

# Historic Property Reinvestment Program

Sample Application



# Historic Property Reinvestment Program

The Historic Property Reinvestment Program is a \$50 million competitive tax credit program to leverage the federal historic tax credit program to support rehabilitation projects of identified historic properties.

## ELIGIBILITY

To receive tax credits through the Historic Property Reinvestment Program, a project must:

- Demonstrate that without the tax credit award, the rehabilitation project is not economically feasible.
- Prove that a project financing gap exists, and the tax credit award being considered for the project is equal to or less than the project financing gap.
- Not have commenced any construction or rehabilitation activity at the site of the rehabilitation project prior to submitting an application and will not commence any construction or rehabilitation activity until the execution of the Rehabilitation Agreement (with certain limited exceptions).
- Include business entity contributed equity of at least 20 percent of the total project costs; or 10 percent of the total project costs, if located in a government-restricted municipality.
- Meet minimum cost requirements where the cost of rehabilitation for the selected rehabilitation period cannot not be less than the greater of the adjusted basis of the structure or \$5,000.
- For a residential project, the structure must serve a residential rental purpose and also contain at least four dwelling units.
- Be a rehabilitation project.



**It is recommended that prior to beginning the application all applicants review the applicant checklist available at:**

**[www.njeda.gov/historic-property-reinvestment-program](http://www.njeda.gov/historic-property-reinvestment-program)**

# NJEDA Application Center Sign In Page

<https://programs.njeda.com/en-US/>

If this is the first time you are using this portal to apply for an NJEDA product, please click “Register” button on the top

NJEDA Application Center

Home | My Applications | English

→ Sign in | Register | Redeem invitation

If you are the first-time user, please click "Register" button on the top.

\* User name

\* Password

Remember me?

Sign in | Forgot your password?

If you have forgotten your password, simply click on the “Forgot your password?” button and follow the instructions. An email will be sent enabling you to reset. Please note that your Username will be included in the email you receive. Be sure to confirm that you are using the correct username when you sign in.

# How to Register Your Email Address

**1. Enter your email, username (can be the same as your email) and password.**

Passwords must contain characters from at least three of the following four classes: uppercase, lowercase, digit, and non-alphanumeric (special).

**2. Once information is filled in click “Register”**

NJEDA Application Center [Home](#) | [My Applications](#) | [English](#) | [Sign in](#)

[Sign in](#) | **Register** | [Redeem invitation](#)

**THIS IS NOT AN APPLICATION FOR NJEDA ASSISTANCE. THIS PAGE ALLOWS YOU TO CREATE A USER ACCOUNT THAT YOU WILL USE TO LOG IN TO NJEDA'S PRE-REGISTRATION AND/OR APPLICATION PORTAL.**

Register for a new local account

\* Email

\* Username

\* Password

\* Confirm password

[Register](#)

 PLEASE MAKE SURE TO WRITE-DOWN/  
SAVE YOUR USERNAME AND PASSWORD

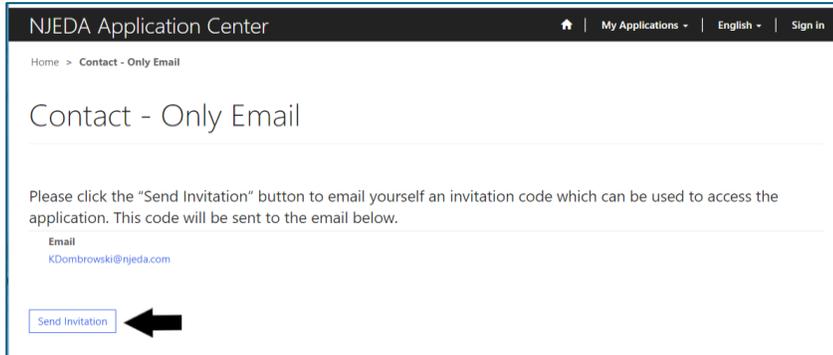
# If Your Email is Recognized By the Application Portal

If after clicking on “Register” you receive the following pop-up, that indicates that your email address is already recognized in our system, and you need to request an Invitation Code. Begin by clicking on the blue “OK” button.

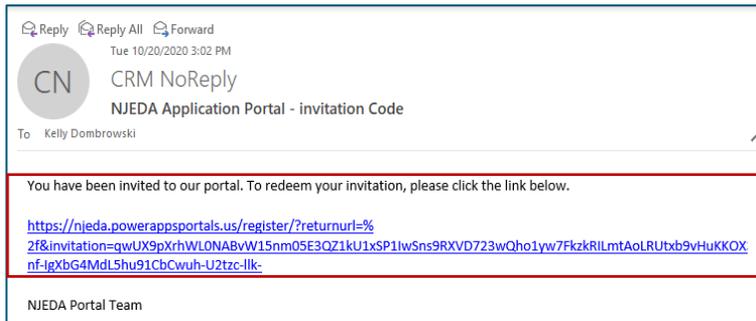
The screenshot shows the NJEDA Application Center registration page. At the top, there are navigation links for "Sign in", "Register", and "Redeem invitation". Below these is the heading "Register for a new local account". The registration form includes fields for "Email" (kdombrowski@njeda.com), "Username" (NJEDAKdombrowski), "Password", and "Confirm password", with a "Register" button at the bottom. A pop-up message from "programs.njeda.com" is overlaid on the form, stating: "The email address kdombrowski@njeda.com is already in our system. This may be because you have previously applied for other NJEDA programs. Please click OK to email yourself an invitation code which can be used to access this program application." A blue "OK" button is visible in the pop-up, with a black arrow pointing to it from the right.

# Redeeming An Invitation Code

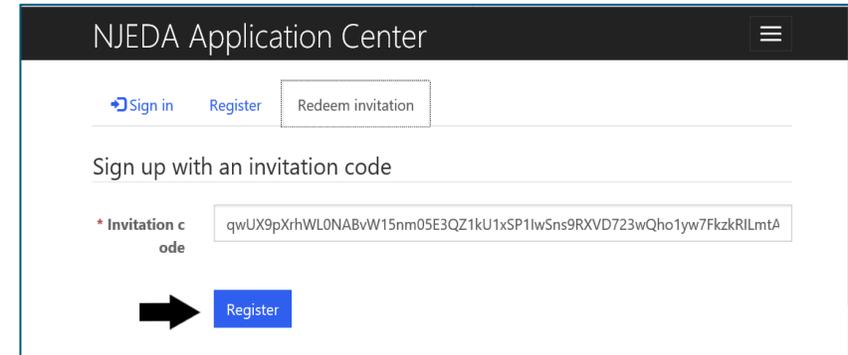
1. Click **SEND INVITATION** to email yourself an invitation code.



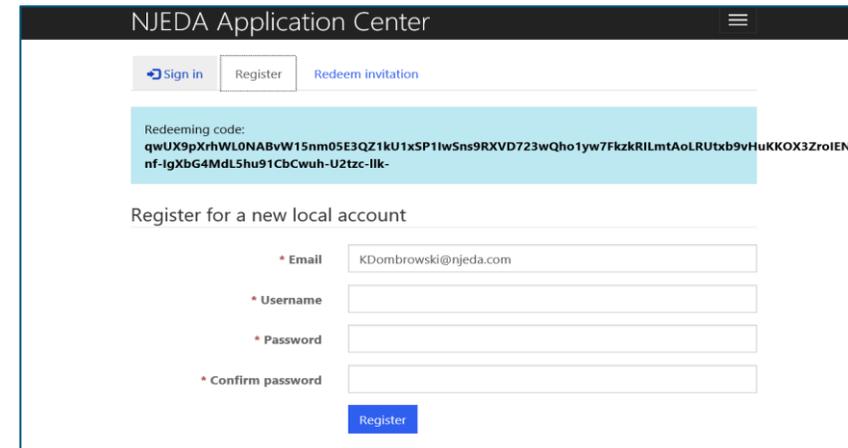
2. Check your email (including junk/spam) for an email from CRMNoReply. **Click the link in that email.**



3. The link from email should send you to this page on the portal. Make sure you are on the Redeem Information tab and **Click REGISTER**



4. **Fill in the information** requested and **click REGISTER** to complete the process. Remember this username and password – you will need it each time you access the application portal



# Setting Up Applicant Profile

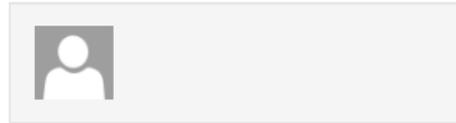
(If Your Email is New and Not Recognized by the Portal)

## Setting up your Profile

1. Once you click Register, you must enter “Your Information”
2. First Name, Last Name and Phone Number is Required
3. Confirm your email address is correct (this will be the primary way the NJEDA contacts your business)
4. Once complete, click “Update”

Home > Profile

## Profile



Profile

### Security

Change password

Change email



Manage external authentication

Please provide some information about yourself.

