

REQUIRED DOCUMENTS
Introduction- no documentation required
<p>Primary Point of Contact</p> <ol style="list-style-type: none"> 1. Name, title, email, phone, address 2. Confirmation if Primary Point of Contact is authorized to submit the application, is the CEO or equivalent of the applicant company, and/or is authorized to speak to media on behalf of the company. <p><i>Throughout the life of an incentive 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.</i></p> <p><i>Please provide contact information for the primary point of contact within the applicant company that NJEDA will keep updated on the status of this application.</i></p> <p>NOTE: It is highly recommended that the primary point of contact be the individual that is currently filling out this application. If the primary point of contact is different than the individual that is currently filling out the application, the primary point of contact individual should also create a username and password on this application portal to receive all future correspondence.</p>
<p>Authorized Representative (if applicable)</p> <ol style="list-style-type: none"> 1. Name, title, address, phone, email <p><i>This application includes company representations and certification and must be submitted by an individual who is legally authorized to sign documents on behalf of the applicant company.</i></p>
<p>CEO or Equivalent (if applicable)</p> <ol style="list-style-type: none"> 1. Name, title, address, phone, email 2. <i>As part of the application and approval process, the owner, CEO, or equivalent highest-ranking officer of the applicant company will need to certify that the information included in this application is accurate and that the award of tax credits is a “material factor” in the applicant’s decision making. If the Primary Point of Contact does not hold this role, please provide the contact information for the owner, CEO, or equivalent highest-ranking executive for the applicant company</i>
<p>Consultant (if applicable)</p> <ol style="list-style-type: none"> 1. Name, address, phone, email 2. Registered Governmental Affairs Agent Registration Number (if applicable) <p><i>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</i></p>
<p>Legal Counsel (if applicable)</p> <ol style="list-style-type: none"> 1. Name, title, address, phone, email 2. Registered Governmental Affairs Agent Registration Number (if applicable) <p><i>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 applicable, please</i></p>

<p><i>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.</i></p>
<p>Accountant (if applicable)</p> <ol style="list-style-type: none"> 1. Name, title, address, phone, email <i>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 applicable, please provide the contact information for the applicant company's Accountant that will support on this project.</i>
<p>Media Contact (if applicable)</p> <ol style="list-style-type: none"> 1. Name, title, address, phone, email <i>NJEDA often works with an applicant company's public relations or media relations representatives on press releases and press inquiries regarding approved projects. If applicable, please provide the contact information for the applicant company's Media Contact that will support on this project.</i>
<p>Applicant Organization</p> <ol style="list-style-type: none"> 1. Legal Organizational Information (Name, entity type, location and date of formation) 2. Affirmation/declination if the applicant, or any person who controls the applicant or owns or controls more than 1% of the stock of the applicant, is an officer or employee of any agency, authority or other instrumentality of the State of New Jersey. 3. Affirmation/declination if the applicant, or any person who controls the applicant or owns or controls more than one percent of the stock of the applicant, applied for or received from the New Jersey Cannabis Regulatory Commission (NJ-CRC) either (a) a license to operate as a cannabis cultivator, cannabis manufacturer, cannabis wholesaler, cannabis distributor, cannabis retailer, or cannabis delivery service; or (b) a certification to perform work for or on behalf of a cannabis establishment, distributor, or delivery service. 4. Affirmation/declination 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? 5. Any formation documents for the applicant organization (upload) 6. FEIN, NJ Tax ID, headquarters address, phone 7. Religious activities or religious affiliations (if applicable) Religious Activities Form 8. Provide a high-level, 2-3 short paragraph description of the applicant company. 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. 9. North American Industry Classification System (NAICS) Code

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

10. NJ Tax Clearance Certificate from the NJ Division of Taxation (**upload**)

[Directions for securing your 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.

11. Past assistance from NJEDA (if applicable)

Additional Applicant Organizational Details

1. Organization address
2. Mailing address, if different than other (if applicable)
3. Prospective future address (if applicable)
4. Applicant permits and approvals or obligations and responsibilities with which the business entity is associated with or has interest in- name of permit, department issuing the permit, type of permit, status. (if applicable)

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

5. Organizational chart and other materials to provide a summary description of the type of organization and its ownership structure (**upload**)

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.

