

Construction Inflation Fund

Sample Application



Program Overview

The Construction Inflation Fund is a pilot program established to provide grants between \$500,000 and \$5 million for real estate development projects that have experienced increased construction costs and project funding gaps resulting from the COVID-19 pandemic.

| Eligible Projects | Eligible Applicants |
|---|---|
| <ul style="list-style-type: none">Commercial (including office) | <ul style="list-style-type: none">Small businesses* undertaking an eligible project in New Jersey that experienced a COVID-19 induced funding gap |
| <ul style="list-style-type: none">Manufacturing | |
| <ul style="list-style-type: none">Mixed-use (any residential portion must comply with the 20% reservation rule for low-and-moderate-income households required by per N.J.S.A 52:57D-329.9(b)) | <ul style="list-style-type: none">Must agree to a 50% developer fee deferral |
| <ul style="list-style-type: none">Must have a total project cost of <u>at least \$5 million</u> and a COVID-19 induced funding gap evidenced by related documentation (i.e. project budget, construction contracts, etc.) | |

Please note: Any warehouse uses included must be ancillary and in direct support of the site's eligible primary uses.

***As defined in the Coronavirus State and Local Fiscal Relief Funds final rules (31 CFR 35.3), a small business is a business or organization that:**

1. Has no more than 500 employees or, if applicable, the size standard in number of employees established by the Administrator of the Small Business Administration for the industry in which the business concern or organization operates, and
2. Is a small business concern as defined in section 3 of the Small Business Act (15 U.S.C. 632)



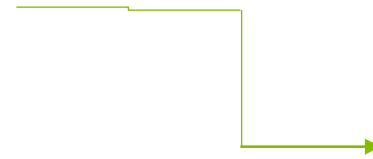
APPLICATIONS WILL OPEN ON AUGUST 17th, 2023 AT 10 AM EST


Welcome Page

Before beginning the application, please read through the information provided on the welcome page for the Construction Inflation Fund.

If you are seeking assistance in a language that is **not** English, please email languagehelp@njeda.gov.

Once ready click “Next” to begin the application.





Construction Inflation Fund

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Welcome: Construction Inflation Fund

Program Description

The Construction Inflation Fund is a pilot program established to provide grants for real estate development projects that have experienced increased construction costs and project funding gaps resulting from the COVID-19 pandemic.

Eligibility:

Eligible applicants are small businesses which are undertaking an eligible real estate project in New Jersey (as outlined below) that experienced a COVID-related funding gap.

Eligible Projects

Real estate projects that will be considered for Construction Inflation Fund grants:

- Commercial (including office)
- Manufacturing
- Mixed Use developments: any residential portion must comply with the 20% reservation for low- and moderate-income households required by N.J.S.A. 52:27D-329.9(b)

Please note: any warehouse uses included must be ancillary and in direct support of the site's eligible primary uses.

Eligible real estate development projects must be sized such as to have at least \$5 million of total project costs.

Eligible projects must have a COVID-19 induced funding gap evidenced by related documentation (i.e. project budget, construction contract, other agreements or contracts, etc.)

Language Assistance:

ATENCIÓN: si habla español, los servicios de asistencia lingüística, gratuitos, están disponibles para usted enviando un correo electrónico a languagehelp@njeda.gov.

اللغة العربية: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية مجانية متاحة لك. عبر إرسال بريد إلكتروني إلى languagehelp@njeda.gov.

Next > Save



IMPORTANT TIP:

Click “Save” in the beginning to create a reusable link that will save your progress as you complete the application.

Primary Point of Contact

On this page we will collect contact information for the Primary Point of Contact for this application.

Please ensure that the email provided is the correct email for the primary point of contact on this application.

This email will be used for the fee correspondence and any other communications to the applicant team.

Primary Point of Contact

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone Number *



REMINDER

Click “Save” to create a reusable link that will save your progress as you complete the application.

Authorized Representative

If the primary point of contact is not an authorized representative for the Applicant, you will be asked to fill out the contact information for the authorized representative.

Authorized Representative

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

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone *

Chief Executive Officer/Owner/Equivalent

If the primary point of contact is not Chief Executive Officer/Owner/Equivalent for the business, you will be asked to fill out the contact information for the Chief Executive Officer/Owner/Equivalent.

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 company.

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone

Media Contact

If the primary point of contact is not the media contact for the business, you will be asked if you would like to designate a media contact.