If you need language assistance, please send NJEDA your name, spoken language and telephone number to [languagehelp@njeda.com](mailto:languagehelp@njeda.com)

You must complete your profile before using the features of this website. ×

### Your information

First Name \*

Last Name \*

E-mail

Phone \*

Organization Name

Title

Web Site

Update

# Confirming Email

## Confirming Your Email

1. Once “Your Information” is complete, you will need to confirm your email.
2. Within the blue box, click on “Confirm Email”.
3. An email will be sent to the email address listed.
4. Go to your email and follow the instructions within the email.
5. You MUST confirm your email address.



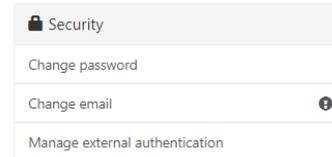
Once your email is confirmed please return to the portal to begin your application.

Home > Profile

## Profile



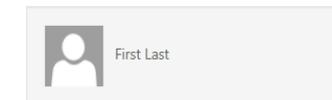
Profile



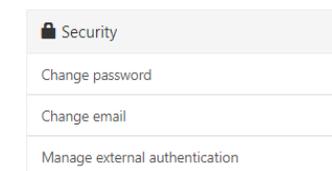
You must complete the email confirmation below before using the features of this site!

🔔 Your email requires confirmation.

📧 Confirm Email



Profile



## Confirm E-mail

📧 A Confirmation Email has been sent to your below email account. Please follow the instructions in the email to complete the registration.

E-mail

sample@sample.com

## Trouble Logging Into the Portal?



If you are having any issues creating a username or password, redeeming an invitation code, or generally logging into the portal, please call our **Customer Care line (844) 965-1125** and a representative will assist you.

# NJEDA Application Center Sign In Page

<https://programs.njeda.com/en-US/>

## NJEDA Online Application Center

Welcome to the NJEDA's online application for the NJEDA Online Application Center. We look forward to helping you as you grow your business in New Jersey!

Please DO NOT use Internet Explorer as your browser to complete this application as it is unsupported and may cause delays to your application processing. Alternative browsers include "Microsoft Edge," "Chrome," or "Safari." [Close](#)

Click here to begin application



- Small Business Improvement Grant Program
- Small Business Lease Grant Program
- Historic Property Reinvestment Application**
- Innovation Evergreen Fund – Tax Credit Auction
- Main Street Micro Business Loan
- NJ ZIP Purchaser Application
- NJ ZIP Vendor Application
- Asset Activation Grant Application
- COVID Phase 4 Grant Application

# Start Application

Read this information before starting your application.



Click **CREATE** button to start application.



NJEDA Application Center [Home](#) | [My Applications](#) | [English](#) | [SBLG Test](#)

Home > **Historic Property Reinvestment Application - Home**

## Historic Property Reinvestment Application - Home

The Historic Property Reinvestment Program focuses on historic preservation as a component of community development. The Program 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 \$3 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. 2010, c. 156 (N.J.S.A. 34:18-27) 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. 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. 13:18-15.12b 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 submitted pursuant to the "Pinelands Protection Act," P.L. 1978, 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. 13:18-15.12b et seq.) and which, before the enactment of P.L. 2010, c. 156 (N.J.S.A. 34:18-20) 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.-40:6-4, or located within a government-restricted municipality.

**"Archaeology 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 various 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 may 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.

**Please note, application pages are saved upon clicking "NEXT" and moving to the next section.**

It is **HIGHLY RECOMMENDED** that you complete the Eligibility Self-Assessment Tool on the NJEDA's Historic Property Reinvestment Program webpage to review basic eligibility criteria for the Program prior to starting an application.

It is also **HIGHLY RECOMMENDED** that you download a copy of the example application and applicant checklist from the NJEDA's Historic Property Reinvestment Program webpage to collect written responses and required documents prior to starting the online application form.

Applicants are advised to use file naming conventions that facilitate rapid application completeness review.

Uploaded file names should:

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

The Historic Property Reinvestment Program is a competitive program and all applications submitted will be evaluated based on pre-established evaluation criteria which will be used to allocate tax credits in circumstances where the request for tax credits exceeds the annual maximum cap established by the statute. The applicant is strongly encouraged to carefully review the entirety of the application and all attachments and confirm that all information submitted is accurate and complete prior to submission. No changes or additions will be permitted once application is submitted.

**Application fee paid as part of an application submission is non-refundable.**

In the event of any questions, please contact: C. Alicia Militad, Director, Historic Preservation, at [HistoricTaxCredit@njeda.gov](mailto:HistoricTaxCredit@njeda.gov).

**Create Historic Application**

Common Application ID	Applicant Organization Name	Applicant Entity Type	Federal Employer Identification Number (FEIN)	Created On	Application Status
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# Language Access

Provide a “Yes/No” response to indicate whether English is your primary language or select “Prefer Not to Answer”.

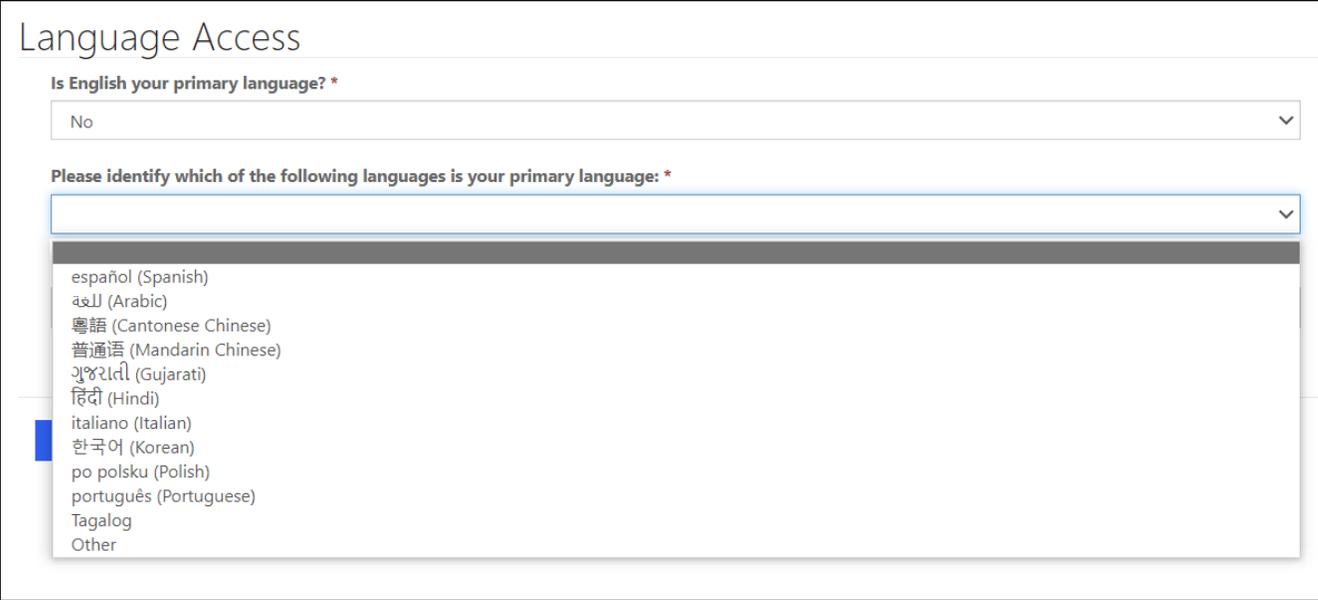


Language Access

Is English your primary language? \*

[Dropdown menu]

Free language assistance services are available to you by sending an email to [languagehelp@njeda.gov](mailto:languagehelp@njeda.gov).



Language Access

Is English your primary language? \*

No

Please identify which of the following languages is your primary language: \*

[Dropdown menu]

- español (Spanish)
- العربية (Arabic)
- 粵語 (Cantonese Chinese)
- 普通話 (Mandarin Chinese)
- ગુજરાતી (Gujarati)
- हिंदी (Hindi)
- italiano (Italian)
- 한국어 (Korean)
- po polsku (Polish)
- português (Portuguese)
- Tagalog
- Other

If the NJEDA needs to contact you regarding your application and you would be interested in having an interpreter in your native language, please answer “No” to “Is English your primary language?” and “Yes” to the question that appears.



If the NJEDA needs to contact you regarding your application, would you be interested in having an EDA provided interpreter in your native language? \*

[Dropdown menu]

Next

# Primary Point of Contact

Provide contact information for the Primary Point of Contact for this application

Is the Primary Point of Contact legally authorized to submit the application on behalf of the applicant company?\*

Is the Primary Point of Contact the CEO?\*

Is the Primary Point of Contact authorized to speak to the media on behalf of the company?\*

If the answer is **“No”** to any of the above questions, the applicant will have an opportunity to enter this information later in the application.

