

NEXT NEW JERSEY PROGRAM

Sample Application



Program Overview

The Next NJ Program- AI provides tax credits to eligible businesses to offset against their state tax liability and for companies to engage in building and fostering New Jersey's fast-growing AI ecosystem.

ELIGIBILITY

- Meet minimum job creation requirements: 100 new full-time jobs in New Jersey
- Each job must be paid at least 120% of the county median salary
- Minimum Capital Investment: \$100 million at the qualified business facility (including multiple locations)
- Collaboration: the business will enter into a collaborative relationship, evidenced by the provision of price concessions, artificial intelligence support services, or other measures determined appropriate by the Authority, with a New Jersey-based public or private research university or technology startup company, incubator, accelerator or both.
- More than 50% of the business's or division's employees are engaged in AI-related activities, or
- More than 50% of the business's or division's revenue is generated from AI-related activities, or
- Both of the above.

AWARD SIZE

Tax credit award per business is based on the lesser of:

- 0.1% of the eligible business's total capital investment multiplied by the number of new full-time jobs; or
- 25% (Max Percentage) of the eligible business's total capital investment; or
- \$250 million (Max Award)

APPLY HERE

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



Application Center Login

NJEDA Application Center Sign-In Page

Visit the NJEDA Application Center through the webpage of the specific NJEDA program you are interested in or by going to the general log-in page at <https://programs.njeda.com/en-US/NJEDAPrograms/>.

If this is the first time you are using this portal to apply for an NJEDA product, please click the *Register* tab, listed towards the top of the screen.

If you do not have your login information, click on the *Forgot Password/Username* button and follow the instructions. This will send you an email with reset information. Your Username will be included in the email you receive, so please be sure to use your correct username when you sign in.

NJEDA Application Center

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

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

If you are the first-time user, please click "Register" button on the top. Having trouble logging in?

Please review this [video tutorial](#) for further assistance.

* User name

* Password

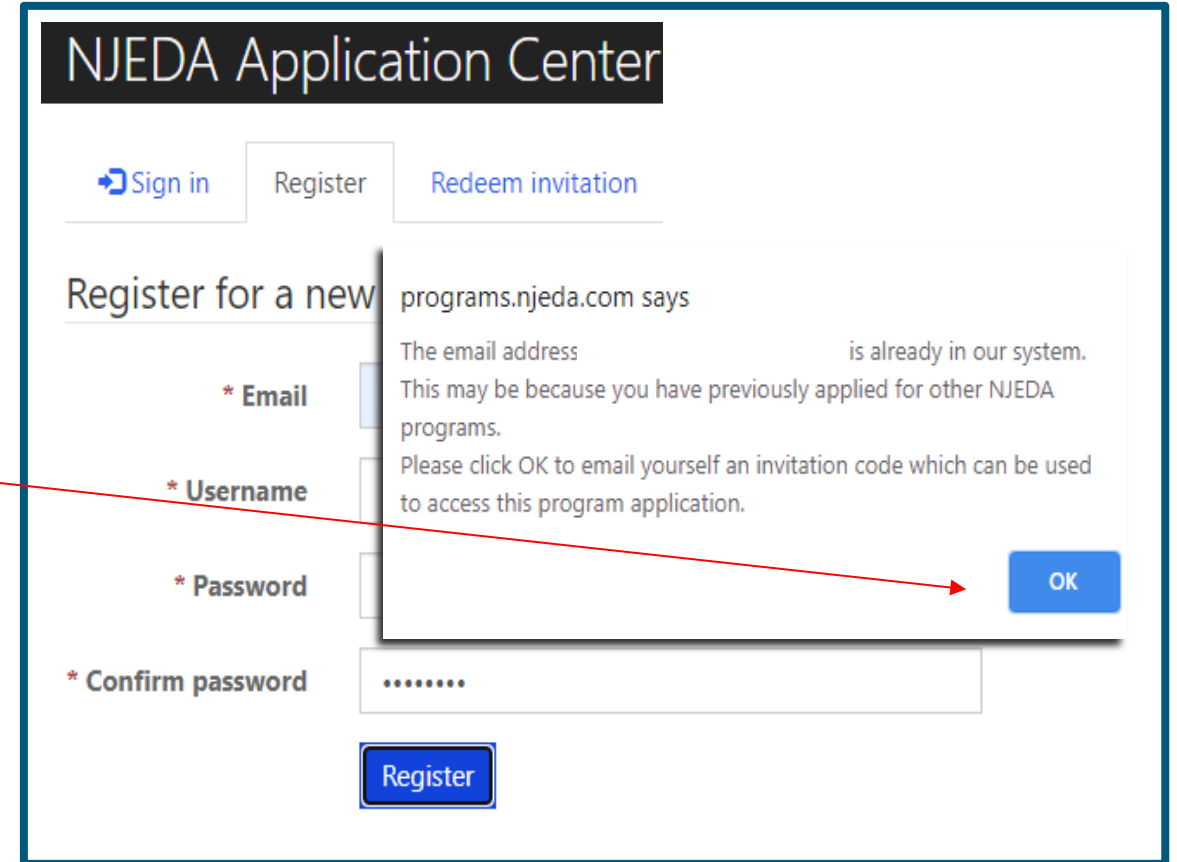
☐ Remember me?

[Sign in](#) [Forgot Password/User name](#)

If Your Email is Recognized By the Application Portal

If you attempt to register with the Application Center, but your email address is already in the system, you will receive a pop-up notice stating that you will need to send yourself an invitation code to access your account.

Begin this process by clicking on the blue “OK” button within the pop-up box and follow the prompts.



The screenshot displays the NJEDA Application Center interface. At the top, there are three tabs: "Sign in", "Register", and "Redeem invitation". The "Register" tab is active. Below the tabs, the heading "Register for a new" is visible. The registration form includes fields for "Email", "Username", "Password", and "Confirm password", each marked with an asterisk. A blue "Register" button is at the bottom of the form. A pop-up message box is overlaid on the form, containing the text: "programs.njeda.com says The email address is already in our system. This may be because you have previously applied for other NJEDA programs. Please click OK to email yourself an invitation code which can be used to access this program application." A blue "OK" button is located at the bottom right of the pop-up. A red arrow points from the text "Begin this process by clicking on the blue “OK” button within the pop-up box" to the "OK" button in the pop-up.



