

Reducing Emissions Through Retrofits, Optimization, Fuel-switching & Innovative Technologies

RETROFIT NJ

Sample Application



Language Access

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



Language Assistance

Is English your primary language? *

< Back Next > Save

2

Free language assistance services are available to you by sending an email to languagehelp@njeda.gov.

NJEDA
ECONOMIC DEVELOPMENT AUTHORITY

RETROFIT NJ: Reducing Emissions through Retrofits, Optimization, Fuel-Switching, and Innovative Technologies Grant Program

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

Language Assistance

Is English your primary language? *

No

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

Yes

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

< Back Next > Save

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

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.

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 *

Legal Counsel

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

Are you, the applicant company, using legal counsel to assist with this application?

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

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 who is assisting with this application? *

Yes No

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email Address *

Accountant

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

Are you, the applicant company, using an accountant to assist with this application?

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

Accountant Contact

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? *

Yes No

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email Address *

Media Contact

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

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

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

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

Company *

Title *

Email Address *

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

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.

Building Information

In this section, we are collecting information about the building(s) which will be undergoing retrofit(s) under this program.

This page will request building information including but not limited to...

- Ownership/Tenancy Information
- Overburdened Community Eligibility
- Property Location Information
- Building Size, Age, Use, and Prior Renovation Information
- Historical Building Occupancy Data
- Historical Energy Consumption Data
- Property Class(es)
- Allow for the additional buildings to be added if necessary

Should you have more than 4 buildings to enter you will be prompted to upload a spreadsheet with the remaining building information.

Building Information

Is the Applicant Organization the owner or tenant of the building where the grant funding will be utilized? *

Is/are the building(s) affected by your proposed project considered "institutional" building(s)? *

Yes No

"Institutional" refers to buildings serving a non-profit or public purpose, such as a library, hospital, public school, institution of higher education, municipal utility, public recreation or cultural facility, or government entity.

If more than one building is proposed for the project, only select YES if all the buildings affected by the project would be considered institutional buildings.

Is/are the building(s) proposed for the project located in an Overburdened Community? *

Yes No

Use the Environmental Justice, Mapping, Assessment, and Protection Tool (EJMAP) to determine if your project is located in an overburdened community [Overburdened Communities | NJ Environmental Justice Mapping, Assessment and Protection Tool \(EJMAP\)](#).

In the section below, provide the information requested about the first building associated with your proposed project.

If your project consists of more than one building, the information for each building should be provided separately. Do not combine details for multiple buildings/address.

Primary Project Location Address *

Address Line 1

Address Line 2

City New Jersey Zip Code

Primary/First Building:

Total Gross Square footage (sq ft): *	Year of Construction *
<input type="text"/>	<input type="text"/>
<small>Gross Square Feet (GSF) measures the total exterior area of a building, including both usable occupant/tenant space as well as structural elements and common areas, such as hallways, elevator shafts, and mechanical rooms.</small>	<small>Provide an estimated year if the exact year of construction is unknown.</small>

Year of Substantial Renovation:	Number of Floors *
<input type="text"/>	<input type="text"/>
<small>If the building was previously substantially renovated following initial construction, please indicate when renovations occurred (approximate year of completion).</small>	<small>Indicate number of enclosed floors above finished grade, including ground floor but not including basement/cellar or roof levels if they are unconditioned (not heated/cooled).</small>

Primary Building Use *

What is the primary use of this building? For example: restaurant, clothing store, pharmacy, etc.

Please describe any additional building uses.

Example: residential apartments, restaurant, clothing store, pharmacy.

Please provide typical building operating days/hours and occupancy level(s). *

or drag files here.

Project Information

In this section, we are collecting information about the intended project scopes.

This page will request project information including but not limited to...

- Current Project Status
- Intended Scope of Work
- Project Schedule
- Photographs of Current Conditions and Systems
- Intent to Apply for Green Building Certifications
- Emissions Reduction Data and Calculations

Project Information

Has the project already started or completed construction?
 Yes No
This program's grant funding can only be used for projects that have not yet started construction.

Does your project involve new construction and/or substantial rehabilitation/redevelopment?
 Yes No
New construction and substantial rehabilitation/redevelopment are not eligible under this grant. However, if the new construction or substantial rehabilitation/redevelopment project is a portion of a larger retrofit project that includes a connected building(s) otherwise qualified for the grant program, then expenses associated with the energy system for the new construction or substantial rehab/redevelopment are eligible. Substantial rehabilitation shall have the same meaning as "reconstruction" in N.J.A.C. 5:23-6.3.

