A.C. 19:30-4 et seq., shall apply to building services at the qualified property or transformative property starting with the completion of the first phase of a rehabilitation project with a selected rehabilitation period of 60 months or the end of the selected rehabilitation period for a rehabilitation project with a selected rehabilitation project of 24 months. For all rehabilitation projects, the prevailing wage requirements shall continue for 10 years following the end of the selected rehabilitation period. In the event a portion of a rehabilitation project is undertaken by a tenant and the tenant has a leasehold of more than 35 percent of space in the building owned or controlled by the business entity, the requirement that each worker employed to perform building service work at the building be paid not less than the prevailing wage shall apply to the entire rehabilitation project and all tenants.

Effective April 1, 2020, contractors and subcontractors for construction contracts that require payment of prevailing wage must provide proof of registration under the Public Works Contractor Registration Act (Act), N.J.S.A. 34:11-56.48 et seq. The Act does not require proof of registration for such contracts that were awarded prior to April 1, 2020. Information regarding the Act can be found on the New Jersey Department of Labor's website: [Department of Labor & Workforce Development \(nj.gov\)](http://www.nj.gov/department-of-labor).

If you have any questions about these requirements, please contact NJEDA by sending an email to HistoricTaxCredit@njeda.com.

I acknowledge any construction on this project, undertaken either by the applicant or a tenant, is subject to prevailing wage requirements.

I acknowledge that in the event a portion of a rehabilitation project is undertaken by a tenant and the tenant has a leasehold of more than 35 percent of space in the building owned or controlled by the business entity, the requirement that each worker employed to perform building service work at the building be paid not less than the prevailing wage shall apply to the entire rehabilitation project and all tenants.

I acknowledge that the prevailing wage requirements shall apply until the later of the end of the selected rehabilitation period or two years after the first tax credit is issued.

I acknowledge that any building services performed on the project is subject to the prevailing wage requirements for construction work during the duration of the project and to building service workers for a period of 10 years following project completion for a single-phase project, or 10 years following the completion of the first phase for multiphase rehabilitation projects.

I acknowledge that the Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4 and

N.J.A.C. 19:30-3, shall apply to the rehabilitation project and until the later of the completion of the rehabilitation project or two years after the first tax credit is issued.

I acknowledge that any contractor working on this project must be registered with the New Jersey Department of Labor pursuant to the Public Works Contractor Registration Act, N.J.S.A. 34:11-56.48 et seq., prior to the start of construction.

Notice Form

NOTICE-REGARDING-AA-AND-PW-2020 (2).pdf

Please download, complete, and attach the [Notice Regarding Affirmative Action / Prevailing Wage & Green Buildings Form](#).

Projects under the Historic Property Reinvestment Program are not subject to Green Building Construction Requirements.

16. Legal Questionnaire

Applicant Name: **Sample Company 123-ABC**

Persons (entities or individuals) applying for NJEDA programs are subject to the Authority's Disqualification/Debarment Regulations (the "Regulations"), which are set forth in N.J.A.C. 19:30-2.1, *et seq.* Applicants are required to answer the following background questions ("Legal Questionnaire") pertaining to causes that may lead to debarment, disqualification, or suspension from eligibility under the Regulations and Executive Orders 34 (Byrne 1976) and 189 (Kean 1988) after consideration of all relevant mitigating factors. Governmental entities are not required to submit this Legal Questionnaire and may leave it empty.

DEFINITIONS

Notwithstanding any terms defined elsewhere or otherwise herein, the following definitions shall govern in responding to this Legal Questionnaire:

"Affiliates" means any entities or persons having an overt or covert relationship such that any one of them directly or indirectly controls or has the power to control another. For the purposes of application for, or ongoing compliance with, Authority-administered programs, this includes:

- any entities or persons having an ownership interest in Applicant of 10% or greater;
- any entities in which Applicant holds an ownership interest of 10% or greater; and
- any entities that are named in the application and/or agreement, or that will receive a direct benefit from the financing, incentive, or other agreement with the Authority.

Note that any entities or persons fitting these definitions will need to be listed in Part C below.