Co-Applicant (if applicable)

1. Co-applicant Contact Information (primary point of contact, title, address, phone, email)
2. Description of Co-Applicant's role in the project
Please describe any details that may help the NJEDA understand the co-applicant's role in the project, including but not limited to the capital, real property, or services that directly affect and serve anticipated residents, tenants, or customers of the tenants of the project that the co-applicant will be contributing. Narrative must clearly state how the co-applicant will provide services related to the project that will directly affect and serve the anticipated residents, tenants, or customers of the tenants of the rehabilitation project.
3. Description of the long-term participation agreement between the co-applicant and business entity
4. Copy of participation agreement that specifies the co-applicant's participation in the rehabilitation project (**upload**)

5. Description of Co-applicant's need to receive tax credits
6. Co-applicant Organizational Details- entity type, location and date of formation
7. Any formation documents for the co-applicant organization (**upload**)
8. Co-applicant Federal Employer Identification Number (FEIN) and NJ Tax ID Number
9. Headquarters' address, phone, website
10. Mailing address, if different from other (if applicable)
11. NJ Tax Clearance Certificate from the NJ Division of Taxation (**upload**)
Certificates may be requested through the [State of New Jersey's online Premier Business Services \(PBS\) portal](#). Under the Tax & Revenue Center, select Tax Services, then select Business Incentive Tax Clearance. If the affiliate's account is in compliance with its tax obligations and no liabilities exist, the Business Incentive Tax Clearance can be printed directly through PBS.
[Directions for securing your tax clearance certificate](#)
12. 2-3 paragraph description of the co-applicant's organization
Include information on the Co-applicant's relationship with the Applicant. Describe the Co-applicant's mission, activities the Co-applicant is involved in, the markets or client base the Co-applicant serves, and any other information about the Co-applicant that the NJEDA should understand to review your application.
13. Past assistance for the NJEDA (if applicable)
Be as specific as possible in detailing the programs through which you received NJEDA assistance, the facilities or projects associated with that assistance, the timeframes in which the assistance was provided, and the status of any awards or agreements.
14. Religious activity (if applicable)
[Religious Activities Form](#)
15. Co-applicant permits and approvals or obligations and responsibilities with which the business entity is associated with or has interest in (if applicable)
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 list all New Jersey Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury permits and approvals or obligations and responsibilities, with which the Co-applicant is associated with, or has an interest in. The list shall identify the entity that applied for or received such permits and approvals or have such obligations and responsibilities, such as by program interest numbers or licensing numbers.
16. Co-applicant permits and approvals or obligations and responsibilities with which the business entity is associated with or has interest in (if applicable)
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 list all New Jersey Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury permits and approvals or obligations and responsibilities, with which the Co-applicant is associated with, or has an interest in. The list shall identify the entity that applied for or received such permits and approvals or have such obligations and responsibilities, such as by program interest numbers or licensing numbers.

17. Co-applicant request or receipt of development subsidies for the rehabilitation project- name of granting body, anticipated or committed subsidies, date, amount of development subsidy. (If applicable)

Examples include but are not limited to State, Federal, or local grants; Foundation grants, PILOT agreements (Payment in Lieu of Taxes), etc.

18. Copy of the Co-applicant's [Legal Questionnaire](#)
19. Organizational chart and other materials to provide a summary description of the type of organization and its ownership structure **(upload)**
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 co-applicant team's ownership, structure, and roles.

Ownership

1. Individual or entity with a 10% or greater ownership of the company- Percentage of ownership stake, owner type, name, and address (if applicable)
2. Owner name, address, and percentage of ownership (if applicable)
3. Ownership- Three consecutive years of Personal Tax Return (if applicable) **(upload)**
4. Ownership- Personal Financial Statement (if applicable) **(upload)**

Use this [Personal Financial Statement template](#).