Please describe your proposed project (scope of work, spaces affected, emissions and energy reducing measures being implemented). *

Attach optional supporting documentation to explain your project scope if desired:

or drag files here.

Additional supporting documents to help explain the project scope are not required, but can include design drawings, project presentation, or similar information.

Please select which categories of work your project entails. *

- On-site renewable energy generation (solar, etc.)
- On-site energy storage (battery, thermal, etc.)
- Electrification/Fuel Switching of Heating Systems
- Refrigerant Replacement for Cooling Systems
- Energy Efficiency Improvements (envelope, heat recovery, lighting upgrades, green roofs/cool roofs, electrifying appliances, etc.)
- Thermal Energy Network

With the exception of projects involving thermal energy networks, your proposed project must address at least 3 of these categories.

A Thermal Energy Network is a shared system that delivers heating and/or cooling to multiple buildings through insulated pipes, using centralized or distributed energy sources such as geothermal, waste heat, or heat pumps.

Does your proposed project include the installation of Electric Vehicle Chargers? *

Electric vehicle charging infrastructure can optionally be included in project scopes.

Please upload a Project Schedule spreadsheet using NJEDA template *

or drag files here.

Spreadsheet template is available [here](#).

Please upload photos of the existing building space. *

or drag files here.

Include at least 1 photo for each interior or exterior space affected by the project. Note, if similar spaces are impacted, can include a representative photo.

Grant Information

In this section, we are collecting information about the requested grant award.

This page will request project information including but not limited to...

- Estimated Project Cost
- Requested Grant Amount
- Requested Grant Amount Per Ton of CO₂e Avoided
- Cost Estimates for Soft and Hard Costs
- Cost Estimates for Equipment
- Additional Incentives being applied for
- Documentation Demonstrating the Availability of Funds Plus a 10% Contingency to Complete the Project

Grant Information

What is the total estimated eligible cost of your project? *

Total eligible cost must be a minimum of \$5,000,000.

Please provide the cost estimate budget spreadsheet using NJEDA template. *

or drag files here.

Spreadsheet is available [here](#).

What is the total requested grant award? *

Grant awards will be calculated based on eligible project costs. Ineligible project costs will not be factored into EDA's calculation of grant award.

Please provide the requested grant dollar amount per ton of CO₂e avoided over the project lifetime. *

For every \$250 in requested NJEDA grant award, one ton of CO₂e must be reduced/avoided over the project's useful life.

If applicable, please attach supporting quotes/cost estimates for any design, commissioning, and/or engineering work performed within the past 18 months for the proposed project AND/OR for any such work to be performed after application submission.

or drag files here.

No more than 20% of total project costs can be allocated for design, commissioning, engineering or other related professional services - and these costs must not include any building construction or maintenance work.

Please attach supporting quotes/cost estimates from Public Work Registered Contractor(s) for the proposed scope of work associated with energy or emissions reductions. *

or drag files here.

Quote(s) must be from contractor(s) that are registered with New Jersey Department of Labor as a Publics Works Registered Contractor with costs consistent with New Jersey State prevailing wage rates.

If applicable, please attach supporting quotes/cost estimates for any equipment and/or material that will be procured directly by the Applicant (separately from the Public Work Contractor quotes supplied) and are related to energy or emissions reductions (if applicable).

or drag files here.

Please provide the total dollar amount expected for any utility, state, or federal level incentive payments that the project may also be applying for or receiving (if applicable).

Additional Information

Provide a “Yes/No” response to indicate whether the applicant's company is involved in political or lobbying activities.

If you answer yes to this question, you will be prompted to upload a completed [Political Activities/Lobbying Questionnaire](#).

Additional Information

Is the applicant company involved in political or lobbying activities?

Yes No

Additional Information

Is the applicant company involved in political or lobbying activities?

Yes No

Upload Your Political Activity Questionnaire Form *

or drag files here.

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

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

< Back

Next >

Save

5

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.

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). *

Program Acknowledgements

In this section, you will be asked to acknowledge the program's requirements to meet labor compliance criteria and affirm that use of program funds will not result in duplication of benefits.

Program Acknowledgements

Prevailing Wage and Affirmative Action

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 production facility undertaken in connection with or as a condition of tax credits received under the program. Nothing in this subsection shall be construed as requiring affirmative action or the payment of prevailing wage for construction commencing more than three years after the Authority has issued the grant. 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 this program. 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.

