

Historic Property Reinvestment Program

Sample Application

updated 2026-01-14



Historic Property Reinvestment Program

The Historic Property Reinvestment Program is a tax credit program that can be used to leverage the federal historic tax credit program to support rehabilitation projects of identified historic properties.

ELIGIBILITY

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

- Demonstrate that without the tax credit award, the rehabilitation project is not economically feasible.
- Prove that a project financing gap exists and the tax credit award being considered for the project is equal to or less than the project financing gap. Financing gap is not applicable for projects located within a Government Restricted Municipality (GRM) or if total cost of rehabilitation is less than \$5 million.
- Not have commenced any construction or rehabilitation activity at the site of the rehabilitation project prior to submitting an application and will not commence any construction or rehabilitation activity until the execution of the Rehabilitation Agreement, except for limited instances meeting allowable exceptions.
- Include business entity contributed equity of at least 20 percent of the total project costs. An equity contribution is not required for projects with total project costs under \$5 million or for a project located within a Government Restricted Municipality (GRM).
- Meet minimum cost requirements where the cost of rehabilitation for the selected rehabilitation period cannot not be less than the greater of the adjusted basis of the structure or \$5,000.
- For a residential project, the structure must serve a residential rental purpose and also contain at least four dwelling units.
- Be a rehabilitation project.



It is recommended that prior to beginning the application all applicants review the applicant checklist available at: www.njeda.gov/historic-property-reinvestment-program.

Please use this document for guidance purposes only, as the actual application may not be reflected in its entirety within this sample application.

NJEDA Application Center Sign-In Page

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

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

NJEDA Application Center

Home | My Applications | English

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

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

* User name

* Password

☐ Remember me?

[Sign in](#) [Forgot your password?](#)

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

How to Register Your Email Address

- 1. Enter your email, username (can be the same as your email) and password.
Passwords must contain characters from at least three of the following four classes: uppercase, lowercase, digit, and non-alphanumeric (special).
- 2. Once information is filled in click “Register”

NJEDA Application Center

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

[Sign in](#)

Register

[Redeem invitation](#)

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

Register for a new local account

* Email

* Username

* Password

* Confirm password

Register

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

NJEDA

ECONOMIC DEVELOPMENT AUTHORITY

If Your Email is Recognized By the Application Portal

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

The screenshot shows the NJEDA Application Center registration page. At the top, there are navigation links: "Events Page", "Clips", "Dashboards: Kelly...", and "My...". The main header is "NJEDA Application Center". Below the header, there are three buttons: "Sign in", "Register", and "Redeem invitation". The "Register" button is highlighted. Below these buttons, there is a section titled "Register for a new local account". This section contains four input fields: "Email" (with the value "kdombrowski@njeda.com"), "Username" (with the value "NJEDAKdombrowski"), "Password" (with masked characters "*****"), and "Confirm password" (with masked characters "*****"). A "Register" button is located below the input fields. A pop-up message from "programs.njeda.com" is displayed over the registration form. The message reads: "The email address kdombrowski@njeda.com is already in our system. This may be because you have previously applied for other NJEDA programs. Please click OK to email yourself an invitation code which can be used to access this program application." A blue "OK" button is at the bottom right of the pop-up. A large black arrow points to this "OK" button. In the top right corner of the page, there is a "NJEDA - Home" link and a "My Applications" dropdown menu with an "English" link.

programs.njeda.com says

The email address kdombrowski@njeda.com is already in our system. This may be because you have previously applied for other NJEDA programs. Please click OK to email yourself an invitation code which can be used to access this program application.