General Project Information

1. Project Name
2. Historic Property Name(s)
This name should match all historic designation documents
3. Provide 1-2 paragraph description of scale and scope of the proposed project.
4. Projected number of permanent employees at the rehabilitation project at completion
5. Project Location (Address and Census Tract, Block, and Lot)
The Census Tract is the number for the project location, not the borrower's company address (unless it is the same address). The number must be in the following format 34XXXXXX.XX the first two digits are the State of NJ code of 34, the next three digits will be the county code, and the remaining six digits, XXXX.XX, will be the census tract code. Census Tract numbers can be obtained by typing the project's address into the FFIEC locator at <https://geomap.ffiec.gov/FFIECGeocMap/GeocodeMap1.aspx>.
6. Project location determination- Qualified Incentive Tract, Government Restricted Municipality, A City of the First Class, Within a ½ mile radius of the center point of an NJDOT Transit Village, Not Applicable.
7. Mapping tool report **(upload)**
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.
8. Selected Rehabilitation Period
9. Number of distinct phases included in the project
10. For Transformative Project Criteria, applicant must confirm that they want to apply as a Transformative Project, that the project meets the definition of Transformative Project, and

that the project will generate substantial increases in State revenues through increased business activity within the surrounding area. (if applicable)

12. Study or report showing the project will generate substantial increases in State revenues through increased business activity within the surrounding areas **(upload)** (if applicable)
13. Applicant must confirm that the property has received a Determination of Eligibility from the Keeper of the National Register of Historic Places prior to January 7, 2021. (if applicable)

Historic Significance- Scoring Criteria

1. Property's Significance- Documentation that describes and discusses the level of significance of the qualified or transformative property in its current status **(upload)**
Is it the only or one of a limited number of representative example(s) of a type/period/feature of historic significance, or is it the only existing known property associated with a significant historic figure, historical event, period, or historical feature? The document could be either a new narrative providing the requested information or an existing document, such as a copy of a National Register Nomination form, or other documentation previously prepared to evaluate the property's historic significance. Review will be guided by the Criteria for Evaluation as outlined in 36 CFR § 60.4, and N.J.A.C. 7:4-2.3
2. Historic Fabric/Integrity- Documentation that describes the historic fabric/integrity of the site **(upload)**
The narrative should answer at a minimum the follow questions: Does the site retain the ability to convey its historic significance? Are the aspects of integrity (location, design, setting, materials, workmanship, feeling, association) as outlined in the original designation remain? Do the most significant historic features, finishes and materials remain in place?
3. Level of historic significance as identified within the historic resource designation- National, State, Local, Not identified.
4. Provide a recommendation on level of significance with a narrative assessment that provides a clear justification for the recommendation if the level of significance was not identified as part of a previous designation. (if applicable)
5. Photographs and other materials that evidence for the historical significance of the site **(upload)**
All photos must be placed into a single document. PDF only. 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-SC3-5 – Detailed Description of Rehabilitation Work, as well as a key to photographs showing location and direction of all photographs included.
6. Historical Designations
To check if your property is located in the National or New Jersey Register of Historic Places, or has a Determination of Eligibility from the Keeper or the National Register, please visit New Jersey's Historic Preservation Office's Cultural Resources Geographic Information System "LUCY", which can be accessed from their website at: <https://nj.gov/dep/hpo/1identify/gis.htm>. Information regarding designation by the Pinelands Commission must be confirmed by the Commission. Contact information for the Pinelands Commission can be found at their website: <https://www.state.nj.us/pinelands/>. A list of New Jersey's Certified Local Governments can be found thru the National Park Service's Certified Local Governments page at: <https://www.nps.gov/subjects/clg/index.htm>.