In addition, construction projects may be subject to federal and/or State environmental requirements, including but not limited to, the National Environmental Protection Act and New Jersey Executive Order No. 215 (Kean).

If your project involves new construction, additional information may be required, such as documentation from the New Jersey Department of Environmental Protection (NJDEP).

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.

Duplication of Benefits

- The applicant attests that the applicant has disclosed all sources of financial assistance, insurance proceeds, tax credits, rebates, or other benefits (including utility, state, and/or federal incentives) that have been or will be received for the same project for which the applicant is requesting RETROFIT NJ grant funds, and that receiving RETROFIT NJ funds will not result in a duplication of benefits.

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. 3, Acknowledgments of Applicant, and Certification of Applicant, are to be completed and signed by one of the following:

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

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

If you are an Authorized Representative, you will be prompted to fill out these pages throughout the application (see slides 20-22).

Applicant Representation

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

Yes

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

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

Yes

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

Applicant's General Counsel or Chief Legal Officer

Contact for a Government Entity

General Partner

Principal Executive Officer at or above the minimum level of Vice President

Sole Proprietor

Person with Legal Responsibility for the Application

None of the above

Legal Questionnaire*

In this section we will be collecting the Legal Questionnaire for the applicant.

*This page will only be visible if the individual filling out the application is the authorized representative.

Legal Questionnaire

Applicant Name: Test Business Name

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

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. For the purposes of application for, or ongoing compliance with, Authority-administered programs, this includes:

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

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

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

RELEVANT TIMEFRAMES

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

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

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.

*This page will only be visible if the individual filling out the application is the 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

Applicant Certifications

Application Certifications

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, **[Test Test]**, 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. *

*This page will only be visible if the individual filling out the application is the authorized representative.

Upload Certifications

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

Here you will be prompted to download and then upload signed copies of the acknowledgments and certifications described in Slides 20 through 22.

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 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 *

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.

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

***Municipal/municipal entity applicants of municipalities located in municipalities with 2020 Municipal Revitalization Index (MRI) scores in the top 10% of all municipalities statewide will have the option to apply for a Hardship Waiver Option to waive the \$1,000 application fee. All fee waivers subject to review.**

Fee Acknowledgment

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

Pay by Credit Card Instructions

Application ID#: LPAGR-001

Amount Due: \$1,000.00

Please read this information carefully.

After you fill out the pages remaining for this application and then hit "Submit" on the final page, an email will be sent to shirji@njeda.com. 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.

Note: If a unique Application ID# is not displaying, please hit the save button.

Fee Acknowledgment

Pursuant to N.J.A.C. 19:30-6.7, the Authority may grant a fee waiver when the imposition of a fee would impose an undue financial hardship. Pursuant to this authority, the board is requested to approve a fee waiver for municipal/municipal entity applicants of municipalities located in municipalities with 2020 Municipal Revitalization Index (MRI) scores in the top 10% of all municipalities statewide.

NJEDA will review the request and notify the applicant on approval or denial of the request.

Hardship Waiver Option

Please check this box if you qualify for and are requesting a fee waiver.

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

Electronic Signature

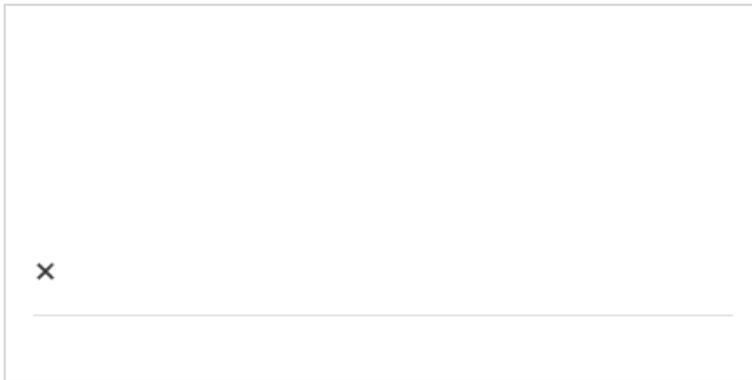
Electronic Signature

I agree to be bound by electronic signatures

Full Name *

Title *

Signature *



Date *

3/12/2023

draw type

Application Submission

Application Submission

Thank you for your interest in the Local Property Acquisition Grant Program.

If you are ready to submit this application to the NJEDA for review, please click the Submit button and then complete your application fee payment following the instructions that will be sent to your email after you hit Submit.

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 *

Date *

1/10/2024

CLICK SUBMIT





<https://www.njeda.gov/retrofit>



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NJEDA