OK

NJEDA Application Center

Sign in Register Redeem invitation

Register for a new local account

* Email kdombrowski@njeda.com

* Username NJEDAKdombrowski

* Password *****

* Confirm password *****

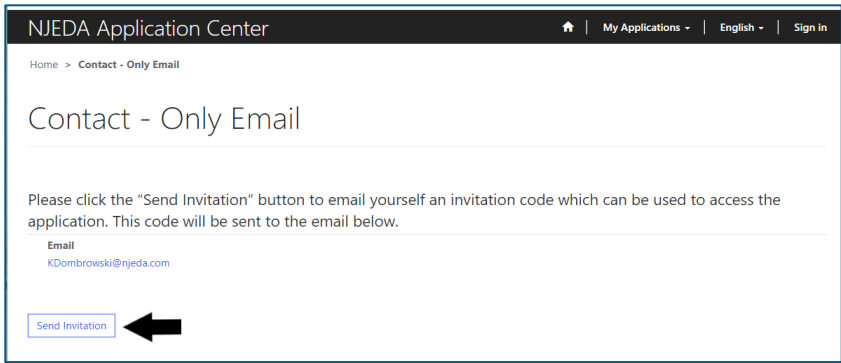
Register

NJEDA - Home

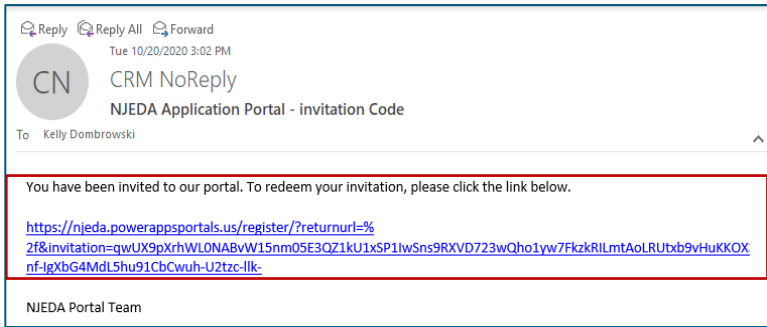
My Applications English

Redeeming An Invitation Code

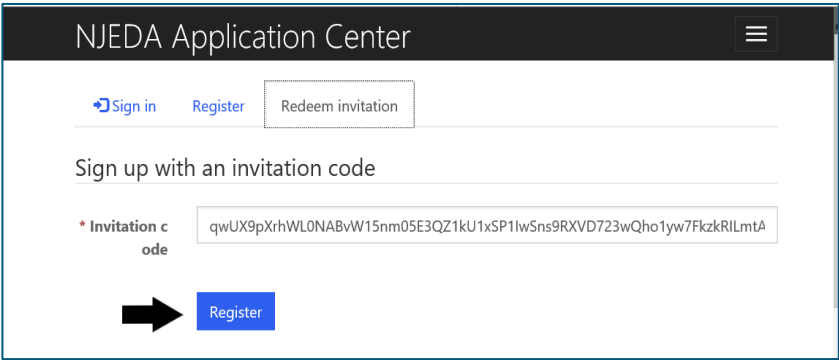
1. Click **SEND INVITATION** to email yourself an invitation code.



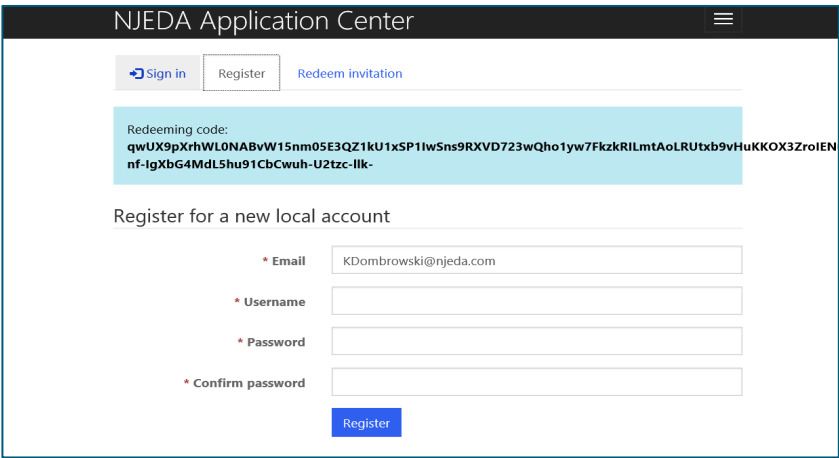
2. Check your email (including junk/spam) for an email from “CRMNoReply”. Click the link in that email.



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



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



Setting Up Applicant Profile

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

Setting up your Profile

1. Once you click Register, you must enter
“Your Information”

2. First Name, Last Name and Phone
Number is Required

3. Confirm your email address is correct
(this will be the primary way the NJEDA
contacts your business)

4. Once complete, click “Update”

Home > Profile

Profile



Profile

Security

Change password

Change email



Manage external authentication

Please provide some information about yourself.

If you need language assistance, please send NJEDA your name, spoken language and telephone number to languagehelp@njeda.com

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



Your information

First Name *

Last Name *

E-mail

sample@sample.com

Phone *

Organization Name

Title

Web Site

Update

Confirming Email

Confirming Your Email

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



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

Home > Profile

Profile



First Last

Profile

Security

Change password

Change email



Manage external authentication

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

! Your email requires confirmation.

Confirm Email



First Last

Profile

Security

Change password

Change email



Manage external authentication

Confirm E-mail

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

E-mail

sample@sample.com

Trouble Logging Into the Portal?



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

NJEDA Application Center Sign-In Page

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

NJEDA Application Center

My Applications

Compliance

English

Sign in

NJEDA Online Application Center

Welcome to the NJEDA's online application Center.

To register for access to submit an application on this website, please [review this link for details](#). For additional questions, call NJEDA at 1-844-965-1125

Interested in learning more? Please visit us at [NJEDA.gov](#)

Please DO NOT use Internet Explorer as your browser to complete this application as it is unsupported and may cause delays to your application processing. Alternative browsers include 'Microsoft Edge,' 'Chrome,' or 'Safari.'

Questions about submitting your application? Please contact NJEDA Customer Care at 844-965-1125

Aspire

Asset Activation Grant

Brownfields Redevelopment Incentive

Child Care Facility Improvement Grant Phase 1

COVID Phase 4 Grant

Emerging Developers

Food Desert Tax Credit

Food Security Planning Grant

Green Workforce Training Grant Challenge

Historic Property Reinvestment

Henri/Ida Business Assistance Grant

Innovation Evergreen Fund - Tax Credit Auction

Click here to
begin application

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ECONOMIC DEVELOPMENT AUTHORITY

Start Application

Read the welcome page information before starting your application.