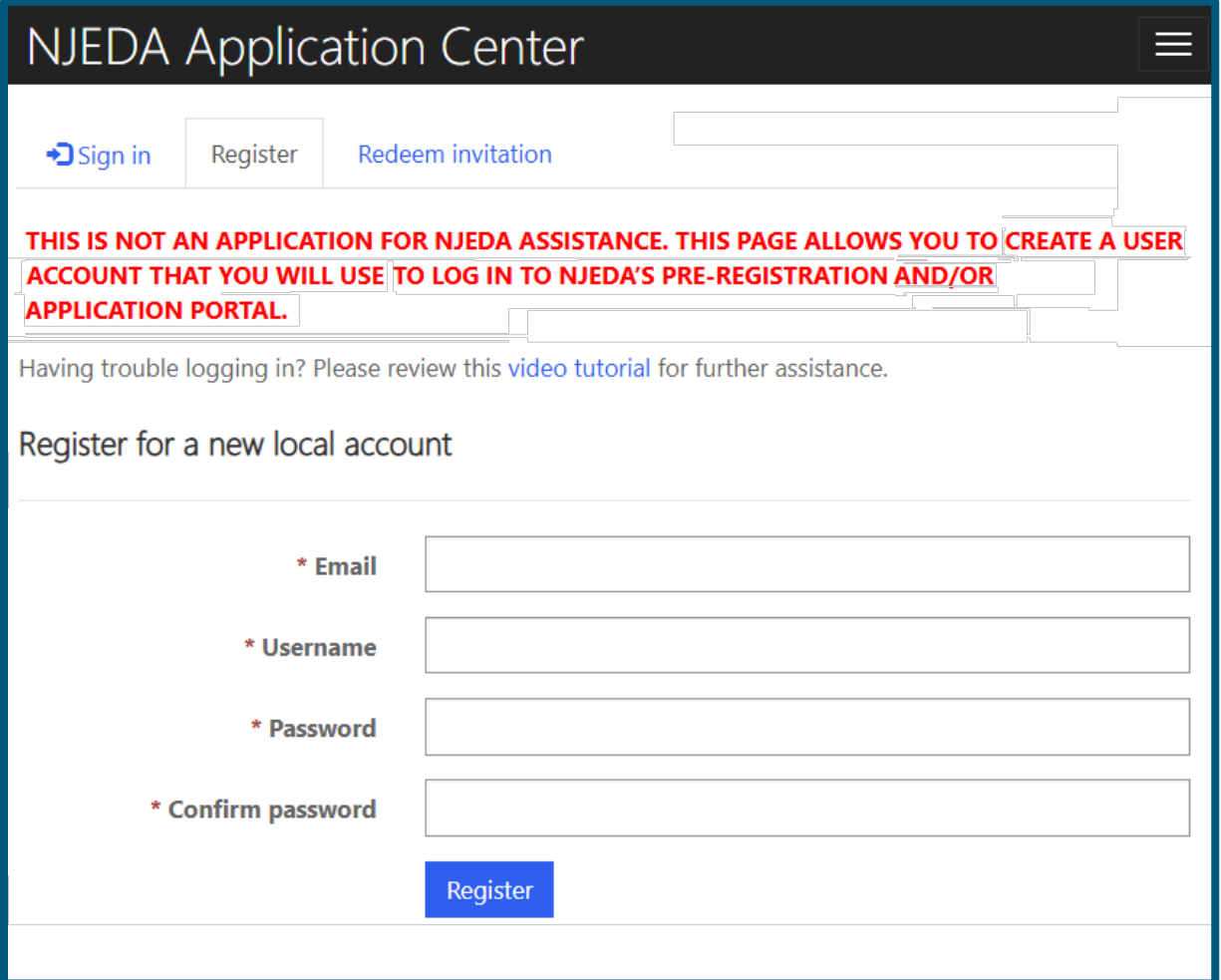
Remember to check your spam/junk folders if you can't locate an email from NJEDA. Emails are sent from crmnoreply@njeda.gov (NJEDA NoReply).

New Users: How to Register Your Email Address

Enter your email, username (which can be the same as your email) and your desired password.

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

Once information is filled in click *Register* to continue.



The screenshot shows the NJEDA Application Center registration page. At the top, there's a dark header with the title "NJEDA Application Center" and a menu icon. Below the header, there are three buttons: "Sign in" (with a key icon), "Register" (highlighted), and "Redeem invitation". A red warning message states: "THIS IS NOT AN APPLICATION FOR NJEDA ASSISTANCE. THIS PAGE ALLOWS YOU TO CREATE A USER ACCOUNT THAT YOU WILL USE TO LOG IN TO NJEDA'S PRE-REGISTRATION AND/OR APPLICATION PORTAL." Below this, there's a link to a "video tutorial" for users having trouble logging in. The main section is titled "Register for a new local account" and contains four input fields: "* Email", "* Username", "* Password", and "* Confirm password". A blue "Register" button is at the bottom right of the form.



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

New Users: How to Register Your Email Address (Cont'd)

After registering your email, you will be prompted to fill out your profile information.

Enter the information requested and confirm your email address is correct. This email address will be the primary way the NJEDA contacts your business.

Once complete, click “Update.”

Home > Profile

Profile

Please provide some information about yourself.
If you need language assistance, please send NJEDA your name, spoken language and telephone number to languagehelp@njeda.com

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

Your information

First Name *	Last Name *
<input type="text"/>	<input type="text"/>
E-mail	Phone *
<input type="text" value="sample@sample.com"/>	<input type="text"/>
Organization Name	Title
<input type="text"/>	<input type="text"/>
Web Site	
<input type="text"/>	

Update

Profile

Security

- Change password
- Change email ⓘ
- Manage external authentication

New Users: Confirm Your Email Address

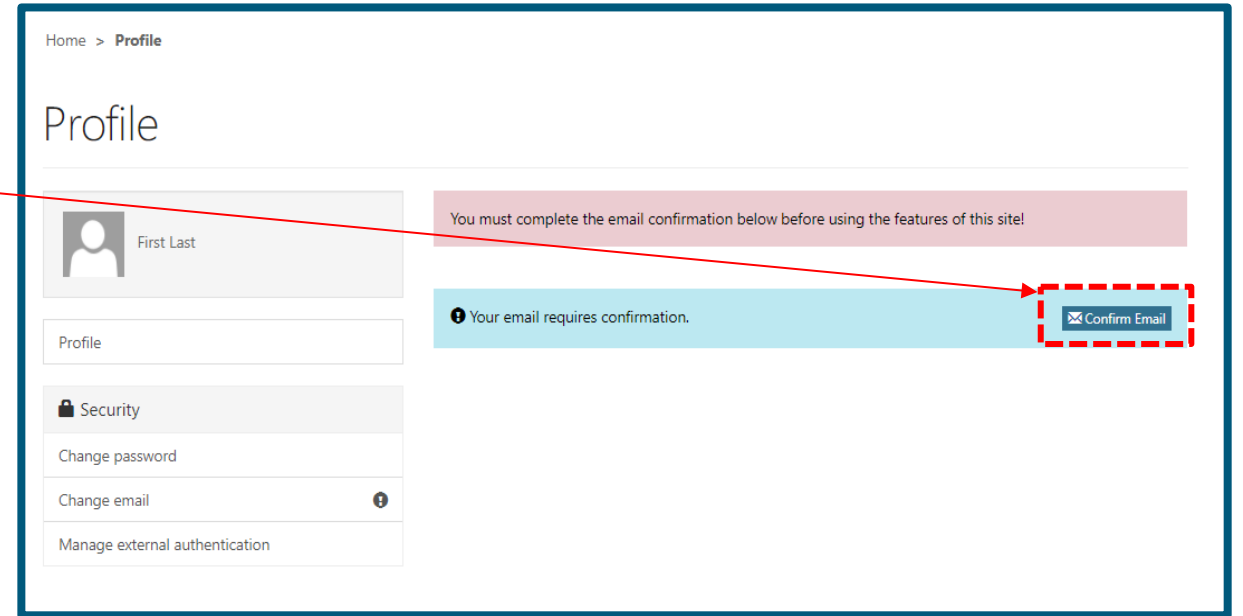
Once your profile information is complete, you need to confirm your email address.

Within the blue box, click on “Confirm Email”.

An email will be sent to the email address listed.

Go to your email and follow the instructions within the email.

In order to fully access the application portal, you MUST confirm your email address by clicking on the link that is sent to your email.



If you have any issues creating a username or password, redeeming an invitation code, or otherwise logging into the portal, please email us at CustomerCare@njeda.gov or call our Customer Care line at (844) 965-1125.