Primary Point of Contact

*Throughout the life of a project – from application, to approval, to closing, and to certification/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.*

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

**NOTE: It is highly recommended that the primary point of contact be the individual that is currently filling out this application.**

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Title \*

Email Address \*

Email Address Confirmed \*

*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.*

Phone Number and Extension (if available) \*

*To include an extension with your phone number, simply enter the phone number first, followed by the extension.*

Is the Primary Point of Contact legally authorized to submit this application on behalf of the applicant company? \*

*Legally authorized representative means one of the following:*

- by applicant's General Counsel or Chief Legal Officer (recommended); or
- for a corporation: a principal executive officer at least the level of vice president;
- for a partnership: a general partner;
- for a sole proprietorship: the proprietor;
- for a governmental entity: the contact person (business administrator, manager, mayor, etc.);
- for other than above: the person with legal responsibility for the application.

Is the Primary Point of Contact the Chief Executive Officer/equivalent officer for North America operations, or equivalent highest-ranking executive for the applicant company? \*

Is the Primary Point of Contact authorized to speak to the media on behalf of the applicant? \*

# Authorized Representative

If the Primary Point of Contact is NOT the Authorized Representative, the applicant will be prompted to fill out the contact information for the Authorized Representative.

The application must be submitted by an individual who is legally authorized to sign documents on behalf of the applicant company.

**NOTE:** If the Primary Point of Contact is the Authorized Representative you will not see this page.

Please type your full address into the “Street Address 1” box (include city, state, etc.) until the correct full address appears in the dropdown menu underneath, then click on the correct address.

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.*

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Title \*

Email Address \*

Email Address Confirmed \*

Phone Number and Extension (if available) \*

*To include an extension with your phone number, simply enter the phone number first, followed by the extension.*

Authorized Representative Address

Country \*

Street Address 1 \*

*Please continue typing out your full address (include city, state, etc.) until the correct address appears in the dropdown.*

Street Address 2

*Suite, Apt, Floor, etc.*

City \*

State / Province \*

Zip / Postal Code \*

# Chief Executive Officer/Owner/Equivalent

If the Primary Point of Contact does not hold this role, please provide the contact information for the CEO, owner, or equivalent highest-ranking executive for the applicant company. →

**NOTE:** If the Primary Point of Contact is the CEO, owner, or equivalent highest-ranking executive you will not see this page.

### Chief Executive Officer/Owner/Equivalent

*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.*

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Title \*

Email Address \*

Email Address Confirmed \*

Phone Number and Extension (if available) \*

*To include an extension with your phone number, simply enter the phone number first, followed by the extension.*

### Chief Executive Officer/Owner/Equivalent Address

Country \*

Street Address 1 \*

*Please continue typing out your full address (include city, state, etc.) until the correct address appears in the dropdown.*

Street Address 2

*Suite, Apt, Floor, etc.*

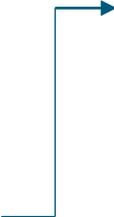
City \*  State / Province \*  Zip / Postal Code \*

# Consultant Information

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

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

If **YES**, you will be prompted to fill out additional contact information for the Consultant.



Consultant Information

*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

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Company \*

Title \*

Email \*

Email Confirmed \*

Phone Number

Provide a telephone number

Is the Consultant a Registered Governmental Affairs Agent? \*

# 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.

## Would you like to designate a Legal Counsel Contact ?

If **YES**, you will be prompted to fill out additional contact information for the Legal Counsel.



**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

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Company \*

Title \*

Email \*

Email Confirmed \*

Phone Number \*

Provide a telephone number

Is the Legal Counsel a Registered Governmental Affairs Agent? \*

# Accountant Information

NJEDA often works with an applicant company's internal or external accountant to confirm information included in the application and support on project certification and ongoing compliance requirements.

**Would you like to designate an Accountant Contact?**

If **YES**, you will be prompted to fill out additional contact information for the Accountant.



Accountant Information

*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

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Company \*

Title \*

Email \*

Email Confirmed \*

Phone Number

Provide a telephone number

# Media Contact

Please indicate if the applicant organization would like designate a Media contact to communicate with a NJEDA representative.

If YES, you will be prompted to fill out additional contact information for the Media Contact.

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

Salutation

First Name \*

Middle Initial

Last Name \*

Suffix

Company \*

Title \*

Email \*

Email Confirmed \*

Phone Number

Provide a telephone number

# Applicant Organization (1/3)

Please provide information about the company that is applying for assistance.

### Applicant Organization

*In this section, we are collecting information about the primary applicant for this program. 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.*

**Applicant Organization Name \***

*The full name of your registered legal entity. This name should match the name on your formation documents. If you are not sure of your legal entity name, please visit <https://www.njportal.com/DOR/BusinessNameSearch/Search/BusinessName>.*

**Applicant Doing Business As (DBA)**

*Does your business operate under a different name?*

**Certificate of Alternate Name**

*Please provide a Certificate of Alternate Name issued by Division of Revenue and Enterprise Services if you have one. Copies can usually be found on the state business records website [Division of Revenue & Enterprise Services: Business Records Service \(njportal.com\)](https://www.njportal.com/DOR/BusinessNameSearch/Search/BusinessName).*

Document	Files
Certificate of Alternate Name	<input type="button" value="Add Files"/>

**Applicant Entity Type \***

*What is the ownership structure of the applicant?*

**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? \***

**Date Established \***

*Please make sure this date matches the date on your entity's formation documents. MM/DD/YYYY*

### Mailing Address

**Country \***

**Street Address 1 \***

*Please continue typing out your full address (include city, state, etc.) until the correct address appears in the dropdown.*

**Street Address 2**

**City \***

**State / Province \***

**Zip / Postal Code \***

# Applicant Organization (2/3)

## Upload applicant formation documents.\*

Formation documents can include Articles of Incorporation, Articles of Organization, Certificate of Incorporation, or Certificate of Trade Name.

Applicant Country of Incorporation/Formation \*

United States

Applicant State of Incorporation/Formation \*

Please upload any formation documents for the Application Organization

Documentation to verify applicant entity's name – must provide company formation documents that relate to the entity applying (Articles of Incorporation, Articles of Organization, Certificate of Incorporation, Certificate of Trade Name (filed at county clerk's office-for sole proprietors))

- **Sole Proprietor:** Provide a [Certificate of Trade Name](#) (filed with the county clerk)
- **LLC:** Provide a [Certificate of Formation](#) if applicable and / or [Operating Agreement](#) if applicable
- **Corporation:** Provide a [Certificate of Incorporation and Bylaws](#)
- **NonProfit:** Provide a [Certificate of Incorporation and Bylaws](#)
- **Out of State:** If your entity was formed out of state but operates within the State of New Jersey, you must file a [Certificate of Authority](#) when registering the business in New Jersey and provide that certificate.

Document	Files
Formation Document(s) *	<a href="#">Add Files</a>

Applicant Federal Employer Identification Number (FEIN) \*

The 9 digit Federal Tax ID number of your organization.

Applicant New Jersey Tax ID Number \*

Applicant Organization's Phone Number and Extension \*

To include an extension with your phone number, simply enter the phone number first, followed by the extension.

Applicant Organization's Website

Please provide a high-level, 2-3 short paragraph description of the applicant. This may include the type of business you are involved in, your company's mission statement, the markets or customer base the company serves, and any other information about your business that the NJEDA should understand to review your application. \*

Provide a high-level description of the applicant company.

\* Required documentation

# Applicant Organization (3/3)

Click the magnifying glass to launch the NAICS search window.



Lookup records

Search

Choose one record and click Select to continue

Name	NAICS	NAICS Code	NAICS Sub	NAICS Sector	National	National Code	Second	Industry	Industry Code	Industry Id
<input type="checkbox"/> 111110 - Soybean Farming	Soybean Farming	111110	Crop Production	Agriculture, Forestry, Fishing and Hunting	Soybean Farming	111110	111100	Olseed and Grain Farming	AGRI	5
<input type="checkbox"/> 111120 - Olseed (except Soybean) Farming	Olseed (except Soybean) Farming	111120	Crop Production	Agriculture, Forestry, Fishing and Hunting	Olseed (except Soybean) Farming	111120	111100	Olseed and Grain Farming	AGRI	5

Select Cancel Remove value

Please be sure the NAICS code identified is the same code that is listed on your most recent business tax filings.

## Upload NJ Tax Clearance Certificate.\*

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.

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

**IF YES** The NJEDA will need to collect additional information from you if your entity is involved in religious activities or is religiously affiliated.

For a copy of the Religious Activity Questionnaire form [CLICK HERE](#).\*

NAICS

North American Industry Classification System (NAICS) Code \*

Search

Please select the magnifying glass to launch the NAICS search window. In the upper right hand of the window there is a search bar. In the search bar, you may enter your NAICS code, the type of business you are, or the industry in which your business operates. If your search does not return a result, please try additional terms that describe your business until you return a result.

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](#).