Click **CREATE** button to start application.

Please note, all fields throughout the application that are denoted with a red asterisk (*) are required fields. An applicant can not progress past an application section if required information/uploads are not provided.

NJEDA Application Center

Home > Historic Property Reinvestment Program Application

Historic Property Reinvestment Program Application

The Historic Property Reinvestment Program focuses on historic preservation as a component of community development. The Program encourages long-term private investment into the State, while preserving properties that are of historic significance. The Program can be used to leverage the Federal Historic Tax Credit Program to incentivize rehabilitation of identified historic properties.

The Historic Property Rehabilitation Program awards are calculated based on a percentage of the cost of rehabilitation (eligible costs), with the percentage dependent on both whether the project includes a qualified property or a transformative property and on the location of the project. Most eligible projects can receive tax credits worth up to 50 percent of eligible costs with a maximum project cap of \$8 million for qualified properties. Eligible projects located within a qualified incentive tract or in government-restricted municipalities can receive tax credits worth up to 60 percent of eligible project costs with a maximum project cap of \$12 million for qualified properties. Transformative projects can receive tax credits worth up to 45 percent of eligible project costs with a maximum project cap of \$50 million.

"Business entity", "developer" or "applicant" means a person who enters or proposes to enter into a rehabilitation agreement pursuant to the provisions at N.J.S.A. 34:18-272 and that has or will have site control over the qualified property or transformative property, including, but not limited to, a lender that completes a rehabilitation project, operates a rehabilitation project, or completes and operates a rehabilitation project.

"Co-applicant" means an entity that is non-profit for taxation purposes under the provisions of Section 501(c)(3) of the Internal Revenue Code; contributes capital, real property, or services related to the project that directly affect and serve the anticipated residents, tenants, or customers of the tenants of the redevelopment project; and enters into a participation agreement with the business entity that specifies the co-applicant's participation in the redevelopment project.

"Rehabilitation project" means a specific construction project or improvement or phase of a project or improvement undertaken by a business entity that includes the rehabilitation of a qualified property, or transformative property.

"Qualified property" means a property, including a structure or structures, site improvements, and landscape features, that is assessed as real property, that is used for a commercial purpose, a residential rental purpose, provided the structure or structures contain at least four dwelling units; or any combination thereof; that is located in the State of New Jersey; that is [a] income producing [property]; and that is:

1. Individually listed, or located in a district listed on the National Register of Historic Places in accordance with the provisions of chapter 3021 of Title 54, United States Code (54 U.S.C. 1302101 et seq.), and if located within a district, certified by the Officer as contributing to the historic significance of the district; or
2. Individually listed, or located in a district listed on the New Jersey Register of Historic Places pursuant to P.L. 1970, c. 268 (N.J.S.A. 13:18-15.128 et seq.), and if located within a district, certified by the Officer as contributing to the historic significance of the district; or
3. Individually designated, or located in a district designated, by the Pinelands Commission as a historic resource of significance to the Pinelands in accordance with the Pinelands comprehensive management plan adopted pursuant to the "Pinelands Protection Act," P.L. 1979, c. 111 (N.J.S.A. 13:18A-1 et seq.), and if located within a district, certified by the Pinelands Commission as contributing to the historic significance of the district; or
4. Individually identified or registered, or located in a district composed of properties or structures and such district is identified or registered, for protection as significant historic resources in accordance with criteria established by a municipality in which the property, structure or district is located if the criteria for identification or registration has been approved by the Officer as suitable for substantially achieving the purpose of preserving and rehabilitating buildings of historic significance within the jurisdiction of the municipality, and if located within a district, certified by the Officer as contributing to the historic significance of the district; or
5. Preliminarily determined by the National Park Service to be of historic significance in accordance with the requirements of 36 C.F.R. 67.3 and 36 C.F.R. 67.4, and within one year of the issuance of the tax credits, listed on the New Jersey Register of Historic Places in accordance with the "New Jersey Register of Historic Places Act," N.J.S.A. 13:18-15.128, et seq. and the New Jersey Register of Historic Places rules, N.J.A.C. 7:4-1, et seq., as adopted by the Department of Environmental Protection and administered through the Historic Preservation Office.

"Transformative property" means a structure, including its site improvements and landscape features, assessed as real property that is:

1. An income producing property, not including a residential property, whose rehabilitation the Authority determines will generate substantial increases in State revenues through the creation of increased business activity within the surrounding area;
2. Individually listed on the New Jersey Register of Historic Places pursuant to N.J.S.A. 13:18-15.128 et seq., and which, before the enactment of N.J.S.A. 34:18-269 et seq., received a determination of eligibility from the Keeper of the National Register of Historic Places in accordance with the provisions at 36 CFR Part 60; and
3. Located within a one-half mile radius of the center point of a transit village, as designated by the New Jersey Department of Transportation, and located within a city of the first class, as classified under N.J.S.A. 40A:6-4, or located within a government-restricted municipality.