Next NJ Program -AI Application

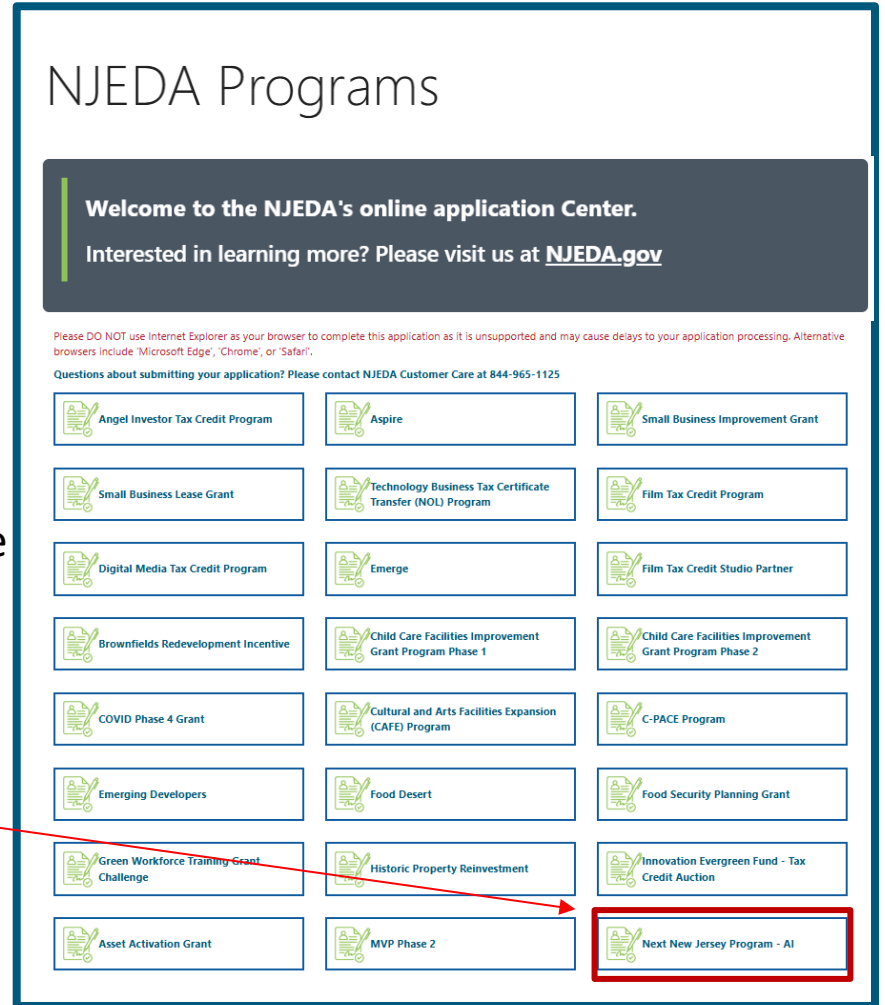
Select Your Program

After you are fully logged in, the Application Center homepage will have two options at the bottom of the page. Select the *NJEDA Programs* button to see the full list of active NJEDA programs.



On the next page, find and select the program you wish to apply for.

Programs are not listed in alphabetical order, so please read through the entire list if you are having difficulty locating your desired program.



Start Your Application

Welcome

Before beginning the application read through the information provided on the welcome page.

Once ready click “Create New Application” to begin.



Create New Application

Next NJ Program - AI

Next New Jersey Program- AI

Welcome to the application page for the **Next New Jersey Program - AI (Next NJ Program-AI)**.

The **Next NJ Program - AI** is a tax credit program designed to attract significant investments in the AI industry, foster the creation of high-paying AI jobs, and position New Jersey as a leader in the AI industry.

By offering tax credits, the program encourages companies to invest in the state's growing Artificial Intelligence ("AI") sector. Qualifying investments may include establishing **AI Data Centers** and/or engaging in **AI-related activities**. Such activities include, but are not limited to:

- Developing new AI algorithms and techniques (e.g., machine learning, natural language processing, computer vision).
- Creating AI-powered software and hardware products for various applications.
- Medical AI modeling or programming.
- Developing AI chatbots for customer service.
- Developing AI for vehicles.
- Collecting, storing, and managing the vast amounts of data needed to train and use AI models

For additional information please visit our website at <http://www.NJEDA.gov/nextnjai>

Eligibility Information/Instructions:

To be eligible for the Next NJ Program - AI, a project must meet the following:

Minimum Job Creation: 100 new full-time jobs

Minimum Capital Investment: \$100 million.

Each Eligible New Job Must Be Paid: at least 120% of the county median salary.

Businesses must: offer Health Benefits.

50% of workforce: Applicant must have 50% of employees at the business or a division of the business involved in AI-related activities or 50% of the revenue of the business or a division of the business is generated from AI-related activities.

Companies must: maintain a record of good standing with the New Jersey Department of Labor and Workforce Development (LWD) and the Department of Environmental Protection (DEP).

Prevailing Wage Requirements: The Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4, and prevailing wage requirements, N.J.S.A. 34:1B-5.1, shall apply to construction contracts at the Qualified Business Facility undertaken in connection with or as a condition of tax credits received under the program.

Collaboration: The applicant will further be required to create a collaborative relationship and provide at a minimum, a Letter of Intent (LOI) at the time of application.



Your application will automatically be saved every time you click the “Next” button.

Language Access

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

If English is not your primary language, free language assistance services are available.

If you are interested in using an interpreter provided by EDA, please indicate your primary language.

Language Access

Is English your primary language? *

Select

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

Select

Select

español (Spanish)

العربية (Arabic)

粵語 (Cantonese Chinese)

普通话 (Mandarin Chinese)

ગુજરાતી (Gujarati)

हिंदी (Hindi)

italiano (Italian)

한국어 (Korean)

po polsku (Polish)

português (Portuguese)

Tagalog

Other

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

Select

Select

Yes

No

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.

Is the Primary Point of Contact, the contact who is authorized to and will be signing legally binding documents and making legally binding certifications in this application on behalf of the applicant company?

Legally authorized representative means one of the following:

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

Primary Point of Contact

Throughout the life of a project – from application, to approval, to closing, and to certification/servicing – NJEDA will need to engage with various members of your team. This section collects contact information for individuals we may need to speak with as part of this project.
Please provide contact information for the primary point of contact within the applicant that NJEDA will keep updated on the status of this application.
NOTE: It is highly recommended that the primary point of contact be the individual that is currently filling out this application.

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Email Address Confirmed *

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

Phone Number and Extension (if available) *

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

Is the Primary Point of Contact, the contact who is authorized to and will be signing legally binding documents and making legally binding certifications in this application on behalf of the applicant company? *

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

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

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

Primary Point of Contact Address

Country *

Street Address 1 *

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

Street Address 2

City *

State / Province *

Zip / Postal Code *

[Previous](#) [Next](#)

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

Please input the following information for the contact who is authorized to sign legally binding documents and make legally binding certifications in this application on behalf of the applicant company.

Salutation

Select

First Name *

Middle Initial

Last Name *

Suffix

Select

Title *

Email Address *

Email Address Confirmed *

Phone Number and Extension (if available) *

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

Chief Executive Officer/Owner/Equivalent

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.

Salutation

Select

First Name *

Middle Initial

Last Name *

Suffix

Select

Title *

Email Address *

Email Address Confirmed *

Phone Number and Extension (if available) *

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

Consultant Information

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

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

IF YES, you will be asked to fill out the contact information for the consultant, including the question asking if the consultant is a registered governmental affairs agent.



Is the Consultant a Registered Governmental Affairs Agent? *

Yes

Government Affairs 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.

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

Yes

Salutation

Select

First Name *

Middle Initial

Last Name *

Suffix

Select

Company *

Title *

Email Address *

Legal Counsel

Legal Counsel designation is not mandatory, however, it is helpful for application and award purposes for NJEDA to have the basic contact information for your legal counsel, if you have one designated at the time of application.

Legal Counsel

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

Would you like to designate a Legal Counsel Contact? *

Yes ▼

Salutation

Select ▼

First Name *

Middle Initial

Last Name *

Suffix

Select ▼

Company *

Title *

Email *

Email Confirmed *

Media Contact

If the primary point of contact is not authorized to speak to the media on behalf of the applicant, you will be asked to fill out the contact information for the authorized media contact.

Media Contact

NJEDA often works with an applicant'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's Media Contact that will support on this project.