"Legal Proceedings" means any civil, criminal, or administrative proceedings in a State or Federal court or administrative tribunal in the United States or any territories thereof.

RELEVANT TIMEFRAMES

Responses should be given based on the following "look-back" periods:

- For civil matters, those that were either pending or concluded within 5 years of the reporting date;
- For criminal matters, those that were either pending or concluded within 10 years of the reporting date;
- For environmental regulatory matters, those that were either pending or concluded within 10 years of the reporting date; and
- For all other regulatory matters, those that were either pending or concluded within 5 years of the reporting date.

Note that in cases where Applicant has previously submitted and certified a legal questionnaire to the Authority, the Applicant may refer to its prior legal questionnaire and report only those matters that are new or have changed in status since the date of last reporting.

Part A. Past Proceedings

Has Applicant, or any officers or directors of Applicant, or any Affiliates of Applicant, been found or conceded or admitted to being guilty, liable, or responsible in any Legal Proceeding, or conceded or admitted to facts in any Legal Proceedings that demonstrate responsibility for any of the following violations or conduct? (Any civil or criminal decisions or verdicts that have been vacated or expunged need not be reported.)

1. Commission of a criminal offense as an incident to obtaining or attempting to obtain a public or private contract, or subcontract there under, or in the performance of such contract or subcontract.

Yes

No

2. Violation of the Federal Organized Crime Control Act of 1970, or commission of embezzlement, theft, fraud, forgery, bribery, falsification or destruction of records, perjury, false swearing, receiving stolen property, obstruction of justice, or any other offense indicating a lack of business integrity or honesty.

Yes

No

3. Violation of the Federal or State antitrust statutes, or of the Federal Anti-Kickback Act (18 U.S.C. 874).

Yes

No

4. Violation of any law governing the conduct of elections of the Federal Government, State of New Jersey or of its political subdivision.

Yes

No

5. Violation of the "Law Against Discrimination" (P.L. 1945, c169, N.J.S.A. 10:5-1 et seq., as supplemented by P.L. 1975, c127), or of the act banning discrimination in public works employment (N.J.S.A. 10:2-1 et seq.) or of the act prohibiting discrimination by industries engaged in defense work in the employment of persons therein (P.L. 1942, c114, N.J.S.A. 10:1-10, et seq.).

Yes

No

6. To the best of your knowledge, after reasonable inquiry, violation of any laws governing hours of labor, minimum wage standards, prevailing wage standards, discrimination in wages, or child labor.

Yes

No

7. To the best of your knowledge, after reasonable inquiry, violation of any law governing the conduct of occupations or professions of regulated industries.

Yes

No

8. Debarment by any department, agency, or instrumentality of the State or Federal government.

Yes

No

9. Violation of the Conflict of Interest Law, N.J.S.A. 52:13D-12 et seq., including any of the following prohibitions on vendor activities representing a conflict of interest, or failure to report a solicitation as set forth below:

(i) No person shall pay, offer or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any Authority officer or employee or special Authority officer or employee, as defined by N.J.S.A. 52:13D-13(b) and (e), with which such person transacts or offers or proposes to transact business, or to any member of the immediate family as defined by N.J.S.A. 52:13D-13(i), of any such officer or employee, or partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13(g).

(ii) The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any Authority officer or employee or special Authority officer or employee from any person shall be reported in writing by the person to the Attorney General and the NJEDA Ethics Liaison Officer.

(iii) No person may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such person to, any Authority officer or employee or special Authority officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to the Authority, or with any person, firm or entity with which he or she is employed or associated or in which he or she has an interest within the meaning of N.J.S.A. 52:13D-13(g). Any relationships subject to this subsection shall be reported in writing to the NJEDA Ethics Liaison Officer and the State Ethics Commission, which may grant a waiver of this restriction upon application of the Authority officer or employee or special Authority officer or employee upon a finding that the present or proposed relationship does not present the potential, actually or appearance of a conflict of interest.

(iv) No person shall influence, or attempt to influence or cause to be influenced, any Authority officer or employee or special Authority officer or employee in his or her capacity in any manner which might tend to impair the objectivity or independence of judgment of the officer or employee.