7. Historic District (if applicable)
8. Name and Date of Designation of Historic District (if applicable)
9. National/NJ Nomination Documents (is applicable) **(upload)**
10. Pinelands or CLG proof of designation (if applicable) **(upload)**
11. Register Dates (if applicable)
12. National Historic Landmark by the Secretary of the Interior recognition and date recognized (if applicable)

Imminent Threat to Historic Resource- Scoring Criteria

1. Building Envelope- 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) (if applicable)
2. Photographs showing current building envelope condition **(upload)**
All photos must be placed into a single document. PDF only
3. Describe significant damage to structural components, such as foundation, roof rafters, load bearing walls, columns, and or/beams (if applicable)
4. Easily noticeable damage, 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. (if applicable)
5. Copy of structural report from a licensed structural engineer (if applicable) **(upload)**
6. Photographs, as needed to show current structural condition **(upload)**
All photos to be placed into a single document. PDF only.
7. Vacancy terms of structure (if applicable)
8. Brief narrative to convey nature of encroachment threat (if applicable)
9. Additional information (maps, photos, press articles, etc.) as needed **(upload)** (if applicable)

Project Concept and Team- Scoring Criteria

1. Full set of construction documents have been prepared in consultation with a professional meeting the professional qualifications for an architectural historian or historic architect.
2. Construction Drawings **(upload)**
Construction documents must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards. Construction drawings must be submitted in PDF Format and must be to scale.
3. Construction Specifications **(upload)**
Construction documents must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards. Construction specifications must be submitted in PDF Format.
4. Permits and Approvals (permit or approval, issuing entity, type of permit or approval, status)
Provide a list and status of all required local, State, and Federal government permits and local planning and zoning board approvals that have been issued for the redevelopment project or will be required to be issues pending resolution of financing.
5. Anticipated Construction Schedule **(upload)**
Construction schedule shall show all project phases, if applicable, in accordance with the selected rehabilitation period.
6. [Form HP-SC3-2](#), Approach to Schedule **(upload)**

Distinct phases set forth in the written architectural plans and specification and included in the construction schedule

7. Construction Cost Estimate (**upload**)

The construction cost estimate must be prepared by a qualified professional with experience preparing CCEs for projects addressing historic structures. The construction cost estimate for the rehabilitation project shall include, but is not limited to, all construction costs associated with the rehabilitation project, including but not limited to all phases of the selected rehabilitation period, cost breakdown by Construction Specification Institute MasterFormat Specification Standards 2018. The estimate shall include the total cost of rehabilitation and the cost of rehabilitation/eligible costs. Both eligible and non-eligible costs are to be clearly defined within the CCE. CCE must clearly identify all line item costs as eligible or non-eligible and include total amounts for eligible and non-eligible costs.

8. [Form HP-SC3-3](#), Approach to CCE (**upload**)

9. 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.

10. Total soft costs

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

11. Cost of rehabilitation or eligible costs

Eligible costs shall be all costs associated with the structural components, as defined by 26 CFR 1.48-1(e)(2), within the qualified property or transformative property, and any eligible soft costs associated with the rehabilitation project. Eligible costs shall not include any costs associated with an increase in total building volume. Eligible costs may include construction contingency and if so, must match the cost of rehabilitation (eligible costs) total number from NJEDA Form HP-AR-a13 Project Cost Summary.

Guidance for eligible soft costs: For applications submitted on or after January 1, 2023, soft costs incurred within 12 months prior to the date of application. For applications submitted prior to January 1, 2023, soft costs incurred within 24 months prior to the date of application.

12. [Form HP-AR-a13](#), Project Cost Summary (**upload**)

13. 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.