Would you like to designate a Media Contact? *

Yes

Salutation

Select

First Name *

Middle Initial

Last Name *

Suffix

Select

Company *

Title *

Email Address *

Email Address Confirmed *

Accountant Information

Your accountant designation is not mandatory, however, it is helpful for application and award purposes for NJEDA to have the basic contact information for your accountant, if you have one designated at the time of application.

Accountant Information

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

Would you like to designate an Accountant Contact? *

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email Address *

Email Address Confirmed *

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](#)
- Short Organizational Description
- Organization Phone Number
- Organization Website
- [NJ Tax Clearance Certificate](#)

Applicant Organization

In this section, we are collecting information about the primary applicant for this program. We are focused on the primary applicant only. We will collect information on affiliates, parent companies, holding companies, or other related entities in the following sections of the application.

Applicant Organization Name *

The full name of your registered legal entity. This name should match the name on your formation documents. If you are not sure of your legal entity name, please visit <https://www.njportal.state.nj.gov/DOBJ/BusinessNameSearch/Secure/BusinessName>.

Applicant Doing Business As (DBA)

Does your business operate under a different name?

Certificate of Alternate Name

Please provide a Certificate of Alternate Name issued by Division of Revenue and Enterprise Services if you have one. Copies can usually be found on the state business records website Division of Revenue & Enterprise Services Business Records Service (portal.dres.nj.gov).

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

Applicant Entity Type *

Select ▼

What is the ownership structure of the applicant?

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

Select ▼

Date Established *

≡

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

Mailing Address

Country *

United States ▼

Street Address 1 *

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

Street Address 2

City *

State / Province *

Zip / Postal Code *

Applicant Country of Incorporation/Formation *

United States ▼

Applicant State of Incorporation/Formation *

Select ▼

Please upload any formation documents for the Applicant Organization

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

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

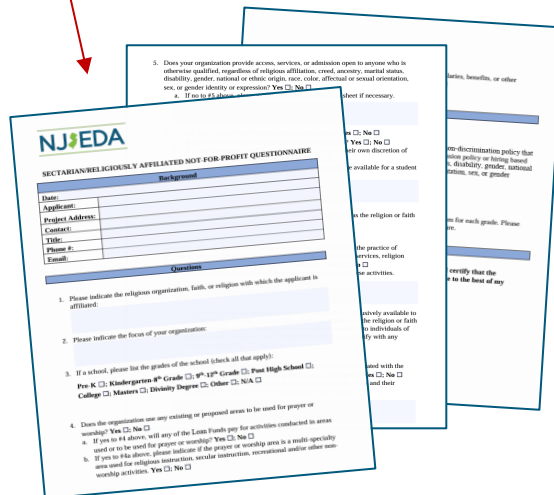
Document	Files
Formation Document(s) *	<input type="button" value="Add Files"/>

Applicant Organization (Cont'd)

If the applicant organization (or any related entities) has previously received NJEDA, details of that funding is required to be included as part of the application.

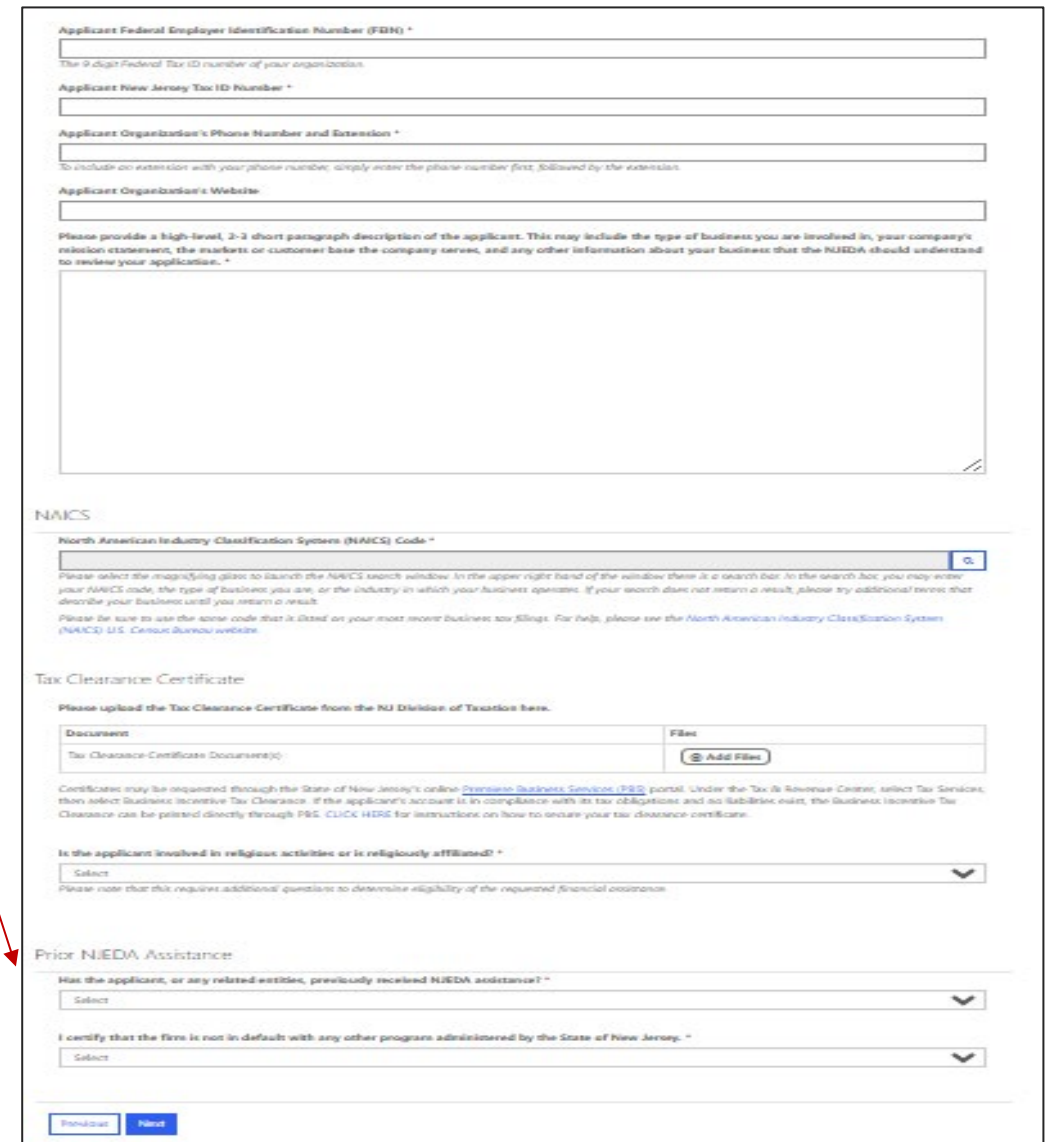
Certification is also required that the applicant is not in default with any other State of New Jersey programs.

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



The image shows a sample of the "NJEDA Sectarian/Religiously Affiliated Not-for-Profit Questionnaire". The form includes sections for "Background" (Name, Address, Contact, Phone, Email) and "Questions". The questions are:

1. Please indicate the religious organization, faith, or religion with which the applicant is affiliated.
2. Please indicate the focus of your organization:
3. If a school, please list the grades of the school (check all that apply):
Pre-K (), Kindergarten (), 1st-5th Grade (), 6th-8th Grade (), 9th-12th Grade (), Other ()
College (), Masters (), Divinity Degree (), Other ()
4. Does the organization use any existing or proposed assets to be used for prayer or worship? Yes () No ()
a. If yes to #4 above, will any of the Long Funds pay for activities conducted in areas used or to be used for prayer or worship? Yes () No ()
b. If yes to the above, please indicate if the prayer or worship area is a multi-specialty area used for religious instruction, secular instruction, recreational and/or other non-worship activities. Yes () No ()



The image shows a sample of the "NJEDA Applicant Organization" form. The form includes sections for:

- Applicant Federal Employer Identification Number (EIN) *
- Applicant New Jersey Tax ID Number *
- Applicant Organization's Phone Number and Extension *
- Applicant Organization's Website
- Please provide a high-level, 2-3 short paragraph description of the applicant. This may include the type of business you are involved in, your company's mission statement, the markets or customer base the company serves, and any other information about your business that the NJEDA should understand to review your application. *
- NAICS (North American Industry Classification System) Code *
- Tax Clearance Certificate (Please upload the Tax Clearance Certificate from the NJ Division of Taxation here.)
- Is the applicant involved in religious activities or is religiously affiliated? *
- Prior NJEDA Assistance (Has the applicant, or any related entities, previously received NJEDA assistance? *)
- I certify that the firm is not in default with any other programs administered by the State of New Jersey. *

Additional Applicant Organizational Details

This page will ask additional information on the applicant organization including but not limited to...