(v) No person shall cause or influence, or attempt to cause or influence, any Authority officer or employee or special Authority officer or employee to use, or attempt to use, his or her official position to secure unwarranted privileges or advantages for the person or any other person.

Yes

No

10. Violation of any State or Federal law that may bear upon a lack of responsibility or moral integrity, or that may provide other compelling reasons for disqualification. Your responses to the foregoing question should include, but not be limited to, the violation of the following laws, without regard to whether there was any monetary award, damages, verdict, assessment or penalty, except that any violation of any environmental law in category (v) below need not be reported where the monetary award, damages, etc. amounted to less than \$1 million.

(i) Laws banning or prohibiting discrimination or harassment in the workplace.

- (ii) Laws prohibiting or banning any form of forced, slave, or compulsory labor.
 - (iii) The New Jersey Conscientious Employee Protection Act, N. J. Stat. Ann. § 34:19-1 *et seq.*, or other “Whistleblower Laws” that protect employees from retaliation for disclosing, or threatening to disclose, to a supervisor or to a public body an activity, policy or practice of the employer, that the employee reasonably believes is in violation of a law, or a rule or regulation issued under the law.
 - (iv) Securities or tax laws resulting in a finding of fraud or fraudulent conduct.
 - (v) Environmental laws, where the monetary award, penalties, damages, etc. amounted to more than \$1 million.
 - (vii) Laws banning anti-competitive dumping of goods.
 - (viii) Anti-terrorist laws.
 - (ix) Criminal laws involving commission of any felony or indictable offense under State or Federal law.
 - (x) Laws banning human rights abuses.
 - (xi) Laws banning the trade of goods or services to enemies of the United States.
- Yes
- No

Part B. Pending Proceedings

11. To the best of your knowledge, after reasonable inquiry, are Applicant, or any officers or directors of Applicant, or any Affiliates, a party to pending Legal Proceedings wherein any of the offenses or violations described in questions 1-10 above are alleged or asserted against such entity or person? With respect to laws banning or prohibiting discrimination or harassment in the workplace, please provide only information pertaining to any class action lawsuits.

- Yes
- No

If the answer to any of the foregoing questions is affirmative, you must provide the following information as an attachment to the application: (i) the case name and court/administrative agency (including jurisdiction and venue) in which such matters were tried or are pending; (ii) the charges or claims adjudicated or alleged; and (iii) a brief explanation of the circumstances giving rise to such matters. Also, for affirmative answers to question 1-10, please attach copies of document(s) reflecting the final resolution (e.g., final judgments, verdicts, plea bargains, consent orders, administrative findings, or settlement agreements).

Note that an Applicant may refer to or attach specific provisions of a 10-K/Q or other filings with the U.S. Securities and Exchange Commission (SEC); however, the Applicant should be aware that different laws apply to disclosures to the Authority. This means that the Authority does not have the same types of materiality thresholds as the SEC. The Applicant is expected to supplement its SEC filings to ensure that all relevant matters are disclosed to the Authority, including any matters that were below the SEC’s materiality threshold and any matters that may have occurred after its most recent filing.

Documentation

Please Note: Eligibility is determined based on the information presented in the completed Application. If, at any time while engaged with the Authority the Applicant should become aware of any facts that materially alter or change its answers, or that render any of them incomplete or inaccurate, the Applicant has a duty to promptly report such facts to the Authority in writing. The Authority reserves the right to require additional clarifying or explanatory information from the Applicant regarding the answers given, to ask additional questions not contained in this Legal Questionnaire, and to perform its own due diligence investigations and searches.

Part C. Applicable Affiliates

Please provide a list of all entities or persons considered to be "Affiliates" of Applicant based upon the above definitions.