IF YES, you will be asked to fill out the 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 No

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Consultant

Some applicants may choose to utilize consultants for support. While the NJEDA will direct all communications to the primary point of contact, you will be asked if you like to designate a consultant contact who is assisting with this application.

IF YES, you will be asked to fill out the contact information for the media contact.

Please note: Registered Government Affairs Agents will be asked to provide their official Registration Number.

Consultant Information

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

Would you like to designate a consultant contact who is assisting with this application? *

Yes No

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email Address *

Confirm Email Address *

Phone

Are you a Registered Governmental Affairs Agent? *

Yes No

Government Affairs Registration Number *

Applicant Organization

In this section, we are collecting information about the registered business that is applying for this program.

This page will request applicant organization information including but not limited to...

- Entity Type
- Date Established
- Entity Formation Documents
- Federal Tax Identification Number (FEIN)
- NJ Tax Identification Number
- NAICS Code
- NJ Tax Clearance Certificate (required prior to approval)

If the applicant is involved in religious activities or is religiously affiliated, an additional [Religious Activity Questionnaire](#) will be required.

Applicant Organization

In this section, we are collecting information about the company that is applying for assistance. We are focused on the primary applicant only. We may 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)

Entity Type *

Date Established *

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

Yes No NA - Applicant Organization is Government Entity

Mailing Address *

Address Line 1

Address Line 2

City

State

Zip Code

Applicant Country of Incorporation/Formation *

United States

Applicant State of Incorporation/Formation *

State

Formation Document(s)

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: [Certificate of Formation](#)
- Corporation: [Certificate of Incorporation and Bylaws](#)
- Not-for-Profit: [Certificate of Incorporation and Bylaws](#)
- Out of State: If your entity was formed out of state but operates within the State of NJ, you must file a Certificate of Authority when registering the business in NJ and provide that certificate.

or drag files here.

Additional Information

Additional Information

Is the company involved in political or lobbying activities? *

Yes

No

Provide a Political Activity Questionnaire form

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

Political Activity Questionnaire *

or drag files here.

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If your company is involved in political or lobbying activities, you will need to complete the **Political Activity Questionnaire** and upload it to this section of your application.

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? *

Yes No

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? *

Yes No

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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.

Project Overview (1/2)

In this section, we would like to learn about your project in further detail, including project features and aspects relating to its suitability for the grant.

Please select the type of construction and project category (check all that apply).

Enter the full street address in the fields from **Street Address 1** through **City**.

Please note, selecting the **Zip-Code** will modify the drop-down list of cities/townships in the **City** field.

Project Overview

Identify the type of construction for your project: *

New construction

Substantial rehabilitation

Substantial rehabilitation with new construction

Select a project category (check all that apply): *

Commercial (including office)

Manufacturing

Mixed-use developments

Other

Street Address 1 *

Street Address 2

ZipCode *

City *

State *

New Jersey

Project Overview (2/2)

This section also asks about information such as block/lot numbers, proposed uses and the impact of the COVID-19 pandemic on the project's schedule.

If the project area will include more than one block and lot, please provide a range or click the [+ Add Block and Lot](#) button for non-contiguous parcels of land.

Upload a narrative outlining the project's features, including:

- Proposed uses
- Location and description of its neighborhood,
- Any anticipated benefits to the community
- Green building standards to be incorporated
- Number of full-time jobs that would be created

Upload a narrative describing the impacts of the COVID-19 pandemic including any cost increases and the funding gap created.

Block and Lot

If your project will consist of contiguous parcels of land, please include the range in your response for block and lot. For non-contiguous parcels of land, please use the "Add Block and Lot" option to capture the entire project location.

| Block * | Lot * |
|--|--|
| <input type="text" value="Block Numbers"/> | <input type="text" value="Lot Numbers"/> |

[+ Add Block and Lot](#)

Please upload a narrative describing the proposed project including, but not limited to, the following information:*

- Type of project and proposed uses (commercial, manufacturing, mixed-use with details regarding size, square footage, # units/spaces, etc.);
- Project location and description of adjacent and surrounding area/neighborhood;
- Proposed community and economic growth impact and benefits including consistency with local or regional plans/planning efforts (if applicable);
- Any proposed green building design and/or environmentally sustainable features and practices to be incorporated into building;
- Proposed number of full-time short term construction jobs and estimated permanent new full-time jobs at the proposed development upon completion

or drag files here.