- Applicant Organizations Headquarter
- Short Description of the Applicant team, affiliates, and co-applicants
- Organization details such as years of operation, workforce size, annual revenue, geographic scope etc.
- 3 consecutive years of business tax returns & financial statements

Additional Applicant Organizational Details

In this section, we are collecting information about the company that is applying for assistance. We are focusing on the primary applicant only. We may collect additional information on affiliates, parent companies, holding companies, or other related entities in future application sections.

Applicant Organization's Headquarters Address

Does the Applicant Organization have a headquarters? *

Select

Please select "No" if your Mailing Address and Applicant Organization's Headquarters Address are the same.

Operational Information

Is the Applicant Organization a publicly traded company? *

Select

Please provide a high-level, 2-3 short paragraph description for each member of the applicant team, including an affiliate(x) or co-applicant(x) *

Provide details about the organization, including its years of operation, workforce size, annual revenues or budget, core business focus, and, if applicable, the total amount of assets developed and under management. Additionally, outline the organization's geographic scope, services offered, and any other relevant highlights. Include examples of completed projects that are similar to the proposed project, emphasizing the organization's development capabilities. *

Upload any additional materials that speak in more detail about the corporate capabilities and development history.

Document	Files
Additional Materials(x)	<div>Add Files</div>

Upload three consecutive years of Business Tax Returns & Financial Statements

Document	Files
Tax Returns and Financial Statements *	<div>Add Files</div> <p><small>If the applicant is unable to produce three years of tax returns, contact program staff and provide whatever other documentation is available to demonstrate a satisfactory commitment to the project and evidences both financial and professional intent/will to complete the project.</small></p>

Contributing Affiliates

Other than the applicant are any of the following related entities contributing new full-time jobs in New Jersey or capital investment to the project as part of this application?

NOTE: The Contributing Affiliate must either be contributing new jobs or capital investment to the project.

IF YES...

A blue button will appear to “Add Contributing Affiliate”. Upon clicking the button a pop-out box will appear asking for information on the Contributing Affiliate.



Contributing Affiliate

Please provide the following information about the Contributing Affiliate of the applicant.

NOTE: NJEDA will confirm this many of these fields against the relevant Affiliate legal formation and tax documents that you will upload as part of this application. To ensure efficient application review, please make sure information you provide is consistent and for legal entity is the applicant.

Affiliate Type *

Select

Affiliate Organization Name (Full name of the registered legal entity) *

Affiliate Doing Business As (DBA) - Does the affiliate operate under a different name?

Percent Ownership Stake in Applicant *

Enter 0 if not applicable

Will the affiliate be contributing new jobs to the project? *

Select

Will the affiliate be contributing capital investment to the project? *

Select

Contributing Affiliates

In this section, we need more information about any entities related to the applicant, including affiliates, real estate holding companies, and parent companies.

Other than the applicant, are any of the following related entities contributing new full time jobs in New Jersey or capital investment to the project as part of this application? *

These entities will be considered “Contributing Affiliates” of the applicant.

- Holding Company
- Subsidiary
- Parent Company With Control
- Parent Company Without Control
- Other Affiliates

Yes

Add Contributing Affiliate

Affiliate Type ↓	Affiliate Organization Name
There are no records to display.	

Information collected on the Contributing Affiliate organization including but not limited to...

- Entity Type
- Date Established
- Entity Formation Documents
- Federal Tax Identification Number (FEIN)
- NJ Tax Identification Number
- [NAICS Code](#)
- Short Organizational Description
- Organization Phone Number
- Organization Addresses
- Locations and Employees
- [NJ Tax Clearance Certificate](#)

Ownership

Ownership

In addition to any parents/holding companies/affiliates identified in the prior section, is there any individual or entity with a 10% or greater ownership of the company? *

Yes

Add Owner

Percent Ownership Stake in Applicant Company	Entity Name ↓	Owner Type
There are no records to display.		

Ownership

Other than the holding company and/or affiliates detailed above, please list all owners with a 10% or more interest in the Applicant.

Percent Ownership Stake in Applicant Company *

Owner Type *

Select

Country *

United States

Address Line 1 *

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

Address Line 2

City *

In addition to any parents/holding companies/affiliates identified in the prior section, is there any individual or entity with a 10% or greater ownership of the company?

IF YES...

A blue button will appear to “Add Owner”. Upon clicking the button a pop-out box will appear asking for information on any owners.

Information requested withing the Ownership Pop-out box include:

- Percent Ownership Stake in Applicant Company
- Owner type
- Address

Documents requested in this section if applicable included:

- Schedule of debts
- Tax returns
- Trust agreement

Project Details: Project Information

Project Description: Provide a 1-2 paragraph description of the scale and scope of the proposed project for which you are seeking Next NJ Program-AI Tax Credits.

Activities and Job Functions: Provide a 1-2 paragraph description of the types of activities and job functions included in the project.

Facilities Required: Provide a 1-2 paragraph description of the anticipated facilities required for the project, referred to as the "qualified business facility".

Multiple Locations: Indicate whether the project will be split across multiple facilities or locations.

Additional Documentation: Attach or provide additional documentation for the NJEDA to understand more about the project.

Project Schedule: Include anticipated construction/fit-out start and end dates, and the anticipated start of business operations at the qualified business facility.

Environmental Sustainability: Acknowledge compliance with [Green Building Standards](#) and provide plans for how the qualified business facility will meet these standards within six months after NJEDA approval.

Project Details: Project Information

In this section we will gather general information about the specific project you are proposing to locate in New Jersey.

Please provide a 1–2 paragraph description of the scale and scope of the proposed project for which you are seeking Next NJ Program-AI Tax Credits. *

Please provide a 1–2 paragraph description of the types of activities and job functions included in the project for which you are seeking Next NJ Program-AI Tax Credits *

Please provide a 1–2 paragraph description of the anticipated facilities required for the project (referred to as the "qualified business facility") for which you are seeking Next NJ Program-AI Tax Credits. *

Will this project be split across multiple facilities or locations? *

Select

You may attach or provide additional documentation that includes more detail for the NJEDA to understand more about the project.

Document

Additional documentation

Files

Add Files

Project Schedule

Anticipated Construction/Fit Out Start Date *

MM/DD/YYYY

Anticipated Construction/Fit Out End Date *

MM/DD/YYYY

Anticipated Start of Business Operations at Qualified Business Facility *

MM/DD/YYYY

"Qualified Business Facility" means any building, complex of buildings, or structural components of buildings, and all machinery and equipment located therein, used in connection with the operation of an eligible business in the state.

Anticipated Date when All Jobs and Capital Investment will be Certified *

MM/DD/YYYY

Environmental Sustainability

☐ I acknowledge that my qualified business facility must comply with [Green Building Standards](#). *

☐ I acknowledge that I must provide plans for how the QBF will meet the Green Building Standards no later than 6 months after NJEDA approval. *

Previous

Next

AI Business Operations

Please provide 1 to 2 detailed paragraph description explaining how your business or division is primarily engaged in the artificial intelligence (AI) industry or the large-scale AI data center industry, addressing the following criteria:

1. More than 50 percent of employees at the business or a division of the business are engaged in AI-related activities; or
2. More than 50 percent of the business or a division of the business revenue is generated from AI-related activities; or
3. Both of the above.