Tax Clearance Certificate

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

Document	Files
Tax Clearance Certificate Document(s) *	<input type="button" value="Add Files"/>

Certificates may be requested through the State of New Jersey's online [Premiere 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. [CLICK HERE](#) for instructions on how to secure your tax clearance certificate.

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

Yes

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

Religious Affiliation Form

The NJEDA will need to collect additional information from you if your entity is involved in religious activities or is religiously affiliated. Please download the religious activity questionnaire form [DOWNLOAD HERE](#), and upload the completed form below.

Document	Files
Religious Affiliation Form *	<input type="button" value="Add Files"/>

Prior NJEDA Assistance

Has the applicant, or any related entities, previously received NJEDA assistance? \*

I certify that the firm is not in default with any other program administered by the State of New Jersey. \*

Previous Next

\* Required documentation

# Cannabis Questionnaire

Cannabis Questionnaire

Has the applicant applied for or been issued a license, including a conditional license, from the New Jersey Cannabis Regulatory Commission (NJ-CRC) to operate as a cannabis cultivator, cannabis manufacturer, cannabis wholesaler, cannabis distributor, cannabis retailer, or cannabis delivery service; or does the applicant employ or intend to employ, or is the applicant itself, a certified personal use cannabis handler to perform work for or on behalf of a cannabis establishment, distributor, or delivery service? \*

If the applicant is a property owner, developer, or operator of a project: is the property being used or intended for use, in whole or in part, (1) by or to benefit a cannabis cultivator, cannabis manufacturer, cannabis wholesaler, cannabis distributor, cannabis retailer, or cannabis delivery service, (2) to employ a certified personal use cannabis handler to perform work for or on behalf of a cannabis establishment, distributor, or delivery service, (3) by a person or entity that has applied or intends to apply to the New Jersey Cannabis Regulatory Commission (NJ-CRC) for a license to operate as a cannabis cultivator, cannabis manufacturer, cannabis wholesaler, cannabis distributor, cannabis retailer, or cannabis delivery service or has applied for certification to be, or intends to employ, a certified personal use cannabis handler to perform work for or on behalf of a cannabis establishment, distributor, or delivery service? \*

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**New Jersey State law prohibits certain cannabis licensees and certified personal use cannabis handlers' employers from receiving or continuing to receive most financial incentive awards.**

# Additional Applicant Organization Details

Please identify the applicant's headquarters address and any other addresses for the applicant.

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?

**IF YES,** applicants will see an upload section below where they will be asked to download, complete, and then upload form [HP-AR-a22](#).

**Please upload Applicant Permits And Approvals**  
Please complete and upload Applicant Permits and Approvals Form [HP-AR-a22](#) to show 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 interest in. Document must include Name of Permit, Department Issuing Permit, Permit Type, Permit Number (if available), and Status of Permit (anticipated or received).

Document	Files
Permits and Approvals *	<input type="button" value="Add Files"/>

Please provide information on permit and approvals to the best of your current ability. Permits and approvals do not need to be finalized by the time of application submission. If your application is selected for further consideration, you will have the opportunity to provide missing and/or pending details regarding permits and approvals.

Please provide information on permit and approvals to the best of your current ability. Permits and approvals do not need to be finalized by the time of application submission. If your application is selected for further consideration, you will have the opportunity to provide missing and/or pending details regarding permits and approvals.

Upload organization chart and other materials that provide a summary description of the applicant organization and ownership structure.\*

### Additional Applicant Organization Details

Applicant Organization's Headquarters Address

Organization's Headquarters Country \*  
United States

Organization's Headquarters Address line 1 \*  
Enter a location  
Please continue typing out your full address (include city, state, etc.) until the correct address appears in the dropdown.

Organization's Headquarters Address line 2  
Suite, Apt, Floor, etc.

Organization's Headquarters City \*      Organization's Headquarters State \*      Organization's Headquarters Zip Code \*

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

Does the applicant have or anticipate a prospective future address? \*

**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. \***  
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.

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

Document	Files
Organization Chart & Other Materials *	<input type="button" value="Add Files"/>

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.

\* Required documentation

# Co-Applicant Organization (1/2)

Please identify there is an entity that will be applying as a Co-Applicant.

**IF YES**, at least one Co-Applicant must be created.

**IF YES**, the applicant organization will be prompted to “+ Create” a Co-Applicant record to record the information required of any Co-Applicant applying with this application.

“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.

### Co-Applicant Organization

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

**+ Create**

Name ↓	Co-Applicant Organization Name	Co-Applicant Doing Business As (DBA)	Co-Applicant Entity Type
--------	--------------------------------	--------------------------------------	--------------------------

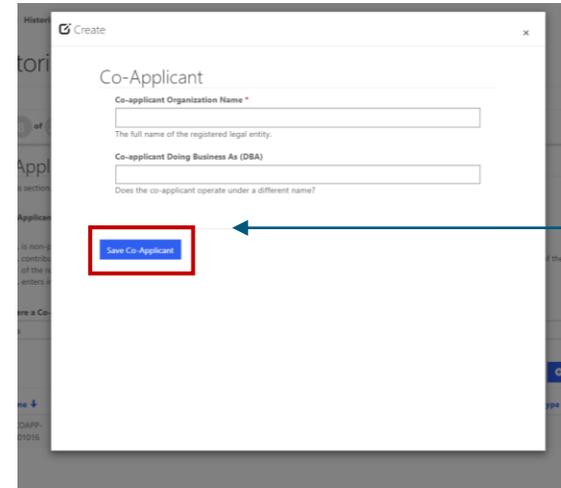
# Co-Applicant Organization (2/2)

Upon clicking the “ + Create” button the applicant will see a pop-out to continue with the information for the Co-Applicant.

Additional required co-applicant information including but not limited to the co-applicant’s Contact Information, Organizational Details, required documentation, permits and approvals, development subsidies, etc.

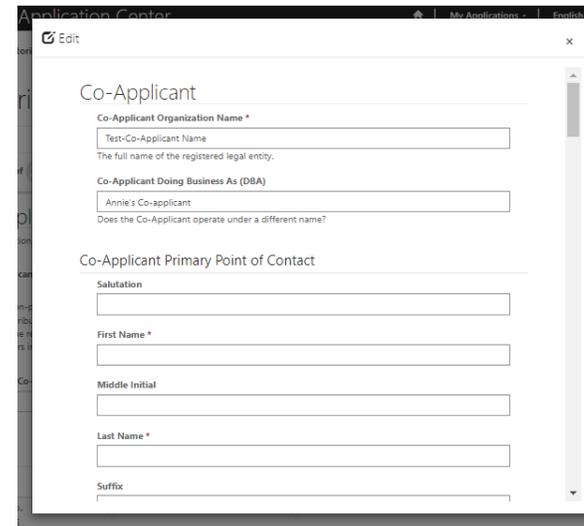
## Required documentation for the Co-applicant

- Participation Agreement
- Formation documents for the Co-Applicant
- New Jersey Tax Clearance Certificate (if applicable) from the [State of New Jersey’s online Premier Business Services \(PBS\) portal](#)
- [Religious Affiliation Form](#) (if applicable)
- [Co-applicant Permits and Approvals](#) (if applicable)
- [Co-applicant's Legal Questionnaire](#)
- Co-Applicant Organizational Chart and Other Materials



The screenshot shows a 'Create' pop-up window titled 'Co-Applicant'. It contains three input fields: 'Co-applicant Organization Name \*' (with a subtext 'The full name of the registered legal entity.'), 'Co-applicant Doing Business As (DBA)', and a checkbox labeled 'Does the co-applicant operate under a different name?'. A blue 'Save Co-Applicant' button is highlighted with a red box. A blue arrow points from the text on the right to this button.

After an applicant selects “Save Co-Applicant”, the pop-up will re-load and more information will be requested.



The screenshot shows an 'Edit' pop-up window titled 'Co-Applicant'. It contains several input fields: 'Co-Applicant Organization Name \*' (with 'Test-Co-Applicant Name' entered), 'Co-Applicant Doing Business As (DBA)' (with 'Annie's Co-applicant' entered), and a checkbox labeled 'Does the Co-Applicant operate under a different name?'. Below these is a section for 'Co-Applicant Primary Point of Contact' with fields for 'Salutation', 'First Name \*', 'Middle Initial', 'Last Name \*', and 'Suffix'. A blue arrow points from the text on the right to the top of this form.

# General Project Information (1/4)

In this section we are looking for general information regarding the proposed project.



Identify the proposed project address.



Add at least ONE block and lot to move forward.



General Project Information

Project Name \*

Historic Property Name(s) \*

This name should match all historic designation documents.

Please provide a 1-2 paragraph description of the scale and scope of the proposed project. \*

Character limit: 1,000

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

Project Location

Project Address

Address Line 1 \*  Address Line 2

Zip \*  City \*  State \*

Please enter block and lot number(s) for project site.

Block ↓	Lot
There are no records to display.	

# General Project Information – Project Location (2/4)

Is the project located in any of the following areas?  
(Select all that apply)



The NJEDA has provided a 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.