Affiliates

Name of Affiliate (Entity or Person)	Federal Employer Identification Number (EIN) (if applicable)
ABC Firm	12-345678

Certification of Legal Questionnaire and Authorization to Release Information

This certification shall be signed as follows:

- *for a corporation, by a principal executive officer at least the level of vice president;*
- *for a partnership, by a general partner;*
- *for a sole proprietorship, by the proprietor;*
- *for a governmental entity, by the contact person (business administrator, manager, mayor, etc.);*
- *for other than above, by the person with legal responsibility for the application.*

I hereby represent and certify that I have reviewed the information contained in this Legal Questionnaire, and that the foregoing information is true and complete under penalty of perjury. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment. I further agree to inform the New Jersey Economic Development Authority of any changes in the foregoing information which may occur prior to execution of any agreement with the Authority, and so long as any such agreement is in effect. Failure to disclose relevant matters may render the Applicant ineligible for the financial benefits sought and may subject the Applicant to disqualification, debarment, suspension, or referral to the office of the state's Attorney General.

The undersigned, on behalf of the Applicant, understands and acknowledges that information and documents provided to the New Jersey Economic Development Authority: (1) are subject to public disclosure during deliberations of the Authority at public meetings regarding the application and as set forth in the minutes of the Authority's public meetings; and (2) are subject to public disclosure under certain laws, including, but not limited to, the Open Public Records Act, N.J.S.A. 47A:1-1 *et seq.*, and the common

law right-to-know.

Electronic Signatures

Pursuant to written policy, the New Jersey Economic Development Authority allows documents to be signed electronically and hereby agrees to be bound by such electronic signatures. Please confirm that you, as a signatory to this document, also agree to be bound by electronic signatures.

I, Mary Representative, agree to be bound by electronic signatures.

Full Name, Title

Mary Representative

Date

3/21/2022

17. Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3

The following certification of non-involvement is required to comply with P.L. 2022, c.3, which was signed by Governor Murphy on March 9, 2022, and prohibits government dealings with businesses associated with Belarus or Russia.

Under the new law, “engaged in prohibited activities in Russia or Belarus” means (1) companies in which the Government of Russia or Belarus has any direct equity share; (2) having any business operations commencing after March 9, 2022 that involve contracts with or the provision of goods or services to the Government of Russia or Belarus; (3) being headquartered in Russia or having its principal place of business in Russia or Belarus, or (4) supporting, assisting, or facilitating the Government of Russia or Belarus in their campaigns to invade the sovereign country of Ukraine, either through in-kind support or for profit. The full text of the new law is available on the Legislature’s webpage at: https://www.njleg.state.nj.us/Bills/2022/A3500/3090_11.HTM

If you are not able to sign this certification of non-involvement, please send an email to HistoricTaxCredit@njeda.com with the subject: “Certification of non-involvement in prohibited activities in Russia or Belarus.”

I, **Mary Sample, CEO**, am authorized to certify that **Sample Company 123** is not “engaged in prohibited activities in Russia or Belarus” (as such term is defined in P.L.2022, c. 3., sec. (1)(e)) except as permitted by federal law. I understand that if this statement is willfully false, I may be subject to penalty, as set forth in P.L. 2022, c. 3, section (1)(d).

IN WITNESS WHEREOF, I have hereunto set my hand this **24** day of **March, 2022**.

Name

Mary Sample

Title

CEO

Name of Company

Sample Company 123

Signature

A handwritten signature in black ink, appearing to read 'MS', is written over a large, faint, light-gray watermark of the signature.

18. Acknowledgments of Applicant

I, THE UNDERSIGNED, ACKNOWLEDGE AS FOLLOWS:

1. The New Jersey Department of Law and Public Safety may verify any and all information provided in this application through a search of its records, or records to which it has access, and release the results to the EDA.
2. The EDA may obtain information including, but not limited to, a credit bureau check, covering the applicant and/or its principals, stockholders, and/or investors.
3. The EDA may provide information submitted by or on behalf of the applicant to the New Jersey Department of Environmental Protection .
4. In accordance with N.J.A.C. 19:31-26.8(e), as approved by the EDA Board on February 9, 2022, if the actual capital financing approach utilized by the rehabilitation project has resulted in a project financing gap that is smaller than the project financing gap determined at Board approval, the Authority shall reduce the amount of the tax credit award. If there is no project financing gap due to the actual capital financing approach utilized by the project, then the developer shall forfeit the tax credit award.
5. In accordance with N.J.A.C. 19:31.26.8(c)(2), as approved by the EDA Board on February 9, 2022, if the actual cost of rehabilitation is less than the cost of rehabilitation set forth in the application, the tax credit shall be calculated based on the actual cost of rehabilitation.
6. The Authority may in its discretion conduct inspections of the site of the project at any time during the course of the project, during the compliance period, and while the applicant or any co-applicant retains any obligation under the program.