Note: The use of AI applications solely for the purpose of supporting your internal business operations does not qualify as being "primarily engaged" in AI-related activities.

DOCUMENT UPLOADS

Based upon your previous response, please upload documents which support the applicant's AI-related activities. These can include documents such as company profile, organizational charts, or other documents that exemplify the AI business activities.

Upload a copy of your organizational chart, including all divisions and/or entities connected to the parent company.

AI Business Operations

To be eligible, the business or its division must be primarily engaged in the artificial intelligence industry or the large-scale artificial intelligence data center industry. A business or its division shall be considered to be primarily engaged in an industry set forth herein if more than 50 percent of the business's employees are engaged in AI-related activities or more than 50 percent of the business's revenue is generated from AI-related activities, or both; provided, however, the use of AI applications in the furtherance of a business's own operations shall not be considered in determining whether a business or division is primarily engaged in artificial intelligence or large-scale artificial intelligence data centers.

AI-related activities include, but are not limited to: developing new AI algorithms and techniques, such as machine learning, natural language processing, and computer vision; creating AI-powered software and hardware products for various applications; medical AI modelling or programming; development of AI chatbots for customer service; AI development for vehicles, and collecting, storing, and managing the vast amount of data needed to train and use AI models;

Please provide 1 to 2 detailed paragraph description explaining how your business or division is primarily engaged in the artificial intelligence (AI) industry or the large-scale AI data center industry, addressing the following criteria: *

1. More than 50 percent of employees at the business or a division of the business are engaged in AI-related activities; or
2. More than 50 percent of the business or a division of the business revenue is generated from AI-related activities; or
3. Both of the above.

Note: The use of AI applications solely for the purpose of supporting your internal business operations does not qualify as being "primarily engaged" in AI-related activities.

In your narrative, include specific examples of AI-related activities, such as:

- Developing new AI algorithms and techniques (e.g., machine learning, natural language processing, computer vision);
- Creating AI powered software or hardware products;
- Medical AI modeling or programming;
- Developing AI chatbots for customer service;
- AI development for vehicles;
- Collecting, storing, and managing data required for AI training and usage.

This information will help us assess your engagement in the AI industry based on the provided criteria.

Based upon your previous response, please upload documents which support the applicant's AI-related activities. These can include documents such as company profile, organizational charts, or other documents that exemplify the AI business activities.

Document	Files
AI-Related Activity *	<div>ⓘ Add Files</div>

Upload a copy of your organizational chart, including all divisions and/or entities connected to the parent company.

Document	Files
Org Chart All Divisions *	<div>ⓘ Add Files</div>

Collaborative Relationship

Collaboration: The applicant will be required to create a collaborative relationship and provide at a minimum, a Letter of Intent ("LOI") at the time of application.

A **“Collaborative Relationship”** means a relationship over the term of the commitment period, which may be renewed annually, between an eligible business and a (1) New Jersey-based public or private research university or universities; (2) technology startup company or companies; and/or (3) incubator(s), accelerator(s), studio(s), or other similar entity or entities wherein a majority of the members of such entity or entities are technology startup companies which benefit from the collaborative relationship. This collaborative relationship is evidenced by measures such as price concessions, artificial intelligence support services, or other measures related to artificial intelligence as determined to be appropriate by the Authority. The net cost value of any collaborative relationship shall be at least 10 percent of the total awarded amount. A collaborative relationship shall not include trade groups, industry associations, venture funds, or similar entities.

Please provide 1 to 2 detailed paragraph description explaining how your business or division will meet the above Collaborative Relationship and provide any details regarding any preliminary conversations with an entity.

DOCUMENT UPLOAD

Upload a letter of intent evidencing a proposed collaborative relationship.

Collaborative Relationship

Collaboration: The applicant will be required to create a collaborative relationship and provide at a minimum, a LOI at the time of application.

A “Collaborative Relationship” means a relationship over the term of the commitment period, which may be renewed annually, between an eligible business and a (1) New Jersey-based public or private research university or universities; (2) technology startup company or companies; and/or (3) incubator(s), accelerator(s), studio(s), or other similar entity or entities wherein a majority of the members of such entity or entities are technology startup companies which benefit from the collaborative relationship. This collaborative relationship is evidenced by measures such as price concessions, artificial intelligence support services, or other measures related to artificial intelligence as determined to be appropriate by the Authority. The net cost value of any collaborative relationship shall be at least 10 percent of the total awarded amount. A collaborative relationship shall not include trade groups, industry associations, venture funds, or similar entities.

- 10-Year AI Collaboration:** The business partners with a:
 - (1) New Jersey-based public or private research university or universities;
 - (2) technology startup company or companies; and/or
 - (3) incubator(s), accelerator(s), studio(s), or other similar entity or entities wherein a majority of the members of such entity or entities are technology startup companies which benefit from the collaborative relationship.
- Support Services:** The partnership includes benefits such as price discounts on research services, AI development assistance, and access to specialized AI resources.
- Minimum Value Requirement:** The total value of the collaboration must equal at least 10% of the total awarded amount.

Please provide 1 to 2 detailed paragraph description explaining how your business or division will meet the above Collaborative Relationship and provide any details regarding any preliminary conversations with an entity. *

Upload a letter of intent evidencing a proposed collaborative relationship.

Document	Files
Collaborative LOI *	<div>Add Files</div>

Previous

Next

Project Location in New Jersey

Applicant must enter at least 1 project location to move forward with the application. Click on the blue button **"Add Location"** to enter in the project location.

Project Location in New Jersey

In this section, we will collect information about the New Jersey location(s) that you are considering for your project.

Add Location

Application Location ID	Address Line 1	Address Line 2	City	State	Zip Code
There are no records to display.					

Previous

Next

Pop-out box will appear, and you will be asked questions about the project location.

Please provide below details about the project location in New Jersey.

Is this location the Primary Location? *

Select

If you have more than one location, you will be asked to designate one location as the primary location.

Primary Project Address

Mailing Address 1 *

Mailing Address 2

Mailing Zip Code *

Mailing City *

Mailing State/Province/Region *

NJ

Block *

Lot *

Qualified Business Facility and Usage

Throughout the remainder of the application we will refer to the facility at your proposed New Jersey location as the "Qualified Business Facility" or "QBF".

Will the Qualified Business Facility at the project location be leased or owned by the applicant/affiliate? *

Select

What is the total square footage of the QBF? *

Of the total square footage, what is the useable or leased square footage for the applicant within the QBF? *

Only 1 address may be designated as the primary location.

Note: The grey box is not a text box, please use the magnifying glass to the right of the box to select the correct Zip Code and City.

Eligible New Full-Time Jobs in New Jersey

Eligible New Full-time Jobs Requirements

Each eligible new Full-Time position must offer an annual salary that is at least 120% of the county median income where the QBF is located. If a qualified business facility consists of a complex of buildings spanning multiple counties, the county with the highest median salary among those counties shall be used as the reference for determining salary requirements.

AI-Related Job Function:

A minimum of 50% of the job's responsibilities must be directly related to artificial intelligence (AI) activities, including but not limited to development, deployment, management, research, or support of AI systems and technologies.

Health Benefits:

Health benefits must be offered within 90 days of the employee's start date.

Income Tax Withholding:

At least 80% of the employee's gross income tax must be withheld and remitted to the State of New Jersey.

Work Location Requirement:

Employees must perform at least 80% of their work hours physically within the State of New Jersey.

DOCUMENT UPLOAD

Upload a copy of the Employee Information Worksheet for New Full-Time Jobs. Enter the applicable data for each New Full-Time job in New Jersey.