Provide a narrative describing the COVID-19 pandemic related impact on the proposed project.*

- The narrative should outline the resulting cost increases and project funding gap, and also describe any impacts on the original project development schedule.

or drag files here.

Project Finances (1/2)

In this section, we want to understand the COVID-19 related impacts on your overall project budget.

Total Project Costs must be at least \$5,000,000.00.

Requested Amount of Grant Funding cannot be greater than 20% of Total Project Costs.

Project budgets must:

- Indicate sources and uses of funds (*initial + current*)
- Identify COVID-19 related increased costs (*current*)

Minimum grant funding: \$500,000
Maximum grant funding: \$5,000,000

Project Finances

Total Project Development Cost *

Eligible real estate development projects must be sized to have at least \$5 million of total project costs.

Requested Amount of Construction Inflation Grant Funding *

Amount requested can only be to fill funding gap due to pandemic related cost increases

Please provide your initial project budget: *

or drag files here.

PLEASE NOTE THIS IS REQUIRED: Provide an original project development budget indicating sources and uses of funds prior to COVID-19 related increased costs here.

Please provide your current project budget, which includes the increased costs resulting from COVID-19 related impacts: *

or drag files here.

PLEASE NOTE THIS IS REQUIRED: Provide a current project development budget indicating sources and uses of funds identifying COVID-19 related increased costs and including Construction Inflation Fund grant request amount here.

***Please be sure to include the amount of funding you are requesting from this grant program in your project budget uploads.**

Grant funding amounts will be determined following demonstration of funding gap, cost reasonableness assessment, construction contract wage requirements, and Duplication of Benefits review.

Project Finances (2/2)

The Applicant must agree to and make a commitment to deferring a minimum fifty percent (50%) of the developer fee for the project.

Upload a Proforma* and evidence of financing.

*Proforma cashflow projections:

- Must cover a minimum 10-year period
- Should demonstrate repayment of project financing in accordance with financing terms
- May show repayment of 50% (or greater if indicated) deferred developer fee

I acknowledge that if approved for funding from the Construction Inflation Fund program, Applicant Organization agrees to and makes a commitment to deferring a minimum fifty percent (50%) of the developer fee for the project as approved in the final budget and detailed in the Grant Agreement. *

By selecting "Yes", you acknowledge the applicant must defer a minimum fifty percent (50%) of the developer fee.

Please provide a Proforma *

or drag files here.

PLEASE NOTE THIS IS REQUIRED: Provide operating cashflow projections for a minimum 10-year period here. Note that cash flow projections should demonstrate repayment of project financing in accordance with financing terms; cashflow projections may also show repayment of 50% (or greater if indicated) deferred developer fee.

Please provide evidence of financing: *

or drag files here.

Per Budget uses. i.e. commitment letters

Construction Documents (1/2)

In this section, we want to understand the nature of construction costs eligible for coverage under this program.

Projects that have started construction prior to application may include expenses as eligible covered costs only if either New Jersey state prevailing wage or federal Davis-Bacon wage requirements were incorporated into the construction contract prior to construction start, and the project has been paying either prevailing wage or Davis-Bacon wage rates as applicable.

All projects are subject to prevailing wage law requirements and construction documents must so indicate this.

Construction Documents

Has construction for the proposed project already begun? *

Yes No

Projects that have started construction prior to application may include expenses as eligible covered costs only if either New Jersey state prevailing wage or federal Davis-Bacon wage requirements were incorporated into the construction contract prior to construction start, and the project has been paying either prevailing wage or Davis-Bacon wage rates as applicable.

What date did construction start for this project? *

Please provide construction contracts and any related documents. *

or drag files here.

Please note: Projects are subject to prevailing wage law requirements and construction documents must so indicate this.

Upload supporting evidence of increased construction costs (resulting from COVID-19 pandemic). *

or drag files here.

For example: project cost breakdown comparisons.

Construction Documents (2/2)

Please summarize efforts undertaken to reduce costs (i.e., modifications to materials, value-engineering efforts, etc.)

If the Applicant selects “Yes” to “Are any of the participating contractors or sub-contractors on the proposed project are NJ-certified Women, Minority, Veteran Business Enterprises (MWVBE)?”, a section will appear allowing the Applicant to provide a description of certification(s) held and any supporting documentation for a potential bonus consideration.