After selecting the “Print” button, please insert the Applicant and Project Names where it says “Criteria Report” and save the file with the correct names included.

Is this project located in any of the following areas? \*

- Qualified Incentive Tract
- Government Restricted Municipality
- A City of the First Class
- Within a 1/2 mile radius of the center point of a NJDOT Transit Village
- Not Applicable

Please upload a copy of NJEDA mapping tool report

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.

After selecting the “Print” button, please insert the Applicant and Project Names where it says “Criteria Report” and save the file with the correct names included.

Document	Files
Mapping Tool Report *	<input type="button" value="Add Files"/>

Please identify the selected Rehabilitation Period \*

What are the proposed future uses of the project? \*

Residential Units

Will this project consist of any newly constructed residential units?

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

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”?

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

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

Adjusted Basis of Structure

The adjusted basis for the structure can be calculated by taking the cost of the property (excluding land) plus or minus adjustments to basis. Increases to basis include capital improvements, legal fees incurred in perfecting title, zoning costs, etc. Decreases to basis include deductions previously allowed or allowable for depreciation. Additional guidance on how to calculate the adjusted basis can be found [here](#) under information for “substantial rehabilitation test”.



## [LINK TO NJEDA MAPPING TOOL](https://njeda.maps.arcgis.com/apps/w ebappviewer/index.html?id=64479fe5b ae742389757aa79f4bab642)

<https://njeda.maps.arcgis.com/apps/w ebappviewer/index.html?id=64479fe5b ae742389757aa79f4bab642>

# General Project Information – Residential Units (3/4)

Will this project consist of any newly constructed residential units? (If the project use is Commercial, this question will not appear)

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

**IF NO**

**IF YES, 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?**

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

Yes

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? \*

**IF YES, provide a narrative and upload rehabilitation activity.**

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

Please provide the NJEDA with supporting documentation evidencing the above order and the rehabilitation completed. 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

Document	Files
Rehabilitation completed *	<input type="button" value="Add Files"/>

Residential Units

Will this project consist of any newly constructed residential units?

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

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"?

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

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

Adjusted Basis of Structure

The adjusted basis for the structure can be calculated by taking the cost of the property (excluding land) plus or minus adjustments to basis. Increases to basis include capital improvements, legal fees incurred in perfecting title, zoning costs, etc. Decreases to basis include deductions previously allowed or allowable for

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

**IF NO, but construction or Rehabilitation activity was still conducted by an entity other than the applicant or an affiliate of the applicant, applicant will be asked to upload Rehabilitation activity here.**

Was the Construction or Rehabilitation activity conducted by an entity other than the applicant or an affiliate of the applicant? \*

Yes

Please upload documents evidencing the construction or rehabilitation activity that has commenced at the site.

Document	Files
Rehabilitation Activity *	<input type="button" value="Add Files"/>

# General Project Information – Transformative Projects (4/4)

Are you applying under the Transformative Project?

**IF YES, you will see additional questions.**  
**IF NO, you will move on to the next page.**

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.

### 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

Does the project meet the definition of Transformative Project? \*

Yes

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

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

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

# Project Scoring Criteria

## The scoring committee 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

## 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 be eligible 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

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# 1. Historical Significance of Resource

The first section will be Historic Significance of Resource.

Required documentation on Property's Significance and Historic Fabric/Integrity is required here.

Identify the level of historic significance.

Upload Historical Evidence or Significance Site Photos-- All PHOTOS are to be placed in a single document. PDF ONLY

Please select all historical designations.

- National Register
- New Jersey Register
- Pinelands Commission
- Certified Local Government

Depending on your historical designation, another follow-up set of questions will appear, including information on historic districts, if applicable.



### 1. Historic Significance of Resource

Applicant Organization Name: ShazHistoric	Project Location: 196 Willoughby, Montville, NJ, 07005
Project Name: Test	Historic Property Name: Test

**Property's Significance and Historic Fabric/Integrity**  
*Upload documentation that describes and discusses the level of significance of the qualified or transformative property in its current status.*

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 narrative should also address integrity of historic fabric and 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?

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 historic significance and level of integrity.

If the property is individually listed in the NJ and/or National Register/s of Historic Places, the applicant may use and upload significance section of the application. If the property is listed in the NJ and/or National Register/s of Historic Places as part of a historic district, and the nomination includes specific information regarding the integrity of the project building, then the applicant may use the significance section of the nomination.

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

Document	Files
Property's Significance and Historic Fabric Document(s) *	<input type="button" value="Add Files"/>

Level of historic significance as identified within the historic resource designation \*

Historical Evidence or Significance Site Photos  
*All photos to be placed into a single document. PDF only.*

Document	Files
Significance Site Photos *	<input type="button" value="Add Files"/>

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/identify/gis.htm>.

Please Note: A Determination of Eligibility (DOE), Certification of Eligibility (COE), or SHPO Opinion issued by the NJ Historic Preservation Office or the National Park Service does NOT meet the requirement for prior identification. When looking at designations in DEP's "LUCY: NJ's Cultural Resources GIS Online Map Viewer", double check the map's legend to confirm that if the property is marked in the map, it shows as "listed" in either the National Register and/or the New Jersey Register.

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>.

Read-only

# 2. Imminent Threat of Historic Resource

In this section we will ask a variety of questions and depending on the how the applicants answers, they will be prompted with follow-up questions and supporting documentation requests.

- 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)?
- Is there significant damage to structural components such as foundation, roof rafters, load bearing walls, columns and/or beams?
- Has the building been fully vacant for at least 1 continuous year (without utilities)?
- Is there encroachment in the immediate vicinity that is believed to pose an immediate or near future threat to the historic resource?

## 2. Imminent Threat of Historic Resource

<b>Applicant Organization Name:</b> Annie's Castle	<b>Project Location:</b> 12324 main st, Aberdeen, CA, 00601
<b>Project Name:</b> Annie Historic School House 2	<b>Historic Property Name:</b> Annie Historic School House 2

**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

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). \*

Attach photographs, as needed to show current building envelope condition.  
Applicant must include a photo key map showing damage to all of the Building Envelope components identified, detailing location and direction of all photographs included.

Document	Files
Photos of Current Building Envelope Condition(s) *	<a href="#">Add Files</a>

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

Yes

Please describe the damage to structural components \*

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? \*



All PHOTOS are to be placed in a single document. PDF ONLY

# 3. Project Concept and Team (1/6)

**⚠ A requirement under the Historic Property Reinvestment program is that all projects must submit a set of drawings and specifications that have been prepared by a professional meeting the professional qualifications for an architectural historian or historic architect in the Secretary of the Interior's Standards and Guidelines for Archeology and Historic Preservation.**

**Drawings must be submitted in PDF format and must be to scale.**



**Specifications must be submitted in PDF format.**



### 3. Project Concept and Team

<b>Applicant Organization Name:</b> ShazHistoric	<b>Project Location:</b> 196 Willoughby, Montville, NJ, 07005
<b>Project Name:</b> Test	<b>Historic Property Name:</b> Test

Does the applicant have a set of drawings and specifications that clearly show planned alterations or new construction, prepared by or in consultation with a professional meeting the qualifications for a historic architect or architectural historian? \*

Yes

**Please upload Drawings.**  
*Drawings 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.*

*Drawings must be submitted in PDF Format and must be to scale.*

Document	Files
Drawings *	<a href="#">Add Files</a>

**Please upload Specifications.**  
*Specifications 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.*

*Specifications must be submitted in PDF Format.*

Document	Files
Specifications *	<a href="#">Add Files</a>

# 3. Project Concept and Team (2/6)

Download and complete Project Permits and Approvals Form [HP-AR-a28](#) to show all required local, State, and Federal government permits and local planning and zoning board approvals that have been issued for the rehabilitation project or will be required to be issued pending resolution of financing.



**Please upload Permits And Approvals**  
Please complete and upload Project Permits and Approvals Form [HP-AR-a28](#) to show all required local, State, and Federal government permits and local planning and zoning board approvals that have been issued for the rehabilitation project or will be required to be issued pending resolution of financing. Document must include Name of Permit, Department/Agency Issuing Permit, Type of Permit, and Status of Permit (Pending, Received, Anticipated).

Document	Files
Permits And Approvals *	<a href="#">Add Files</a>

Please provide information on permit and approvals to the best of your current ability. Permits and approvals do not need to be finalized by the time of application submission. If your application is selected for further consideration, you will have the opportunity to provide missing and/or pending details regarding permits and approvals.

**HISTORIC PROPERTY REINVESTMENT PROGRAM**

Name of Project: \_\_\_\_\_ Date: \_\_\_\_\_

Historic Name of Property: \_\_\_\_\_

**Project Permits 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 rehabilitation project or will be required to be issued pending resolution of financing.

**Example**

Name of Permit:	Demolition Permit	Type of Permit:	Municipal
Entity Issuing Permit:	City of Anytown, Building Department	Status:	Anticipated

1.