"Archaeology and historic preservation standards" means the Secretary of the Interior's Standards and Guidelines for Archeology and Historic Preservation, 48 Fed. Reg. 44716, as updated and revised by the National Park Service.

The full application requires detailed information and supporting documentation about your company, affiliates, and the proposed project for which you are applying for tax credits. Please be advised that the application fee is **non-refundable**.

The application is broken down into various sections. You will not be able to proceed further into the application without completing all required fields and uploads within the current section. Progress on the application can be saved as you complete each section. At all times, you will be able to go back to sections that you have already completed.

This full application may take several hours to complete. Please read the prompts to questions carefully and provide professionally written responses that address all details requested in the questions in the suggested length of text.

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

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

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

Uploaded file names should:

- Be identifiably connected to the project.
- Accurately describe file contents, application element, and denote date modified or file version number

All applications submitted under the Historic Property Reinvestment Program will be evaluated based on pre-established evaluation criteria. To receive a tax credit award, a business entity's application must receive a minimum score of 50 out of 100 maximum score. The applicant is strongly encouraged to carefully review the entirety of the application and all attachments and confirm that all information submitted is accurate and complete prior to submission. No changes or additions will be permitted once the application is submitted.

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

In the event of any questions, please contact: C. Aidia Milsted, Director, Historic Preservation, at HistoricTaxCredit@njeda.gov

Create Historic Property Reinvestment Program Application

Common Application ID	Applicant Organization Name	Applicant Entity Type	Federal Employer Identification Number (FEIN)	Created On	Full Application Submitted	Application Status
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NJEDA

ECONOMIC DEVELOPMENT AUTHORITY

Language Access

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

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

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

Language Access

Is English your primary language? *

Language Access

Is English your primary language? *

No

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

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? *

Next

Primary Point of Contact

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

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

Is the Primary Point of Contact the CEO?*

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

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

Primary Point of Contact

Throughout the life of a project – from application, to approval, to closing, and to certification/servicing – NJEDA will need to engage with various members of your team. This section collects contact information for individuals we may need to speak with as part of this project.

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

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

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Email Address Confirmed *

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

Phone Number and Extension (if available) *

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

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

Legally authorized representative means one of the following:

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

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

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

Authorized Representative

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

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

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

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

Authorized Representative

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

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Email Address Confirmed *

Phone Number and Extension (if available) *

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

Authorized Representative Address

Country *

United States

Street Address 1 *

Enter a location

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

Street Address 2

Suite, Apt, Floor, etc.

City *

State / Province *

Zip / Postal Code *

Chief Executive Officer/Owner/Equivalent

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

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

Chief Executive Officer/Owner/Equivalent

If the primary point of contact does not hold this role, please provide the contact information for the owner, CEO, or equivalent highest-ranking executive for the applicant.

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Email Address Confirmed *

Phone Number and Extension (if available) *

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

Chief Executive Officer/Owner/Equivalent Address

Country *

United States

Street Address 1 *

Enter a location

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

Street Address 2

Suite, Apt, Floor, etc.

City *

State / Province *

Zip / Postal Code *

Previous

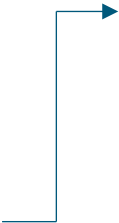
Next

Consultant Information

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

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

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



Consultant Information

While not required, we understand that some applicants may choose to utilize consultants for support on tax credit applications. While the NJEDA will direct all communications to the Primary Point of Contact, please also provide us with information about any consultants supporting you on this application.

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

Yes

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email *

Email Confirmed *

Phone Number

Provide a telephone number

Is the Consultant a Registered Governmental Affairs Agent? *

Legal Counsel

If approved for tax credits, NJEDA will utilize form contractual documents, such as an approval letter and a commitment agreement. Applicants will have limited opportunity to request non-standard modifications of the agreements. However, NJEDA will often work with an applicant’s legal counsel to answer questions on these agreements.

Would you like to designate a Legal Counsel Contact ?

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

Legal Counsel

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

Would you like to designate a Legal Counsel Contact? *

Yes

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email *

Email Confirmed *

Phone Number *

Provide a telephone number

Is the Legal Counsel a Registered Governmental Affairs Agent? *

Accountant Information

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

Would you like to designate an Accountant Contact?

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



Accountant Information

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

Would you like to designate an Accountant Contact? *

Yes

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email *

Email Confirmed *

Phone Number

Provide a telephone number

Media Contact

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

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

Media Contact

NJEDA often works with an applicant company's public relations or media relations representatives on press releases and press inquiries regarding approved projects. If you would like, please provide the contact information for the applicant company's Media Contact that will support on this project.

Would you like to designate a Media Contact? *

Yes

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email *

Email Confirmed *

Phone Number

Provide a telephone number

Applicant Organization (1/3)

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

Applicant Organization

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

Applicant Organization Name *

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

Applicant Doing Business As (DBA)

Does your business operate under a different name?

Certificate of Alternate Name

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

Document	Files
Certificate of Alternate Name	<div>Add Files</div>

Applicant Entity Type *

What is the ownership structure of the applicant?