I am an Authorized Signer and I accept the terms and conditions.

Yes

No

Full Name, Title

Mary Representative

Signature

Date

3/22/2022



19. Certification of Applicant

Eligibility for financial assistance from the New Jersey Economic Development Authority (the EDA or the Authority) is determined by the information presented in this application and the required attachments and schedules. Any changes in the status of the proposed project from the facts presented herein may disqualify or delay the project; including but not limited to, the commencement of construction or the acquisition of assets such as land or equipment. Please contact EDA staff before taking any action that would change the status of the project as reported in this application.

State and federal law as well as EDA regulations and policies regarding prevailing wage and affirmative action require the submission of certain reports and certificates as well as the inclusion of certain provisions in construction contracts. Please consult with the EDA staff for details.

I, THE UNDERSIGNED, CERTIFY AS FOLLOWS:

1. The applicant has no outstanding obligations to any bank, loan company, corporation, or individual not mentioned in this application and attachments.
2. The information contained in this application and all attachments is true, accurate, and complete.
3. The tax credits applied for in this application are not for personal, family, or household purposes.
4. The applicant is not in default with any program administered by the State of New Jersey.
5. The subcontractors that will perform work on the project are registered as required by "The Public Works Contractor Registration Act," P.L. 1999, c. 238 (N.J.S.A. 34:11-56.48 et seq.), have not been debarred by Department of Labor and Workforce Development from engaging in or bidding on Public Works Contracts in the State, and possess a current tax clearance certificate issued by the Division of Taxation in the Department of the Treasury.
6. The applicant shall not cease to operate the project during the compliance period without prior written consent of the Authority.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

I am an Authorized Signer and I accept the terms and conditions.

Yes

No

Full Name, Title

Mary Representative

Signature

Date

3/22/2022

A handwritten signature in black ink, appearing to be 'M. A. P.' or similar, with a stylized, cursive script.

Additional Documentation

Please upload any documentation not explicitly requested in previous sections, that might help substantiate and verify the content of your application.

20. Certifications

It is a requirement of the Historic Property Reinvestment Program for the applicant to submit written certifications by the chief executive officer or equivalent officer of the eligible applicant stating that: all good faith efforts have been made and additional capital cannot be raised from other sources on a non-recourse basis; the applicant applying for the program is in substantial good standing with the Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury; and the officer has reviewed the information submitted and information contained in the application and all attachments is true, accurate, and complete.

Please upload the CEO Certification for the Applicant

HP-AR-a23 CEO Certification-Applicant 2022-03-14.pdf

[Click here](#) to download a copy of the CEO Certification for this program

It is a requirement of the Historic Property Reinvestment Program for a co-applicant to submit written certifications by the chief executive officer or equivalent officer of the eligible co-applicant stating that: the co-applicant applying for the program is in substantial good standing with the Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury; and the officer has reviewed the information submitted and information contained in the application and all attachments is true, accurate, and complete.

Please upload the CEO Certification for the Co-Applicant

HP-AR-b8 CEO Certification-CoApplicant 2022-03-14.pdf

[Click here](#) to download a copy of the CEO Certification for the Co-Applicant

21. Fee Payment

There is **\$18,000** a non-refundable application fee. The NJEDA will not begin review of your application until the application fee has been received.

In addition, the NJEDA charges fees during the application, approval and closing process. These fees vary depending upon the product chosen to fit your needs and the complexity/size of the project.

Please select a payment method:

Payment by Check

Wire Payment

Check Instructions

Please make check payable to **NJEDA** and mail to the below address:

NJEDA
P.O. Box 990
36 West State Street
Trenton, NJ 08625-0990

Please include "HPRP app fee" as well as the applicant name and application number.