Please summarize efforts undertaken to reduce costs. *

For example: modifications to materials, value engineering efforts, etc.

Are any of the participating contractors or sub-contractors on this project NJ-certified Women, Minority, Veteran Business Enterprises (MWVBE)?

Yes No

Please describe which certifications are held by your contractor(s) or sub-contractor(s).

Upload any certificates or supporting documentation here.

or drag files here.

Permits and Approvals

Outline and describe the status of all local/county/state/other data approvals and/or permits needed for development of the proposed project.

Project Development Timelines

Including, but not limited to, start and completion dates for:

- Site control/site ownership
- Completion of initial architectural plans
- Construction contract
- Applications for and obtaining of zoning board (if applicable), planning board (if applicable) review(s) and approval(s), and any other federal, state, county, or municipal approvals (e.g., DEP permits, utility connections permits, soil conservation)
- Securing financing commitments
- Estimated timing for initial closing on financing, including EDA funds
- Construction start
- Construction completion and issuance of Certificate of occupancy/completion
- Permanent full time job creation

Under federal guidelines, all program funding must be obligated by December 31, 2024, and must be expended by December 31, 2026.

Permits and Timeline

Approvals and Permits*

In the upload section below, please provide a narrative or chart outlining and describing all local/county/state/other data approvals and/or permits needed for development of the proposed project.

For each approval or permit, indicate status, including, if applicable, but not limited to status for zoning board, planning board review(s) and approval(s), NJDEP permits, and utility connections permits.

or drag files here.

Project Development Timeline*

In the upload section below, please provide a narrative or Gantt chart summarizing major project development milestones with start and completion dates which should include the major tasks below (but may include others):

- Site control/site ownership
- Completion of initial architectural plans
- Construction contract
- Applications for and obtaining of zoning board (if applicable), planning board (if applicable) review(s) and approval(s), and any other federal, state, county, or municipal approvals (e.g., DEP permits, utility connections permits, soil conservation)
- Securing financing commitments
- Estimated timing for initial closing on financing, including EDA funds
- Construction start
- Construction completion and issuance of Certificate of occupancy/completion
- Permanent full time job creation

Please note: Under federal guidelines, all program funding must be obligated by December 31, 2024, and must be expended by December 31, 2026.

or drag files here.

Experience and Capacity

In this section, we want to understand your organization's prior relevant work experience

Provide a description in list and/or narrative form of the Applicant's prior development experience (within the last five (5) years), with project(s) similar in use, size and scope to the proposed development.

Identify the employees, principals, owners or members of the applicant organization who will be involved in implementing the project.

Upload applicable team resumes and bios.

Additional information will be requested if the applicant has entered into any agreements with or engaged other professionals on this project.

Experience and Capacity

Applicant's Prior Development Experience*
In the upload section below, please provide a description in list and/or narrative form of the Applicant's prior development experience (within the last five (5) years), with project(s) similar in use, size and scope to the proposed development.

The list/narrative should include the following information for each previous project:

- Project name
- Project location (address, city, state)
- Project description including use, size in sf, # of units (office, commercial, residential, etc.)
- Building type (low rise, midrise, townhouse)
- Total development cost
- Date completed
- Applicant's role in the project

or drag files here.

List which employees, principals, owner or members of the Applicant organization will be involved in implementing the proposed project.*

Please include full name and title for each individual.

Project Team Resumes and Bios*
In the upload section below, please provide bios and resumes for each of the individuals listed in the above response.

or drag files here.

Has the applicant entered into any agreements with or engaged other professionals who will be working on this project? *

Yes No

Duplication of Benefits

In this section, we will ask if you have applied for or received any other funds (governments loans/grants, private or bank loans, donations, insurance proceeds, etc.)

IF NO, certify this is correct and proceed to the next page.

IF YES, select all program(s) your business has applied to or received funding for from the list. Check “Other” to include any other funding sources not covered in the list.

For each source, you will need to provide:

- Name of Funding Source
- Program Status: In Process or Approved
- Approved/Applied Date
- Approved/Applied Amount
- Purpose of Funds

Duplication of Benefits Affidavit

This affidavit must be completed by all businesses that are applying for the Construction Inflation Fund Grant. Please provide below information about all sources of funds that the Applicant has applied for, been awarded and/or received for the same purpose or purposes as the Construction Inflation Fund Grant. The information within this affidavit will provide the NJEDA with vital information for processing the application required by the Stafford Act Section 312 on Duplication of Benefits.