Name of Permit:	_____	Type of Permit:	_____
Entity Issuing Permit:	_____	Status:	_____

2.

Name of Permit:	_____	Type of Permit:	_____
Entity Issuing Permit:	_____	Status:	_____

Document must include Name of Permit, Department/Agency Issuing Permit, Type of Permit, and Status of Permit (Pending, Received, Anticipated).

# 3. Project Concept and Team (3/6)

## Upload Anticipated Construction Schedule

“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 costs of acquisition of land and buildings.

## Upload Project Cost Summary (MS Excel format only) - [Form HP-AR-a13](#)

Provide a narrative\* description of the business entity and relevant project team members’ experience, including examples showing demonstrated history of successful completion of projects of similar size and scope.

\*Narrative must identify key team members, such as project manager and designer of record and include information on experience and qualifications of project team leaders as it relates to their expected role/responsibilities within the team for the proposed project.

**Upload Anticipated Construction Schedule.**  
*Construction schedule shall show project milestones and all project phases, if applicable, in accordance with the selected rehabilitation period.*

Document	Files
Construction Schedule *	<input type="button" value="Add Files"/>

**Total Cost of Rehabilitation (Total Project Costs) \***

“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 costs of acquisition of land and buildings.

**Upload Form HP-AR-a13 Project Cost Summary**  
[Click here](#) to download Form HP-AR-a13 Project Cost Summary.  
*MS Excel format only.*

Document	Files
HP-AR-a13 Project Cost Summary *	<input type="button" value="Add Files"/>

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. \*

Narrative must identify key team members, such as project manager and designer of record and include information on experience and qualifications of project team leaders as it relates to their expected role/responsibilities within the team for the proposed project.

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

Do you have an Architectural Historian Consultant under contract at the time of this application? \*

# 3. Project Concept and Team (4/6)

The applicant's project team must include at least a Historic Architect or an Architectural Historian Consultant.

Upload Form [HP-SC3-4b](#) Resume for the Historic Architect

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. \*

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

Yes

Historic Architect Name \*

Address Line 1 \* Address Line 2

State \* City \* Zip Code \*

Historic Architect Phone \* Historic Architect Email \*

Historic Architect Website (if applicable)

Please upload Form [HP-SC3-4b](#) Resume for the Historic Architect.  
[Click here](#) to download Form HP-SC3-4b Resume.

Document	Files
<a href="#">HP-SC3-4b Resume for Historic Architect *</a>	<a href="#">Add Files</a>

Do you have an Architectural Historian Consultant under contract at the time of this application? \*

No

# 3. Project Concept and Team (5/6)

Upload a narrative of the proposed project approach.

If the project has not applied for the Federal Historic Preservation Tax Credit

– Upload Form [HP-SC3-5](#) Detailed Description of Rehabilitation Work.

If the project has applied for the Federal Historic Preservation Tax Credit and received prior approval of application from DEP’s NJ Historic Preservation Office under parts 1 and 2 of the Historic Preservation Certification application, that information will be entered here.

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

Yes

Has the project received prior approval of application from the DEP’s New Jersey Historic Preservation Office under Parts 1 and 2 of the Historic Preservation Certification application pursuant to 36 CFR 67.3? \*

Yes

Upload approval letter or documents evidencing the project has received prior approval of application from the DEP’s New Jersey Historic Preservation Office under Parts 1 and 2 of the Historic Preservation Certification application pursuant to 36 CFR 67.3.

Document	Files
DEP Approval Letter *	<a href="#">Add Files</a>

Upload a copy of the approved NPS Form 10-168a (Historic Preservation Certification Application, Part 2- Description of Rehabilitation).

Document	Files
NPS form 10-168a *	<a href="#">Add Files</a>

Please provide a narrative describing the team’s approach to the project.  
*The narrative must include information on the project’s compliance with the Secretary of the Interior’s Standards for Rehabilitation (including consideration of potential archaeology for projects with ground disturbance), and consideration on potential CCE and schedule challenges. Additionally, the narrative must include a breakdown of proposed uses and associated square footage of the rehabilitation project.*

Document	Files
Project Approach *	<a href="#">Add Files</a>

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

Yes

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

No

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

Document	Files
HP-SC3-5 Detailed Description of Rehabilitation Work *	<a href="#">Add Files</a>

# 3. Project Concept and Team (6/6)

**⚠ A requirement under the Historic Property Reinvestment Program is that for all projects including ground disturbance, an Archeologist must be under contract at the time of application.**



Upload Form [HP-SC3-4b](#) Resume for Archeologist.



Upload project team organizational chart.



**Will this project include ground disturbance? \***

Yes

Ground disturbance encompasses any activity that compacts or disturbs the ground within the boundary of the project site. Such activities include, but are not limited to: excavation, trenching, bulldozing, scraping, plowing, grading and soil compaction.

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

Yes

**Archeologist Name \***

\_\_\_\_\_

**Address Line 1 \*** \_\_\_\_\_ **Address Line 2** \_\_\_\_\_

**City \*** \_\_\_\_\_ **Zip Code \*** \_\_\_\_\_ **State \*** \_\_\_\_\_

**Archeologist Phone \*** \_\_\_\_\_ **Archeologist Email \*** \_\_\_\_\_

**Archeologist Website (if applicable)**

\_\_\_\_\_

**Please upload Form HP-SC3-4b Resume for Archeologist.**  
[Click here](#) to download Form HP-SC3-4b Resume.

Document	Files
Form HP-SC3-4b Resume for Archaeologist *	<a href="#">Add Files</a>

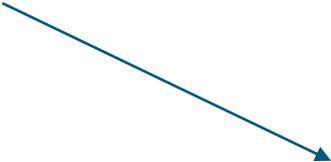
**Please upload a project team organizational chart.**

Document	Files
Project Team Org Chart *	<a href="#">Add Files</a>

# 4. Site Control

**⚠️ A requirement under the Historic Property Reinvestment program is that the applicant must have site control or certainty of obtaining site control as demonstrated by an agreement that will provide site control, at time of application.**

**Applicant must upload documentation evidencing site control.**



### Site Control

<b>Applicant Organization Name:</b> Annie's Castle	<b>Project Location:</b> 12324 main st, Aberdeen, CA, 00601
<b>Project Name:</b> Annie Historic School House 2	<b>Historic Property Name:</b> Annie Historic School House 2

**Does the Applicant own or have lease of entire site? \***

No

**Does the Applicant own or have partial lease of the Site? \***

No

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

Yes

**Upload documentation evidencing site control**  
*This can include a formal agreement with owner, right of entry, and/or letter of intent.*

Document	Files
Evidencing site control *	<a href="#">+ Add Files</a>

\*Questions on this page dynamic based on the applicant's answers.

# 5. Positive Impact on Surrounding Neighborhood

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

If applicable, upload 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.

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

Positive Impact on Surrounding Neighborhood

<b>Applicant Organization Name:</b> Annie's Castle	<b>Project Location:</b> 12324 main st, Aberdeen, CA, 00601
<b>Project Name:</b> Annie Historic School House 2	<b>Historic Property Name:</b> Annie Historic School House 2

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

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

Please upload letter(s) of support

Document	Files
Written letter(s) of support *	<a href="#" style="border: 1px solid #ccc; border-radius: 5px; padding: 5px 10px;">Add Files</a>

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

# Project Economics (1/3)

Upload Form HP-AR-a21, Project Budget Form

Upload documentation supporting each funding source listed in the Sources section of Project Budget Form (HP-AR-a21)



Create

### Development Subsidy Info

Name of Granting Body \*

Anticipated or Committed \*

Date \*

Amount of Development Subsidy \*

Save

## Project Economics

**Applicant Organization Name:** ShazHistoric  
**Project Location:** 196 Willoughby, Montville, NJ, 07005

**Project Name:** Test  
**Historic Property Name:** Test

Please upload Form HP-AR-a21, Project Budget Form.  
Include all project costs and funding sources for the proposed project. [Click here](#) to download Form HP-AR-a21, Project Budget Form.

Document	Files
Form HP-AR-a21, Project Budget Form *	<input type="button" value="Add Files"/>

Please upload documentation supporting each funding source listed in the Sources section of Project Budget Form (HP-AR-a21).

Document	Files
Funding source supporting document *	<input type="button" value="Add Files"/>

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

Yes

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
There are no records to display.			