[Click here to download a copy of the Employee Information Worksheet for New Full-Time](#)

Eligible New Full-Time Jobs in New Jersey

Eligible New Full-time Jobs Requirements

Each eligible new Full-Time position must offer an annual salary that is at least 120% of the county median income where the QBF is located. If a qualified business facility consists of a complex of buildings spanning multiple counties, the county with the highest median salary among those counties shall be used as the reference for determining salary requirements.

AI-Related Job Function:

A minimum of 50% of the job's responsibilities must be directly related to artificial intelligence (AI) activities, including but not limited to development, deployment, management, research, or support of AI systems and technologies.

Health Benefits:

Health benefits must be offered within 90 days of the employee's start date.


Income Tax Withholding:

At least 80% of the employee's gross income tax must be withheld and remitted to the State of New Jersey.

Work Location Requirement:

Employees must perform at least 80% of their work hours physically within the State of New Jersey.

Upload a copy of the Employee Information Worksheet for New Full-Time Jobs. Enter the applicable data for each New Full-Time job in New Jersey.

Document	Files
Employee Worksheet *	<div><div> Add Files</div><div>Click here to download a copy of the Employee Information Worksheet for New Full Time Jobs</div></div>

Will all the eligible New Full-Time jobs receive wages that are equal to or greater than 120% of the county median wage in which the project is located in? (For projects with multiple QBF locations, the Authority will apply the higher county median wage to determine eligible positions.) *

Select

☐ I acknowledge that any incented jobs associated with this application must spend 80% of their time in New Jersey and are subject to "New Jersey Gross Income Tax Act," N.J.S.A. 54A:1-1 et seq. *

☐ I acknowledge that any jobs associated with this application must be offered health benefits under a health plan no later than 90 days after the date of hire. *

What is the total number of eligible New Full- Time Jobs being created by the applicant and contributing affiliates in New Jersey(Provide an aggregated number, details of all these jobs should be mentioned in the document asked to be attached above)? *

Current Existing NJ Operations

In this section, we will collect additional information about any New Jersey location(s) currently occupied by the applicant, its contributing affiliates or parent company (not including remote employee locations).

Is the applicant company or a contributing affiliate currently located in or operating in New Jersey?

IF YES

Click on the blue button “Add Location” to enter in the current existing NJ operations including doc WR-30 Filings for the baseline of current New Jersey employment.



Create

Select which entity operates this facility (select all that apply) *

Select

Current NJ Operation Location Address

Country *

United States

Address Line 1 *

Enter a location

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

Address Line 2

Zip Code *

City *

State *

Current Existing NJ Operations

In this section, we will collect additional information about any New Jersey location(s) currently occupied by the applicant, its contributing affiliates or parent company (not including remote employee locations).

Is the applicant company or a contributing affiliate currently located in or operating in New Jersey? *

Yes

NJEDA must establish a baseline of total non-retail employment for the applicant and any contributing affiliate at the end of the last tax period prior to application.

Please report each Non-Retail location for the applicant, contributing affiliates, and affiliate parent. Non-retail locations may include: offices, R&D facilities, industrial, data center, production facilities, or warehousing.

Add Location

Address Line 1 ↓

Address Line 2

City

State

Zip Code

There are no records to display.

To help NJEDA establish a baseline of current New Jersey employment, please upload the WR-30 filing(s) for the applicant and any official affiliates for the last tax period prior to application.

Document

WR-30 *

Files

Add Files

Previous

Next

Project Costs

To be eligible for the Next NJ Program-AI, the minimum capital investment **must be equal to or greater than \$100,000,000**.

The NJEDA will use the below information for several different calculations, so please read these instructions carefully and be as thorough as possible in your answers to this section.

As part of our evaluation process, NJEDA will first review all cost **estimates** for the proposed New Jersey location. This evaluation will include looking at the applicant's justification and supporting documents. Please include relevant information on assumptions or how estimates were derived in the justification field for each category cost estimate.

Please provide any supporting documentation that will help NJEDA staff validate these assumptions. It is not necessary to upload the same supporting document multiple times. If you are using the same supporting document to support more than one cost, you may upload the document a single time.

NJEDA will also utilize the validated cost categories to determine the New Jersey project's estimated Eligible Capital Investment. Eligible Capital Investment will be calculated using the following categories:

- Hard Construction Costs for new construction – Site Preparation and Construction
- Hard Construction Costs for renovation, repairs, or improvements
- Security Systems
- Site-related utilities
- Transportation Infrastructure
- Environmental Components
- Furnishings and Equipment
- Furnishings and Equipment – Capital Lease
- Furnishings and Equipment – Exclusions
- Connectivity and Telecommunications
- Energy Systems
- Cooling Technologies
- Soft Costs and Software (not exceed 20 percent of the total eligible capital investment)
- Landlord Contributions

Project Costs

In this section, we will collect information relating to project costs at the QBF.

Please upload a completed "Project Cost Analysis Worksheet" for the entire Project. The Total Eligible Project Cost in this worksheet should match the Total Eligible Project Cost (or uses) reflected in supporting documents for this application. The "Project Cost Analysis Worksheet" will also allow you to identify soft costs incurred prior to application.

[Click here](#) to download a copy of the "Project Cost Analysis Worksheet" to be used in this section. Once completed, please upload the worksheet below.

Document	Files
Project Cost Analysis *	Add Files

Based upon the "Project Cost Analysis Worksheet" provided, your Total Eligible Project Cost at New Jersey Project Location(s) *

Please ensure this total amount matches the "Total" provided on the "Project Cost Analysis Worksheet."

Based upon the "Project Cost Analysis Worksheet" provided, what is the Total Eligible Soft Costs? Soft Costs are capped at 20% of the Total Eligible Capital Investment at New Jersey Project Location(s)? *

Please provide any supporting documentation that will help NJEDA staff validate the project cost assumptions including detailed project budgets, invoices for soft costs previously incurred, cost estimates provided by prospective general contractors, and any other available 3rd party cost estimates.

Document	Files
Project Cost Supporting documents *	Add Files

[Previous](#)

[Next](#)

DOCUMENT UPLOADS

Project Cost Analysis

[Click here](#) to download the Project cost Analysis Worksheet

Sources of Funding

In this section, we will need more information about the sources of funding the applicant intends to utilize to support the total eligible capital investment.

All funding sources **must equal or exceed the total eligible capital investment** amount for the New Jersey project location.

Click on the blue button **"Sources of Funding"** to enter each individual Funding Source.

DOCUMENT UPLOADS

Supporting documentation is required for each funding source.

IF YES

Additional information will be requested around the development subsidies.



Sources of Funding

In this section, please identify Sources of Funding.

Based on the project costs reported in the prior section, the total eligible capital investment associated with this project for the New Jersey Location is expected to be:

\$1,000,000,000.00

In this section, we will need more information about the sources of funding the applicant intends to utilize to support the total eligible capital investment.

All funding sources must equal or exceed the total eligible capital investment amount for the New Jersey project location.

Add Source of Funding

Name of Funding Source ↑	Funding Source Type	Funding Amount
There are no records to display.		

Total Identified Funding Source Amount

0.00

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

Select

Prevailing Wage Requirements

Prevailing Wage Requirements

Prevailing Wage Requirements The Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4, and prevailing wage requirements, N.J.S.A. 34:1B-5.1, shall apply to construction contracts at the Qualified Business Facility undertaken in connection with or as a condition of tax credits received under the program. This subsection does not mandate affirmative action or prevailing wage requirements for construction that begins more than three years after the start of the tax credit distribution period.