14. Historic Architect contact information (name, address, phone, email, website) (if applicable)

15. [Form HP-SC3-4b](#), Resume (if applicable) **(upload)**
16. Architectural Historian Consultant contact information (name, address, phone, email, website) (if applicable)
17. [Form HP-SC3-4b](#), Resume (if applicable) **(upload)**
**Please note, applicant must have either a Historic Architect or Architectural Historian Consultant, or both.*
18. Narrative of the proposed project approach that includes adequate consideration of the historic resource **(upload)**
Information shall be provided which fully addresses the requirements for compliance with the Secretary of the Interior's Standards for Rehabilitation and includes specific proposed treatment for interior and exterior historic fabric, materials, and spaces throughout the project. If the project includes ground disturbance, the project approach must clearly define how known, or previously unidentified archeological resources will be addressed if encountered during the course of the project.
19. Confirmation by the applicant that the narrative information provided above fully addressed requirements for compliance with the Secretary of the Interior's Standards for Rehabilitation.
20. Confirmation that the project applied for the Federal Historic Preservation Tax Credit (if applicable)
21. Confirmation that the project received prior approval of application from the DEP's New Jersey Preservation Office under Parts 1 and 2 of the Historic Preservation Certification application pursuant to 36 CFR 67.3. (if applicable)
22. 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. (if applicable) **(upload)**
23. Approved NPS Form 10-168a (Historic Preservation Certification Application, Part 2-Description of Rehabilitation). (if applicable) **(upload)**
24. [Form HP-SC3-5](#), Detailed Description of Rehabilitation Work (if applicable) **(upload)**
25. Ground Disturbance (if applicable)
26. Archeologist contact information (name, address, phone, email, website) (if applicable)
27. [Form HP-SC3-4b](#), Resume for Archeologist **(upload)** (if applicable)
**Please note, applicant must have an archeologist if project includes ground disturbance.*
28. Project team organizational chart **(upload)**
29. [Form HP-SC3-4a](#), Key Team Members **(upload)**
Include resumes (Form HP-SC3-4b Resume) for each team member if not previously identified as Architectural Historian, Historical Architect, or Archeologist, as they have been previously submitted.

Site Control- Scoring Criteria

1. Type of site control- own or lease of entire site, own or have partial lease of site, or have agreement with current owner for obtaining control of site.
2. Documentation evidencing site control **(upload)**
This can include a formal agreement with owner, right of entry, and/or letter of intent.

Positive Impact of Surrounding Neighborhood- Scoring Criteria

1. Narrative detailing how the project will fulfill an unmet neighborhood, municipal, and/or regional need.

2. 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 **(upload)** (if applicable).
3. Description how the redevelopment of the project site will grow the number of small businesses or attract employers to the municipality/region.

Project Elements

1. Proposed future use of the project (commercial, residential, both)
2. Residential units- newly constructed residential units, number of dwelling units, comply with "Fair Housing Act" (if applicable)
3. Narrative description of project that includes breakdown of uses and related square feet **(upload)**
4. Commencement of prior construction/rehabilitation at the site- narrative evidencing that the proposed construction or rehabilitation activity was limited to resolving a health, safety, or other hazard (if applicable)
5. Supporting documentation evidencing the order (building code or other official with jurisdiction over the site or rehabilitation project to correct a health, safety, or other hazard) and the scope of rehabilitation completed. (if applicable) **(upload)**
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 and, 3. The proposed construction or rehabilitation activity complies with the Secretary of Interior's Standards for rehabilitation 36 C.F.R. 67.7.
6. Projected number of construction employees to be employed on the rehabilitation project.

Project Economics

1. Funding Source(s)- Name, funding source type, description of funding source, proposed terms, funding amount
2. Documentation supporting the funding source **(upload)**
For applicant equity, this may be a bank statement for a private company. For publicly traded companies, the Authority will look to the Form 10-K and Form 10-Q that was provided earlier in the application. For bank financing, please provide commitment letters, term sheets, letters of interest, or other documentation evidencing the bank financing commitment.
3. Request/Receipt of development subsidies as defined by P.L. 2007, c.200 (N.J.S.A. 52:39-1)- Name of granting body, anticipated or committed, date, amount of development subsidy. (if applicable)
4. Market and/or Feasibility Study **(upload)**
The market and/or feasibility study for proposed use of the project site must be 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: Findings from the inspection of the site and surrounding neighborhood, research of comparable retail properties, analysis of the retail trade area demand, and consideration of general market factors and national trends in similar neighborhoods. This report should also include: 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, a Determination of the Demand and achievable rents for retail space

in the market, and the recommended absorption/lease-up schedule for the retail component based on the potential market demand as well as recognition of current and proposed competitive supply. The study should address positive features of the site as well as the challenging site influences should be addressed. New retail developments in the area should be listed as well as other demand drivers such as housing/population trends, cultural and entertainment projects in the vicinity, and the impact of the project on other residential and/or similar projects in the area (if any).