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

Date Established *

MM/DD/YYYY

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 *

Enter a location

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

Street Address 2

City *

State / Province *

Zip / Postal Code *

Applicant Organization (2/3)

Upload applicant formation documents.

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

Provide a high-level description of the applicant company.

Applicant Country of Incorporation/Formation *

United States

Applicant State of Incorporation/Formation *

Please upload any formation documents for the Application Organization

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

Sole Proprietor: Provide a [Certificate of Trade Name](#) (filed with the county clerk)

LLC: Provide a [Certificate of Formation](#) if applicable and / or [Operating Agreement](#) if applicable

Corporation: Provide a [Certificate of Incorporation and Bylaws](#)

NonProfit: Provide a [Certificate of Incorporation and Bylaws](#)

Out of State: If your entity was formed out of state but operates within the State of New Jersey, you must file a Certificate of Authority when registering the business in New Jersey and provide that certificate.

Document	Files
Formation Document(s) *	<div>Add Files</div>

Applicant Federal Employer Identification Number (FEIN) *

The 9 digit Federal Tax ID number of your organization.

Applicant New Jersey Tax ID Number *

Applicant Organization's Phone Number and Extension *

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

Applicant Organization's Website

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

NJEDA

ECONOMIC DEVELOPMENT AUTHORITY

Applicant Organization (3/3)

Click the magnifying glass to launch the NAICS search window.



Lookup records

Search

Choose one record and click Select to continue

Name	NAICS	NAICS Code	NAICS Sub	NAICS Sector	National	National Code	Second	Industry	Industry Code	Industry Id
111110 - Soybean Farming	Soybean Farming	111110	Crop Production	Agriculture, Forestry, Fishing and Hunting	Soybean Farming	111110		111100	Oilseed and Grain Farming	AGRI
111120 - Oilseed (except Soybean) Farming	Oilseed (except Soybean) Farming	111120	Crop Production	Agriculture, Forestry, Fishing and Hunting	Oilseed (except Soybean) Farming	111120		111100	Oilseed and Grain Farming	AGRI

Select Cancel Remove value

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

Upload NJ Tax Clearance Certificate.*

Certificates may be requested through the [State of New Jersey's online Premier Business Services \(PBS\) portal](#). Under the Tax & Revenue Center, select Tax Services, then select Business Incentive Tax Clearance. If the applicant's account is in compliance with its tax obligations and no liabilities exist, the Business Incentive Tax Clearance can be printed directly through PBS.

Is the applicant involved in religious activities or religiously affiliated?

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

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

NAICS

North American Industry Classification System (NAICS) Code *

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

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

Tax Clearance Certificate

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

Document	Files
Tax Clearance Certificate Document(s) *	Add Files

Certificates may be requested through the State of New Jersey's online [Premiere Business Services \(PBS\)](#) portal. Under the Tax & Revenue Center, select Tax Services, then select Business Incentive Tax Clearance. If the applicant's account is in compliance with its tax obligations and no liabilities exist, the Business Incentive Tax Clearance can be printed directly through PBS. [CLICK HERE](#) for instructions on how to secure your tax clearance certificate.

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

Yes

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

Religious Affiliation Form

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

Document	Files
Religious Affiliation Form *	Add Files

Prior NJEDA Assistance

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

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

Previous Next

Cannabis Questionnaire

Cannabis Questionnaire

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

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

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.

Additional Applicant Organization Details

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

Does the Applicant have any permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has an interest in?

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

Please upload Applicant Permits And Approvals

Please complete and upload Applicant Permits and Approvals Form [HP-AR-a22](#) to show all New Jersey Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has interest in. Document must include Name of Permit, Department Issuing Permit, Permit Type, Permit Number (if available), and Status of Permit (anticipated or received).

Document	Files
Permits and Approvals *	Add Files

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

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

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

The Applicant Organization Chart shall be a diagram that visually conveys your organization's structure by detailing roles, responsibilities, and relationships between individuals within the team.

Additional Applicant Organization Details

Applicant Organization's Headquarters Address

Organization's Headquarters Country *

United States

Organization's Headquarters Address line 1 *

Enter a location

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

Organization's Headquarters Address line 2

Suite, Apt, Floor, etc.

Organization's Headquarters City *

Organization's Headquarters State *

Organization's Headquarters Zip Code *

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

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

Does the Applicant have any permits and approvals or obligations and responsibilities, with which the business entity is associated with, or has an interest in. *

Examples include permits or obligations and responsibilities with New Jersey Department of Labor and Workforce Development, the Department of Environmental Protections, and the Department of the Treasury.

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

Document

Files

Organization Chart & Other Materials *

[Add Files](#)

These materials should provide summary description of the type of organization and its ownership structure; an organizational chart identifying owners and percentages of ownership if multiple partners; any subscription agreements for all partners or members for investment funds contributing equity to the Project; and/or any other materials needed to delineate the applicant team's ownership, structure, and roles.

Co-Applicant Organization (1/2)

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

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

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

“Co-Applicant” means an entity that:

1. is non-profit for taxation purposes under the provisions of Section 501(c)3 of the Internal Revenue Code;
2. contributes capital, real property, or services related to the project that directly affect and serve the anticipated residents, tenants or customers of the tenants of the rehabilitation project; and
3. enters into a participation agreement with the developer that specifies the Co-Applicant’s participation in the rehabilitation project.