In addition to the requirements in above the Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4, and prevailing wage requirements, N.J.S.A. 34:1B-5.1, shall apply to productions undertaken with financial assistance received under the Next NJ Program - AI. All contractors and subcontractors must be registered with the Public Works Contractor Registration Act. 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 your NJEDA representative 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. *
- ☐ I acknowledge that any building services on this project is subject to Prevailing Wage. *
- ☐ I acknowledge that any contractor working on this project must be registered with the New Jersey Department of Labor (DOL) prior to the start of construction. *

Notice Form

Please submit a completed Notice Regarding Affirmative Action/Prevailing Wage, Green Buildings and Business Services Requirements.

Document	Files
Notice Form *	<div><div><div><div></div></div><div>Add Files</div></div></div> <div>Click here to please access the Notice Regarding Affirmative Action/Prevailing Wage, Green Buildings and Business Services Requirements form.</div>

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? *

Select



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? *

Select



Previous

Next

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. New Jersey State law prohibits certain property owners, developers, and operators of projects from receiving or continuing to receive an economic incentive.

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

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

- ☐ Small Business Enterprise (SBE)
- ☐ Disadvantaged Business Enterprise (DBE)
- ☐ Minority-Owned Business Enterprise (MBE)
- ☐ Woman-Owned Business Enterprise (WBE)
- ☐ Veteran-Owned Business Enterprise (VOB)
- ☐ Disabled Veteran-Owned Business Enterprise (DVOB)
- ☐ None of the above
- ☐ Prefer not to answer

Additional DE&I Information

In this section, we would like more information about any actions your 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 Representative for Certifications

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

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

If you are an Authorized Representative, you will be prompted to fill out these pages throughout the application.

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

Applicant Representation

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

Yes

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

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

Yes

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

Applicant's General Counsel or Chief Legal Officer

[Previous](#) [Next](#)

Legal Questionnaire

If you are an Authorized Representative, you will be prompted to fill out these pages throughout the application.

[Click here](#) to read the full legal questionnaire.

New Jersey Economic Development Authority Legal Questionnaire

Applicant Name: test application for sample app

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 1978) 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? *

Select

Applicant-Owned Affiliates

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

ADD APPLICANT-OWNED AFFILIATES

Entity

FEIN #

There are no records to display.

Other Affiliates

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

ADD OTHER AFFILIATES

Entity

FEIN #

There are no records to display.

Certification of Non-Involvement in Activities in Russia or Belarus

If you are an Authorized Representative, you will be prompted to fill out these pages throughout the application.

CERTIFICATION OF NON-INVOLVEMENT IN ACTIVITIES IN RUSSIA OR BELARUS

Program Name: The Next New Jersey Program – AI

Applicant Name: test application for sample app

Applicant DSA:

Pursuant to N.J.S.A. §232-80.1, et seq. (P.L. 2021, 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 identified on the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, available here: (<https://sanctions.easch.ofac.treas.gov/>). 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 judgment or suspension of the party. By signing this certification, Applicant agrees that it has an affirmative ongoing obligation to disclose to NJEDA whether it appears on the OFAC list for any reason, during the application process and the agreement term.

Certification

I, the undersigned, have read and reviewed the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, 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 OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus and is not engaged in activities related to Russia or Belarus. OR

Select

B. That I am unable to certify as to "A" above because the Applicant is identified on the OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus. OR

Select

C. That I am unable to certify as to "A" or "B" above because the Applicant, though identified on the OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus, is engaged in activities in Russia or Belarus consistent with federal law, regulation, license or exemption. A detailed, accurate and precise description of how the Applicant's activity related to Russia and/or Belarus is consistent with federal law is set forth below, including a copy of the license or listing the exemption. (Attach Additional Sheets If Necessary.)

Select

Authorized Signature

I understand that if the above statements are not fully false, I shall be subject to penalty:

Applicant Authorized Representative

Name

Arnie Dragodino

Title

test

Applicant PCN

30-926233

E-Signature of Applicant Authorized Representative *

Definitions

"Economic development subsidy" means the provision of an amount of funds to a recipient with a value of greater than \$25,000 for the purpose of stimulating economic development in New Jersey, including, but not limited to, any investment, bond, grant, loan, loan guarantee, matching fund, tax credit, or other tax expenditures.

Previous

Next

Applicant Certifications

If you are an Authorized Representative, you will be prompted to fill out these pages throughout the application.

Applicant Certifications

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

I, Annie D'agostino, 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. *

Select

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. *

Select

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. *

Select

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. *

Select

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

Select

Previous

Next

Upload Certifications

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

[Legal Questionnaire](#)

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

[Certification of Application](#)

Upload Certifications

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

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

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

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

[Legal Questionnaire](#)

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

[Certification of Application](#)

Document	Files
Legal Questionnaire *	<div>Add Files</div>

Document	Files
Certification of Non-Involvement in Prohibited Activities in Russia or Belarus Pursuant to P.L. 2022, C. 3 *	<div>Add Files</div>

Document	Files
Certification of Application *	<div>Add Files</div>

Application Fee & Payment Method

The application fee is based on the total number of eligible new full-time jobs:

100-149 new full-time jobs = \$10,000

150-199 new full-time jobs= \$25,000

200+ new full-time jobs = \$50,000

You can pay the fee via Credit Card, Mail Check or Wire.

If you select Credit Card, you will continue through to the payment portal upon hitting the “Go to Payment Page” on the next page.

Payment Method

There is a \$25,000.00 non-refundable application fee. The NJEDA will not begin review of your application until the application fee has been received.

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

Select form of payment: *

Select

Select

Credit Card

Mail Check

Wire

Previous

Next

Payment Details

Applicant Organization Name

test application for sample app

Application Fee Request ID

FREQ-0346452

Fee Amount

\$ 25,000.00

Previous

Go To Payment Page

Application Fee & Payment Method (cont'd)

If you are paying via Check or Wire, the instructions will be provided below.

Please be advised that the NJEDA must confirm receipt of check or wire before any review of the application may begin.

Please include the program name of NEXT NJ Program-AI, Applicant Name and Application # on all payments.

Mail Check
Pay by Check Instructions: Please be advised that NJEDA must confirm receipt of check before any review of the application may begin. Application ID#: CAPP-00030060 Amount Due: \$25,000.00 Make check payable to: New Jersey Economic Development Authority Reference: Please include program name of Next NJ-AI, Applicant ID#: CAPP-00030060 Mailing Address: New Jersey Economic Development Authority 36 West State St PO Box 990 Trenton, NJ 08625-0990
Wire
Pay by Wire Instructions: Application ID#: CAPP-00030060 Amount Due: \$25,000.00 Bank Name: Wells Fargo Bank Address: 50 East State St / Trenton, NJ 08625 ABA Number: 121 000 248 Account Number: 2100 00910 0456 Account Name: NJEDA Operating Reference: Please include program name of Next NJ-AI, Applicant Name and Applicant ID#: CAPP-00030060 If these wire instructions need to be confirmed by phone call, please contact Elaine Harder, NJEDA Director of Accounting Services, at 609-940-9429

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 *

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

Full Name *



[Generate a new image](#)

[Play the audio code](#)

Enter the code from the image

[Previous](#)

[Submit Application](#)

Confirmation

Confirmation

RE: **CAPP-00030060**

Dear **Annie D'agostino**,

Thank you for your submission. This email serves as confirmation that the NJEDA has received your application for the Next NJ Program-AI.

Our team will now begin a completeness review of your application. During this process, we may reach out to request clarification or additional information as needed. Please allow the Next NJ Program-AI team up to two (2) weeks to contact you.

Once the NJEDA determines that your application is complete, we will email a CEO certification to your CEO. This certification will confirm that all information provided is accurate and must be signed under penalty of perjury in order to proceed with the formal approval review process.

Should you have any questions in the meantime, please don't hesitate to reach out at nextnjai@njeda.gov.

Best regards,

Next NJ Program-AI Team
New Jersey Economic Development Authority (NJEDA)

[Return to homepage](#)



www.njeda.gov/nextnjai



@NewJerseyEDA

njeda.gov

844.965.1125