As an authorized Signor (Owner, CEO, or similar level of officer) for this entity, I hereby state and certify to the United States Federal Government and to NJEDA as follows:

Have you applied for or received any other funds or assistance for this project? *

Sources of funds include, but are not limited to: Federal, State and local loan/grant programs, private or bank loans, gifts or donations, and insurance proceeds.

I certify that there is no Duplication of Benefits and no other government funds were used for expenses detailed in the project.

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Once you've provided details for all other assistance applied for and/or received for this project, you will need to certify that there is no Duplication of Benefits and no other government funds were used for expenses detailed in the project.

Prevailing Wage and Affirmative Action Requirements

Construction activities are subject to New Jersey affirmative action and prevailing wage requirements.

In order to proceed with the application, you must acknowledge any construction on this project, undertaken either by the applicant or as a result of this application, is subject to prevailing wage and affirmative action requirements by checking the box.



Prevailing Wage and Affirmative Action Requirements

Please be aware that construction activities under the Construction Inflation Fund are subject to New Jersey affirmative action and prevailing wage requirements.

Projects that have started construction prior to application may include expenses as eligible covered costs only if either New Jersey state prevailing wage or federal Davis-Bacon wage requirements were incorporated into the construction contract prior to construction start, and the project has been paying either prevailing wage or Davis-Bacon wage rates as applicable.

During the eligibility period, each worker employed to perform construction work at the redevelopment project shall be paid not less than the prevailing wage rate for the worker's craft or trade, as determined by the Commissioner of the Department of Labor and Workforce Development pursuant to P.L. 1963, c. 150 (N.J.S.A. 34:11-56.25 et seq.) and P.L.2005, c. 379 (N.J.S.A. 34:11-56.58 et seq.).

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 (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 this Act can be found on the NJ Department of Labor's Website.

If you have any questions about these requirements, please contact the Construction Inflation Fund team by emailing realestateinfo@njeda.gov before submitting this application.

I acknowledge any construction on this project, undertaken either by the applicant or as a result of this application, is subject to prevailing wage and affirmative action requirements.

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Projects that have started construction prior to application may include expenses as eligible covered costs only if either New Jersey state prevailing wage or federal Davis-Bacon wage requirements were incorporated into the construction contract prior to construction start, and the project has been paying either prevailing wage or Davis-Bacon wage rates as applicable.

Diversity Equity and Inclusion

In this section, we would like more information about the diversity of your organization.

Answers have no impact on eligibility for assistance and providing information is optional, to be used for tracking purposes only.

Within each of these questions, “Prefer not to answer” can be selected if that is the case OR if the question is not applicable to your organization.

Diversity, Equity, & Inclusion

In this section, we would like more information about the diversity of your organization. Answers have no impact on eligibility for assistance and providing information is optional, to be used for tracking purposes only. Within each of these questions, “Prefer not to answer” can be selected if that is the case OR if the question is not applicable to your organization.

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

- Minority
- Woman
- 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 organization has taken or is taking with respect to Diversity, Equity, and Inclusion

Please describe whether your organization'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). *

Applicant Representation

Applicant Representation

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

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If the individual filling out the application is employed by the organization that is applying for the program AND legally authorized to sign documents on behalf of the applicant company, three additional pages will appear immediately after this page: 1. Legal Questionnaire, 2. Certification of Non-Involvement in Prohibited Activities in Russia or Belarus, and 3. Certification of Application.

If the individual filling out the application **is not** employed by the organization that is applying for the program or is not legally authorized to sign documents on behalf of the applicant company, the individual will be required to download three PDF forms and upload versions that have been signed and completed by the authorized representative.

Legal Questionnaire*

In this section we will be collecting the Legal Questionnaire.

*This page will only be visible if the individual filling out the application is employed by the organization that is applying for the program and an authorized representative.

Legal Questionnaire

Applicant Name: *

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? *

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 Affiliate

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 Affiliate

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

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

In this section we will be collecting the Certification of Non-Involvement in Prohibited Activities in Russia or Belarus.

Note: This is in addition to the individual entrepreneur's Certification of Non-Involvement in Prohibited Activities in Russia or Belarus.

*This page will only be visible if the individual filling out the application is employed by the organization that is applying for the program and an authorized representative.