**Total Amount of Development Subsidies**

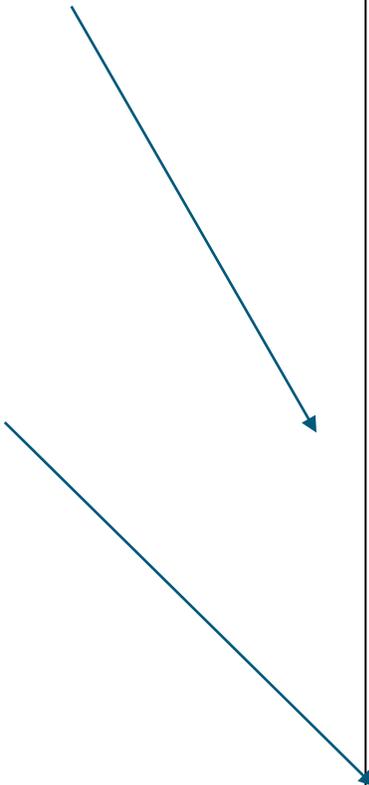
0.00

# Project Economics (2/3)

## Upload copy of the Market and/or Feasibility Study.

## Upload Project Pro Forma.

- Suggested template
- Upload in Excel only



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 that 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**

Document	Files
Market and/or Feasibility Study *	<a href="#">Add Files</a> HP-AR-a31-Certifications-and-Acknowledgements (1).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**

Document	Files
Project Pro Forma *	<a href="#">Add Files</a> Test Document.docx

# Project Economics (3/3)

Upload 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.

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

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

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.  
Further information regarding Equity can be found in the Program's Rules, which can be [viewed here](#).

Document	Files
Source of Equity *	<input type="button" value="Add Files"/>

Please attach financial information of the rehabilitation project and any other documentation demonstrating economic and commercial viability pursuant to N.J.A.C. 19:31-26.3(a).  
*This shall include all phases, including but not limited to any State or local financial assistance for the project, projected reasonable and appropriate return on investment based on the business entity's equity, net margin and cash yield.*

Document	Files
Rehabilitation Project *	<input type="button" value="Add Files"/>

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

Document	Files
Additional Information	<input type="button" value="Add Files"/>

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

# Diversity, Equity, and Inclusion

**In this section, we would like more information about the diversity of your company. The NJEDA will use this information for tracking purposes only.**



Diversity, Equity, & Inclusion

*In this section, we would like more information about the diversity of your company. The NJEDA will use this information for tracking purposes only.*

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

- Minority
- Women
- Veteran
- LGBTQ
- Disabled
- None of the above
- 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
- Prefer not to answer

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).

- Question is not applicable
- Prefer not to answer

# Prevailing Wage and Affirmative Action Requirements

## 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 \(nj.gov\)](https://www.nj.gov/labor/workforce-development/).

If you have any questions about these requirements, please contact NJEDA by sending an email to [HistoricTaxCredit@njeda.com](mailto: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 Regarding Affirmative Action/Prevailing Wage & Green Buildings Form

Please note, Applicant/Co-Applicant receiving a tax credit award will be required to complete a Notice Regarding Affirmative Action/Prevailing Wage & Green Buildings Form prior to the execution of the Rehabilitation Agreement with the Authority. <https://www.njeda.com/wp-content/uploads/2022/03/NOTICE-REGARDING-AA-AND-PW-2021-002.pdf>.

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

Previous

Next

# Authorized Representative for Certifications

The New Jersey Economic Development Authority requires that the Legal Questionnaire, Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3, Acknowledgments of Applicant, and Certification of Applicant, are to be completed and signed by one of the following:

- by applicant's General Counsel or Chief Legal Officer (recommended); or
- for a corporation: a principal executive officer at least the level of vice president;
- for a partnership: a general partner;
- for a sole proprietorship: the proprietor;
- for a governmental entity: the contact person (business administrator, manager, mayor, etc.);
- for other than above: the person with legal responsibility for the application.

If you are not an Authorized Representative you will be prompted to Upload the Certifications page, which will require you to download and then upload signed copies of the acknowledgments and certifications listed above (Slide 48).

If you are an Authorized Representative you will be prompted to fill out these pages throughout the application (Slides 49-53).

**Applicant Representation**

Is the individual filling out this application employed by the entity that is applying for the program? \*

Yes

Is the individual filling out this application one of the following: \*

- by applicant's General Counsel or Chief Legal Officer (recommended); or
- for a corporation: a principal executive officer at least the level of vice president;
- for a partnership: a general partner;
- for a sole proprietorship: the proprietor;
- for a governmental entity: the contact person (business administrator, manager, mayor, etc.);
- for other than above: the person with legal responsibility for the application.

Yes

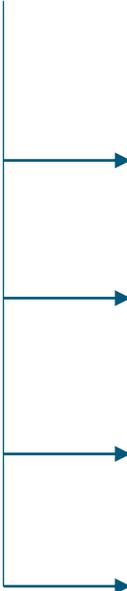
Please indicate which of the following best describes the individual filling out this application? \*

Applicant's General Counsel or Chief Legal Officer  
Contact for a Government Entity  
General Partner  
Principal Executive Officer at or above the minimum level of Vice President  
Sole Proprietor  
Person with Legal Responsibility for the Application  
None of the above

# Upload Certifications

Only if the individual filling out the application is not an Authorized Representative will the applicant see this page.

Here you will be prompted to download and then upload signed copies of the acknowledgments and certifications listed above.



### Upload Certifications

The New Jersey Economic Development Authority requires that the following information be completed and signed by one of the following:

- by applicant's General Counsel or Chief Legal Officer (recommended); or
- 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.

Because you have identified that you are not one of the individuals listed above, it is required that you download each of the following forms listed below and have someone who meets this definition for the applicant company fill out and sign each of the forms. Once the forms have been completed and signed, please attach them at the end of this application, along with any other necessary application attachments.

Your application for assistance will not be reviewed until the NJEDA has each of the signed forms from someone who is legally authorized to make these representations on behalf of the applicant.

- [Legal Questionnaire](#)
- [Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3](#)
- [Acknowledgments of Applicant](#)
- [Certification of Application](#)

Document	Files
Legal Questionnaire *	<a href="#">Add Files</a>
Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3 *	<a href="#">Add Files</a>
Acknowledgments of Applicant *	<a href="#">Add Files</a>
Certification of Application *	<a href="#">Add Files</a>

# Legal Questionnaire

If the individual filling out the application is an Authorized Representative then they will proceed through the application's:

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

[Click here](#) to download a full copy of the legal questionnaire.

### New Jersey Economic Development Authority Legal Questionnaire

**Applicant Name:** ShazHistoric

Please note "Applicant" includes individuals and all types of entities applying for and receiving NJEDA financial assistance, incentives or contracts, including but not limited to: for-profit businesses, non-profit organizations, municipalities, counties, colleges, universities and other institutions of higher learning.

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.

**Note that this form has recently been modified.**  
Please review this form in its entirety prior to providing any responses or certifications.

**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. This includes (however is not limited to):

- entities or persons having an ownership interest in the applicant of 30% or greater;
- entities in which an applicant holds an ownership interest of 30% or greater and are either named in the application and/or agreement or will receive a direct benefit from the financing, incentive or other agreement with NJEDA; and
- other 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 NJEDA.

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

**RELEVANT AFFILIATES**

In accordance with the above, please identify any individuals or entities that hold a 30% or more ownership in the applicant:

Are there any individuals or entities that hold a 30% or more ownership interest in the applicant? \*

**Affiliate Owners**

[ADD AFFILIATE OWNERS](#)

Entity / Individual ↑	Ownership Percentage (%)
There are no records to display.	

**Applicant-Owned Affiliates**

In accordance with the above, please identify any entities in which the applicant holds a 30% or more interest, and are either named in the application and/or agreement, or will receive a direct benefit from the financing, incentive, or other agreement with NJEDA.

[ADD APPLICANT-OWNED AFFILIATES](#)

Entity ↑	FEIN # - if applicable
There are no records to display.	

**Other Affiliates**

In accordance with the above, please identify any other entities not already identified that are either named in the application and/or agreement, or that will receive a direct benefit from the financing, incentive, or other agreement with NJEDA.

[ADD OTHER AFFILIATES](#)

Entity ↑	FEIN # - if applicable
There are no records to display.	

**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 identified Affiliates of Applicant, been found or conceded or admitted to being guilty, liable or responsible in any Legal Proceedings, 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. \***

**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. \***

- Laws banning or prohibiting discrimination or harassment in the workplace.
- Laws prohibiting or banning any form of forced, slave, or compulsory labor.
- 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.
- Securities or tax laws resulting in a finding of fraud or fraudulent conduct.
- Environmental laws, where the monetary award, penalties, damages, etc. amounted to more than \$1 million.
- Laws banning anti-competitive dumping of goods.
- Anti-terrorist laws.
- Criminal laws involving commission of any felony or indictable offense under State or Federal law.
- Laws banning human rights abuses.
- Laws banning the trade of goods or services to enemies of the United States.

**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 or individual lawsuits alleging violations under the New Jersey Law Against Discrimination. \***

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) status of the matter (e.g. Pending Dismissal following Settlement, Dismissed following Motion, etc.).

**Please Note:** 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.

**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.

Document	Files
Legal Questionnaire Addendum	<a href="#">Add Files</a>

**CERTIFICATION OF LEGAL QUESTIONNAIRE AND AUTHORIZATION TO RELEASE INFORMATION**

This certification shall be signed as follows:

- by applicant's General Counsel or Chief Legal Officer (recommended); or
- 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.