Co-Applicant Organization

In this section, we need more information about any entities that will be applying as a Co-Applicant.

“Co-Applicant” means an entity that:

1. is non-profit for taxation purposes under the provisions of Section 501(c)3 of the Internal Revenue Code;
2. contributes capital, real property, or services related to the project that directly affect and serve the anticipated residents, tenants or customers of the tenants of the rehabilitation project; and
3. enters into a participation agreement with the developer that specifies the Co-Applicant’s participation in the rehabilitation project.

Is there a Co-Applicant associated with this project? *

Yes

Create

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

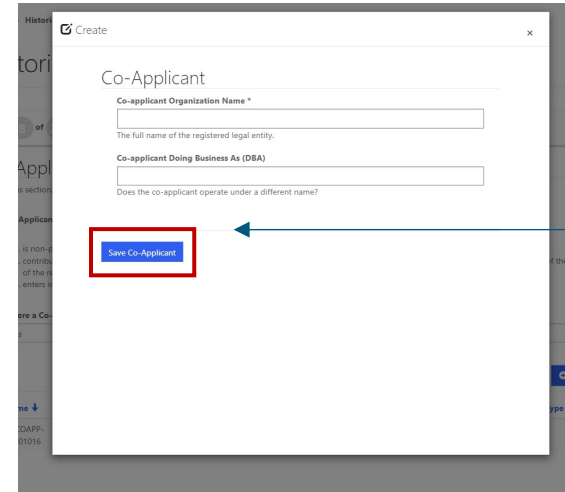
Co-Applicant Organization (2/2)

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

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

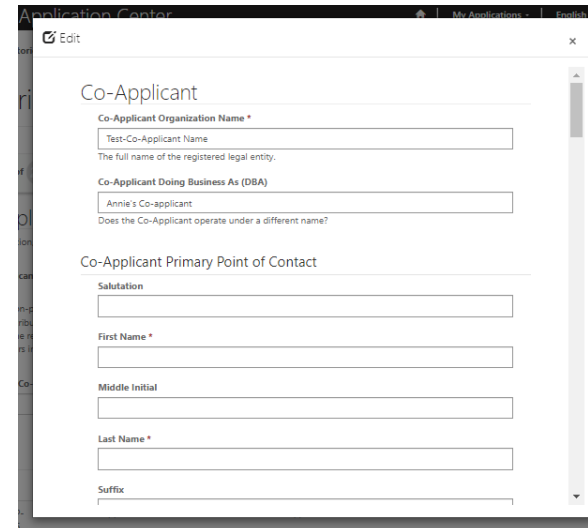
Required documentation for the Co-applicant

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



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

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



The screenshot shows an 'Edit' window titled 'Co-Applicant'. It contains the same three input fields as the 'Create' window, with pre-filled values: 'Test-Co-Applicant Name', 'Annie's Co-applicant', and the checkbox checked. Below these fields is a section titled 'Co-Applicant Primary Point of Contact' with sub-fields for 'Salutation', 'First Name *', 'Middle Initial', 'Last Name *', and 'Suffix'. A blue arrow points from the text on the right to the top of this section.

General Project Information (1/5)

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

General Project Information to be entered here:

- Project name
- Historic property name
- Brief description on project scale and scope
- Selected Rehabilitation Period of either 36 or 60 months
- Future use of property: Residential, Commercial, or Both
- Number of temporary construction employees
- Number of permanent employees at project completion

The adjusted basis of structure at time of application is required.

Adjusted basis of a building is the cost of the property (excluding land) plus or minus adjustments to basis.

The anticipated adjusted basis of structure at start of Selected Rehabilitation Period is required.

General Project Information

Project Name *

Historic Property Name(s) *

This name should match all historic designation documents.

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

Character limit: 1,000

Please identify the selected Rehabilitation Period *

Select

What are the proposed future uses of the project? *

Select

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

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

Adjusted Basis of Structure at Time of Application *

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

Anticipated Adjusted Basis of Structure at Start of Selected Rehabilitation Period *

\$

The anticipated adjusted basis of the structure at start of Selected Rehabilitation Period can be calculated by taking the cost of the property (excluding land) plus or minus anticipated adjustments to basis. Anticipated increases to basis include capital improvements (inclusive of any work at project site expected to be completed prior to the execution of a Rehabilitation Agreement under the Program, legal fees incurred in perfecting title, zoning costs, etc. Decreases to basis include deductions previously allowed or allowable for depreciation.

General Project Information – Project Location (2/5)

Enter project address, along with block & lot here.

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

The NJEDA has provided a mapping tool to assist potential applicants to determine if proposed projects may be eligible for certain aspects of the Program. A project located within an eligible area is not guaranteed participation in the Program, special incentives, or rates.

Please use the mapping tool to search for a location and then print the “Report” for that location and upload it here.

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



LINK TO NJEDA MAPPING TOOL

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

Project Location

Project Address

Address Line 1 *

Address Line 2

Zip *

City *

State *

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

Create Location

Block ↓

Lot

There are no records to display.