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

Program Name: New Jersey Innovation Fellow Application

Applicant Name: Test Business Name

Applicant Doing Business As: Test Business Name

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.

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 check one appropriate box 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 and/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 and/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.

Authorized Signature

Certification of Application*

Certification of Application

PLEASE NOTE:

Eligibility of financial assistance by the New Jersey Economic Development Authority is determined by the information presented in this application and the required attachments and schedules. Any changes in the status of the proposed project from the facts presented herein 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, 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. *

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

*This page will only be visible if the individual filling out the application is employed by the organization that is applying for the program and an authorized representative.

Upload Certifications*

Click the orange links to download the forms and then upload versions signed and completed by the authorized representative.

Upload Certifications

The New Jersey Economic Development Authority 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 have identified that you are not one of the individuals listed above, it is required that you download each of the three 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 company.

[Legal Questionnaire](#)

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

[Application Certifications](#)

Legal Questionnaire *

or drag files here.

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

or drag files here.

Application Certifications *

or drag files here.

*This page will only be visible if the individual filling out the application is NOT employed by the organization that is applying for the program OR is NOT an authorized representative.

Fee Acknowledgement

In this section, you will be asked to acknowledge the \$1,000 non-refundable application fee payable by credit card.

Once you hit submit on an application, an email will be sent to the Primary Point of Contact email with a link and instructions to make the credit card payment.

Fee Acknowledgment

I acknowledge that there is a \$1,000 non-refundable application fee payable to NJEDA prior to this application being deemed complete.

Please select a payment method: *

Credit Card

Pay by Credit Card Instructions

Application ID#: CIFGR-001

Amount Due: \$1,000.00

Please read this information carefully.

After you fill out the remaining pages of this application and then hit "Submit" on the final page, an email will be sent to **Primary Point of Contact Email**. This email will provide instructions and a link to make the credit card fee payment. **The payment must be completed before the NJEDA will begin reviewing the application.**

The email will come from NJEDAFeePaymentRequest@njeda.com. Please check your spam/junk folders if you do not see the email in your inbox.

[< Back](#) [Next >](#) [Save](#)

The payment must be completed before the NJEDA will begin reviewing your application.

Electronic Signature

Electronic Signature

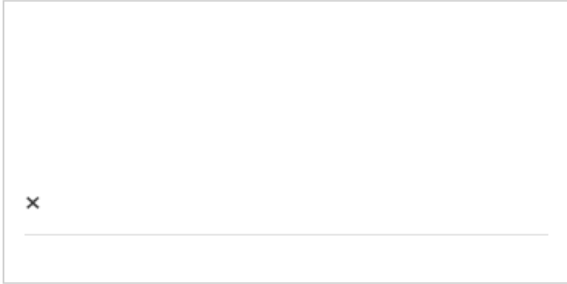
Pursuant to written policy, the New Jersey Economic Development Authority allows documents to be signed electronically and hereby agrees to be bound by such electronic signatures. Please confirm that you, as a signatory to this document, also agree to be bound by electronic signatures

I agree to be bound by electronic signatures

Full Name *

Title *

Signature *



[draw](#) type

Application Submission

Application Submission

Thank you for your interest in the **Construction Inflation Fund**.

If you are ready to submit this application to the NJEDA for review, please click the Submit button.

If you would like to make any changes to the application at this point, please click the Back button.

If there is any additional supporting documentation that you would like to provide, please use the upload button below.

or drag files here.

Full Name *

Title *

CLICK SUBMIT



< Back

Submit

Save

Confirmation



Construction Inflation Fund

Thank you _____ for filling out the application for the Construction Inflation Fund.

Your confirmation code is: CIFGR-001

Any communications on the status of your application will be sent to:

You have chosen to pay your non-refundable application fee by credit card. An email with instructions and a link to make the fee payment will be sent to _____. **The payment must be completed before NJEDA will begin reviewing the application.**

The email will come from NJEDAFeePaymentRequest@njeda.gov, please check your spam/junk folder if you do not see the email in your inbox.

For questions regarding your application, please reach out to program administrators at realestateinfo@njeda.gov.

To learn about other NJEDA programs, visit njeda.gov.

Thank You,
NJEDA



<https://www.njeda.gov/construction-inflation-fund/>



@NewJerseyEDA | njeda.gov |

609.858.6767

NJEDA