**Legal Questionnaire Electronic Signature \***

**Title \***

# Certification of Non-Involvement in Prohibited Activities in Russia or Belarus

## CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS

Program Name: **Historic Property Reinvestment Program**

Applicant Name: **ShazHistoric**

Applicant DBA: **Test**

Pursuant to N.J.S.A. 52:32-60.1, et seq. (P.L. 2022, c.3) any person or entity (hereinafter 'Applicant') that seeks to be approved for or continue to receive an economic development subsidy from the New Jersey Economic Development Authority must complete the certification below indicating whether or not the Applicant is engaged in prohibited activities in Russia or Belarus. If the New Jersey Economic Development Authority finds that an Applicant has made a certification in violation of the law, it shall take any action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

**The NJEDA recognizes that based on a pending legal issue announced on the Department of the Treasury's website [State of NJ - Department of the Treasury - Division of Administration](#), the Department is not currently maintaining a list of entities engaged in prohibited activities in Russia or Belarus. As a result, applicants who are not engaged in prohibited activities in Russia or Belarus may wish to select Option A or applicants who may be engaged in prohibited activities may wish to select Option C and provide a description and/or explanation in the box below.**

### Certification

I, the undersigned, have read and reviewed the Department of the Treasury's List: (<https://www.nj.gov/treasury/administration/pdf/RussiaBelarusEntityList.pdf>) of entities engaged in prohibited activities in Russia or Belarus, and having done so certify (must select one appropriate response below and complete the Authorized Signature section below): \*

**A. That the Applicant is not identified on the Department of the Treasury's list of entities engaged in prohibited activities in Russia or Belarus and is not engaged in prohibited activities in Russia or Belarus. OR**

**B. That I am unable to certify as to "A" above because the Applicant is identified on the Department of the Treasury's list of entities engaged in prohibited activities in Russia or Belarus. OR**

**C. That I am unable to certify as to "A" above because the Applicant, though not identified on the Department of the Treasury's list of entities engaged in prohibited activities in Russia or Belarus, is engaged in prohibited activities in Russia or Belarus. A detailed, accurate and precise description of the Applicant's activity in Russia or Belarus is set forth below.**

**If applicable, provide Additional Certification of Federal License**

I, the undersigned, certify that Applicant is currently engaged in activity in Russia and/or Belarus, but is doing so consistent with federal law and/or regulation and/or license. Provide a detailed description of how the Applicant's activity in Russia and/or Belarus is consistent with federal law, or is within the requirements of the federal license.

# Program Specific Certification and Acknowledgements

## Historic Property Reinvestment Program Required Application Certifications and Acknowledgements

Eligibility for financial assistance under the Historic Property Reinvestment Program is determined based on all information, required attachments, and schedules submitted as part of this application. Any changes in the status of the proposed project from the facts presented within the submitted application 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 certify the applicant has no outstanding obligations to any bank, loan company, corporation, or individual not mentioned in this application and attachments. \***

**I certify that the applicant shall not cease to operate the project during the compliance period without prior written consent of the Authority. \***

**I acknowledge that the Authority may obtain information including, but not limited to, a credit bureau check, covering the applicant and/or its principals, stockholders, and/or investors. \***

**I acknowledge that the Authority may provide information submitted by or on behalf of the applicant to the New Jersey Department of Environmental Protection. \***

**I acknowledge that 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. \***

**I acknowledge that 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. \***

**I acknowledge 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, the undersigned authorize representative of the applicant, certify that any contractors or subcontractors that will perform work at the redevelopment project: (1) 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.); (2) have not been debarred by the Department of Labor and Workforce Development from engaging in or bidding on Public Works Contracts in the State; and (3) possess a tax clearance certificate issued by the Division of Taxation in the Department of the Treasury. \***

# Applicant Certifications

## Applicant Certifications

Eligibility of financial assistance by the New Jersey Economic Development Authority (NJEDA) is determined by the information presented in this application. Any changes in the status of the proposed project from the facts presented herein could disqualify the project. Only Board Members of the governing board of the particular program for which you are applying, by resolution, may take action to determine project eligibility and to authorize the issuance of funds.

**I, Test Teat, THE UNDERSIGNED, BEING DULY SWORN UPON MY OATH SAY:**

**I affirm, represent, and warrant that the information contained in this application and in all associated attachments submitted herewith is to the best of my knowledge true and complete and that the funding applied for herein is not for personal, family, or household purposes. \***

**I understand that if such information is willfully false, I am subject to criminal prosecution under N.J.S.A. 2C:28-2 and civil action by the NJEDA which may at its option terminate its financial assistance. \***

**I authorize the New Jersey Department of Law and Public Safety to verify any answer(s) contained herein through a search of its records, or records to which it has access, and to release the results of said research to the NJEDA. \***

**I authorize the NJEDA to provide information submitted to it by or on behalf of the applicant to any bank or State agency which might participate in the requested financing with the NJEDA. \***

**I certify my understanding that an electronic signature of this Application and any Approval Letter or Agreement shall be a binding on the parties. \***

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# CEO 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.

If there is a Co-Applicant, they must upload a CEO Certification for the Co-Applicant as well.

### CEO 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.

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

**Please upload the CEO Certification for the Applicant**

Document	Files
CEO Certification Form *	<a href="#">Add Files</a> Test Document.pdf

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.

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

**Please upload the CEO Certification for the Co-Applicant**

Document	Files
CEO Certification for the Co-Applicant *	<a href="#">Add Files</a>

[Click here](#) to download a copy of the CEO Certification for this program.  
[Click here](#) to download a copy of the CEO Certification for the Co-Applicant (if applicable)

# Fee Acknowledgement

## Fee Payment (non-refundable)- Payment Breakdown:

**For qualified projects with rehabilitation (eligible) costs up to \$10 Million:**  
\$2,000

**For qualified projects with rehabilitation (eligible) costs over \$10 Million:**  
\$7,000

**For transformative projects:**  
\$18,000

**Please be advised that checks must be postmarked by the application deadline and the check must be received by NJEDA within 14 calendar days of this deadline. Hand-delivered checks must be received by the application deadline. Payment by credit card, if possible, is recommended.**

## Fee Payment (non-refundable)- Payment by check or credit card

### Payment by 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 08925-0990

Please include "HPRP app fee" as well as applicant name and common application number in the memo of the check.

## Fee Payment Method

There is Fee Amount 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 closing and certification process which are detailed at the EDA product page. These fees vary depending upon the product chosen to fit your needs and the complexity/size of the project.

Select form of payment: \*

Credit Card

Mail Check

Previous

Next

### Payment by Credit Card:

Applicant will be redirected to payment page:

Select form of payment: \*

Previous Go To Payment Page

**\*The NJEDA will not begin review of your application until the application fee has been received.**

# Electronic Signature

Your application will be submitted upon hitting the "Submit" Button.

### Electronic Signature

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 agree to be bound by electronic signatures \*

I am an Authorized Signer for this organization and I accept the above terms and conditions \*

Full Name \*



[Generate a new image](#)  
[Play the audio code](#)

 Enter the code from the image

\*The NJEDA will not begin review of your application until the application fee has been received.

# Submission Confirmation Page

The submission confirmation page will list the Applicant’s application confirmation number. All future application communication will be sent to the email provided in the application.

Click to “Return to Homepage” to the portal homepage.



Historic Property Reinvestment Program Application

**Thank you for your interest in the Historic Property Reinvestment Program Application. We appreciate your patience while NJEDA reviews this application.**

Your application confirmation number is: **CAPP-00035976**

Any communications regarding the status of this application will be sent to:

Dear : **SHAZMIN M Test**

Thank you for your application to the Historic Property Reinvestment Program (HPRP). The NJEDA Team will now begin our completeness review of your application. The Authority may also choose to commence legal and underwriting reviews; however, scoring items may not be reviewed and will not be scored by the Program’s Selection Committee until after the application deadline has passed. As a result, applicants may not receive any communication from the HPRP Team until after the application window has closed.

We request that as our team works on the review of applications under the current round, you refrain from directly contacting any member of NJEDA’s Historic Preservation team with any questions regarding this application or the HPRP. Instead, we ask that any questions be sent via email to [HistoricTaxCredit@njeda.gov](mailto:HistoricTaxCredit@njeda.gov). All questions received along with responses will be publicly posted on our website at <https://www.njeda.gov/historic-property-reinvestment-program>.

A copy of your application is available for download from the HPRP application homepage. We recommend printing it (and this page) for your records.

Thank you again for your interest in Historic Preservation and the Historic Property Reinvestment Act.

To learn about other NJEDA programs, visit [njeda.gov](http://njeda.gov)

Thank You,  
NJEDA

[Return to homepage](#)



<https://www.njeda.gov/historic-property-reinvestment-program/>



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609.858.6767

**NJEDA**