5. Project Pro Forma **(upload)**

Project pro forma in MS Excel only, including all formulas. 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. Please see suggested pro forma template here: [Suggested Pro Forma Template](#).

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

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

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

8. Narrative of prior similar projects completed and related financial information for these projects. **(upload)**

9. Financial information of the applicant entity, including but not limited to, 3 years business federal tax returns or CPA prepared financial statements and 3 years personal federal and New Jersey tax returns. **(upload)**

*If the applicant is a recently formed single purpose entity that is unable to provide the requested 3 years of tax returns, it is imperative that they provide this information for any and all affiliates or entities with an ownership interest in the business entity to evidence the applicant's professional and financial wherewithal to successfully completing the rehabilitation project. In such a case, please attach a list of all parties with ownership for which documentation has been provided elsewhere within the application and attach requested information for any party for which such information has not been previously provided within other sections of this application. Additionally, please contact program staff by sending an email to HistoricTaxCredit@njeda.com. **The e-mail MUST:** Have "UNDERWRITING" in the subject line, include project name and address within the body of the message, and include a contact name, email, and phone number of the person within the applicant's entity that would be best qualified to discuss the issue with and NJEDA underwriting team member.*

10. 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. **(upload)**

11. Tax credit monetization- provide a narrative of the financing structure, which must include a description of all the parties involved, the proposed timing of the tax credit(s) sale(s),

transfer(s), assign, or pledge(s), and confirmation that the sale proceeds meet the required minimum sales price as set by legislation. (if applicable) **(upload)**

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

12. Any other documentation demonstrating economic and commercial viability pursuant to N.J.A.C. 19:31-26.3(a). (if applicable) **(upload)**

13. Financial information of the rehabilitation project. **(upload)**

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

14. Provide a list of all project Soft Costs (type of soft cost, description, amount) associated with the rehabilitation project. Total must equal previously submitted total soft costs expense provide on the Project Concept and team page of the Application.
Type of Soft Cost: Real estate taxes, accounting, title/bond insurance, fixtures/equipment with a useful life of five years or less, financing, capitalized interest paid to third parties, and consultants include, but is not limited to, architect, archeologist, engineer, construction management, legal, etc. Fees include affordable housing, permitting, utility connection, etc. Real estate commissions and taxes, loan origination and closing costs, and freight and shipping delivery. "Other" must be specified by applicant within the description category. The description shall specify the exact type of soft cost, for example, 'consultant' shall include "architect", "engineer", etc. in the description category. "Other" must be specified by applicant within the description category.
15. Any additional information that may be considered useful for the Authority to complete its underwriting process. **(upload)**

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

Diversity, Equity, and Inclusion

1. Majority owner of the applicant organization self-identification (minority, woman, veteran, LGBTQ, disabled, none)
2. State of New Jersey certifications the applicant organization currently holds (SBE, DBE, MBE, WBE, VOB, DVOB, none)
3. Documentation evidencing your entity's certification (if applicable) **(upload)**
4. Describe whether your company's leadership team is made up of a diverse group of individuals. 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).
5. Describe whether your company's Board of Directors is made up of a diverse group of individuals. Provide as much detail as possible about the composition of your leadership