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

☐ Qualified Incentive Tract

☐ Government Restricted Municipality

☐ A City of the First Class

☐ Within a 1/2 mile radius of the center point of a NJDOT Transit Village

☐ Not Applicable

Please upload a copy of NJEDA mapping tool report

The NJEDA has provided this mapping tool to assist potential applicants to determine if proposed projects may be eligible for certain aspects of the Program. A project located within an eligible area is not guaranteed participation in the Program, special incentives, or rates. Please use the mapping tool to search for a location and then print the "Report" for that location and upload it here. After selecting the "Print" button, please insert the Applicant and Project Names where it says "Criteria Report" and save the file with the correct names included.

Document

Files

General Project Information – Proposed Future Use (3/5)

What is the proposed future use of the project?

Will the rehabilitation project’s end use be commercial, residential or both?

(If Commercial, the following residential questions will not appear)

Applicant will have to confirm information on residential units as required by the Program, if and where applicable, and provide number of units at the project site.

What are the proposed future uses of the project? *

Residential

Select

Commercial

Residential

Both

Residential Units

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

Yes

Will this project consist of any newly constructed residential units? *

Yes

For a residential project or redevelopment project consisting of newly constructed residential units, are at least 20 percent of the residential units constructed reserved for occupancy by low- and moderate-income households with affordability controls as required under the "Fair Housing Act"? *

Select

How many total residential units are being constructed at the rehabilitation site? *

Of those units, how many residential units are being reserved for occupancy by low- and moderate-income households with affordability controls as required by the 'Fair Housing Act'? *

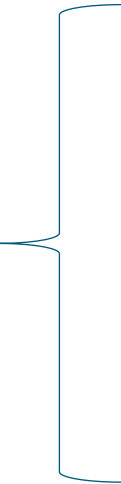
General Project Information – Prior Construction (4/5)

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

If “YES”, the applicant will have to indicate which of the allowable exceptions is applicable and provide further documentation to support this.

For allowable exceptions, please review the Program FAQs here: [HPRP FAQs](#).

Any work completed prior to submitting an application or execution of the agreement under the Program may be considered as part of the project (if it meets an allowable exception) but will not be considered as an eligible cost when calculating and determining potential award amount under the Program.



Prior Construction at the Project Site

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

Yes

Was construction or rehabilitation ordered by a building code or other official with jurisdiction over the site or the rehabilitation project to correct a health, safety, or other hazard? *

Select

Was the construction or rehabilitation activity completed at the project site was conducted by an entity that is not the current owner or business entity, or an affiliate of the current owner or business entity, and was not done at the direction of or under contract with the owner, business entity, or an affiliate of the owner or business entity? *

Select

Was the Construction or Rehabilitation activity completed by the applicant more than two years prior to the date of the application? *

Select

Has the Construction or Rehabilitation activity been approved by the New Jersey Historic Trust or the New Jersey State Historic Preservation Office as meeting the Secretary of the Interior's Standards for Rehabilitation pursuant to section 67.7 of Title 36, Code of Federal Regulations (36 C.F.R. s.67.7). *

Select

Was construction or rehabilitation completed within two years of application and in accordance with the Secretary of the Interior's Standards for Rehabilitation pursuant to section 67.7 of Title 36, Code of Federal 26 Regulations (36 C.F.R. 67.7) *

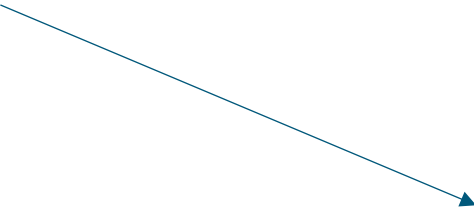
Select

General Project Information – Transformative Projects (5/5)

Are you applying under the Transformative Project?

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

Business entities applying for tax credits under this program as a transformative project shall submit a one-time non-refundable application fee of \$18,000.



Transformative Projects

"**Transformative project**" means a specific construction project or improvement or phase of a project or improvement undertaken by a business entity that includes the rehabilitation of a transformative property.

"**Transformative property**" means a structure, including its site improvements and landscape features, assessed as real property that is:

1. An income producing property, not including a residential property, whose rehabilitation the Authority determines will generate substantial increases in State revenues through the creation of increased business activity within the surrounding area;
2. Individually listed on the New Jersey Register of Historic Places pursuant to N.J.S.A. 13:1B-15.128 et seq., and which, before the enactment of N.J.S.A. 34:1B-269 et seq., received a determination of eligibility from the Keeper of the National Register of Historic Places in accordance with the provisions at 36 CFR Part 60; and
3. Located within a one-half mile radius of the center point of a transit village, as designated by the New Jersey Department of Transportation, and located within a city of the first class, as classified under N.J.S.A. 40A:6-4, or located within a government-restricted municipality.

Business entities applying for tax credits under this program as a transformative project shall submit a one-time non-refundable application fee of \$18,000.