<p>team as it relates to groups that have been historically underrepresented (minority, woman, veteran, LGBTQ, disabled).</p> <ol style="list-style-type: none"> Describe any diversity initiatives, programs, or plans the applicant company has established. Documentation detailing diversity initiatives (if available). (upload) Primary language and need for interpreter (if applicable)
<p>Prevailing Wage and Affirmative Action Requirements</p> <ol style="list-style-type: none"> Applicant acknowledgements Notice Form <p>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.</p> <p>https://www.njeda.com/wp-content/uploads/2022/03/NOTICE-REGARDING-AA-AND-PW-2021-002.pdf</p> <p>Projects under the Historic Property Reinvestment Program are not subject to Green Building Construction Requirements.</p>
<p>The following sections of the application will vary depending on the answer provided to the previous question on whether the Applicant is also the Authorized Representative. All scenarios are provided here, dependent on the applicant's answer.</p>
<p>Authorized Representative for Certifications</p> <ol style="list-style-type: none"> Is the individual filling out this application employed by the company that is applying for the Tax Credit? If "yes", is the individual filling out this application one of the following: 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.); by a person with legal responsibility for the application? If "no", please to the section marked below If "yes", please indicate which of the following best describes the individual filling out this application: Principal Executive Officer/Vice President, General Partner, Sole Proprietor, Person with Legal Responsibility for the Application, or None of the Above. <ul style="list-style-type: none"> If "Person with Legal Responsibility for the Application, please describe If "no", please proceed to the section marked below
<p>Legal Questionnaire</p> <ol style="list-style-type: none"> Past Proceedings Pending Proceedings <p><i>If affirmative, you must provide the following information as an attachment to the application: (i) the case name and court/administrative agency (including jurisdiction and venue) in which such matters were tried or are pending; (ii) the charges or claims adjudicated or alleged; and (iii) a brief explanation of the circumstances giving rise to such matters. Also, for affirmative answers to question 1-10, please attach copies of document(s) reflecting the final resolution (e.g., final judgments, verdicts, plea bargains, consent orders, administrative findings, or settlement agreements). Note that an Applicant may refer to or attach specific provisions of a 10-K/Q or other filings with the U.S. Securities and Exchange Commission (SEC); however, the Applicant should be aware that different laws apply to disclosures to the Authority. This means that the Authority does not have the same types of materiality thresholds as the SEC. The Applicant is expected to supplement its SEC filings to ensure that all relevant</i></p>

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. (upload)*

3. Applicable Affiliates- Name of Affiliate (name or person) and Federal Employer Identification Number. (if applicable)

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

1. Certifications, pursuant to N.J.S.A. 52:32-60.1, et seq. ([P.L. 2022, c.3](#)) that 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 certification 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.

Acknowledgements of Applicant

Certification of Applicant

Certifications

1. [CEO Certification for the Applicant](#) (upload)
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.
2. [CEO Certification for the Co-Applicant](#) (if applicable) (upload)
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.

Fee Payment (non-refundable)- payment by check or wire payment

1. 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 application number.

2. Payment by Wire Instructions:

Bank Name- Wells Fargo

Bank Address- 50 East State St / Trenton, NJ 08625

ABA Number- 2100 00910 0456

Account Name- NJEDA Operating

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

If these wire instructions need to be confirmed by phone call, please contact Dawn Boszak, NJEDA Director of Accounting Services, at 609-858-6701.

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

If the applicant previously answered no to being the Authorized Representative, please see below.

Upload Certifications

The NJEDA requires that the following information be completed and signed by one of the following:

- 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 identified that you are not one of the individuals listed above, it is required that you download each of the four (4) forms listed below and have someone who meets this definition for the applicant company fill out and sign each of the forms.

a. Legal Questionnaire **(Upload)**

<https://www.njeda.com/1-njeda-legal-questionnaire-revd-2-3-2021/>

b. Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3 **(Upload)**

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

c. Acknowledgments of Applicant **(Upload)**

[Acknowledgments of Applicant](#)

d. Certification of Applicant **(Upload)**

[Certification of Applicant](#)

Certifications

1. [CEO Certification for the Applicant](#) **(Upload)**

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



Historic Property Reinvestment Program Application Checklist (revised 02/2023)

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.

2. [CEO Certification for the Co-Applicant](#) (if applicable) **(Upload)**

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.

Fee Payment (non-refundable)- payment by check or wire payment

1. 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 application number.

2. Payment by Wire Instructions:

Bank Name- Wells Fargo
Bank Address- 50 East State St / Trenton, NJ 08625
ABA Number- 2100 00910 0456
Account Name- NJEDA Operating

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

If these wire instructions need to be confirmed by phone call, please contact Dawn Boszak, NJEDA Director of Accounting Services, at 609-858-6701.

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

Electronic Signature

1. Applicant agreement to electronic signatures

End

Please keep a copy of confirmation page for your records.