Do you want to apply as a Transformative Project? *

Yes

Does the project meet the definition of Transformative Project? *

Yes

⚠️ "Transformative property" means a property that is:

1. An income producing property, not including a residential property, whose rehabilitation the Authority determines will generate substantial increases in State revenues through the creation of increased business activity within the surrounding area;
2. Individually listed on the New Jersey Register of Historic Places pursuant to N.J.S.A. 13:1B-15.128 et seq., and which, before the enactment of N.J.S.A. 34:1B-269 et seq., received a determination of eligibility from the Keeper of the National Register of Historic Places in accordance with the provisions at 36 CFR Part 60; and
3. Located within a one-half mile radius of the center point of a transit village, as designated by the New Jersey Department of Transportation, and located within a city of the first class, as classified under N.J.S.A. 40A:6-4, or located within a government-restricted municipality.

If you have any questions regarding this please reach out to an Historic Property Reinvestment team member at HistoricTaxCredit@njeda.gov

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

Select

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

Select

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

Select

NJEDA

ECONOMIC DEVELOPMENT AUTHORITY

Project Scoring Criteria

The scoring committee will score projects with respect to five criteria:

1. Historic Significance of Resource
2. Imminent Threat to Historic Resource
3. Project Concept and Team
4. Site Control
5. Positive Impact on Surrounding Neighborhood

Project Scoring Criteria

The Authority has established scoring criteria for the evaluation of proposed rehabilitation projects. These criteria can be used to set a required minimum score for reviewed rehabilitation projects and to allocate tax credits in circumstances where the requests for tax credits exceed the annual maximum cap established by the statute. To be eligible to receive a tax credit award, a business entity's application must receive a minimum score of 50 out of 100 maximum total score.

Applications will be reviewed and scored by a committee comprised of a multidisciplinary team of professionals. Members of the committee will include NJEDA staff, as well as professional staff from DEP's Historic Preservation Office. At a minimum, the committee will include at least one staff with experience in the fields of historic preservation, and construction/project management. Staff may seek assistance from consultants hired by the EDA to participate in or support the committee.

The recommended system will score projects with respect to five criteria:

1. Historic Significance of Resource
2. Imminent Threat to Historic Resource
3. Project Concept and Team
4. Site Control
5. Positive Impact on Surrounding Neighborhood

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

1. Historical Significance of Resource

The first section will be information on the Historic Significance of Resource.

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

Identify the level of historic significance.

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

Please select all historical designations.

- National Register
- New Jersey Register
- Pinelands Commission
- Certified Local Government
- Certified Historic Structure (Approved NPS Part 1)

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

1. Historic Significance of Resource

Applicant Organization Name: Smith Organization Inc.	Project Location: 123 Main Street, Bloomfield, NJ, 07003
Project Name: Test Project Name	Historic Property Name: Test Historic Property Name

Property's Significance and Historic Fabric/Integrity

Upload documentation that describes and discusses the level of significance of the qualified or transformative property in its current status.

Is it the only or one of a limited number of representative example(s) of a type/period/feature of historic significance, or is it the only existing known property associated with a significant historic figure, historical event, period, or historical feature?

The narrative should also address integrity of historic fabric and answer at a minimum the following questions:

- Does the site retain the ability to convey its historic significance?
- Do the aspects of integrity (location, design, setting, materials, workmanship, feeling, association) as outlined in the original designation remain?
- Do the most significant historic features, finishes and materials remain in place?

The document could be either a new narrative providing the requested information or an existing document, such as a copy of a National Register Nomination form, or other documentation previously prepared to evaluate the property historic significance and level of integrity.

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

Review will be guided by the Criteria for Evaluation as outlined in 36 CFR § 60.4, and N.J.A.C. 7:4-2.3

Document	Files
Property's Significance and Historic Fabric Document(s) *	Add Files

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

Select

Historical Evidence or Significance Site Photos

All photos to be placed into a single document. PDF only.

Document	Files
Significance Site Photos	Add Files

Photographs shall show all exterior building facades, significant and representative interior spaces, and examples of significant historic fabric being proposed for repair and/or removal as part of the rehabilitation project. Applicant must also include photographs showing all features identified within Form HP-SC3-4c - Detailed Description of Rehabilitation Work, as well as a key to photographs showing location and direction of all photographs included.

Please select all historic designations. *

- ☐ National Register
- ☐ New Jersey Register
- ☐ Pinelands Commission
- ☐ Certified Local Government
- ☐ Certified Historic Structure (Approved NPS Part 1)
- ☐ None of the Above

To check if your property is located in the National or New Jersey Register of Historic Places, or has a Determination of Eligibility from the Keeper or the National Register, please visit New Jersey's Historic Preservation Office's Cultural Resources Geographic Information System "LUCY", which can be accessed from their website at: <https://nj.gov/dep/hpo/identity/gis.htm>.

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

Information regarding designation by the Pinelands Commission must be confirmed by the Commission. Contact information for the Pinelands Commission can be found at their website: <https://www.state.nj.us/pinelands/>.

A list of New Jersey's Certified Local Governments can be found thru the National Park Service's Certified Local Governments page at: <https://www.nps.gov/subjects/clg/index.htm>.

Has the historic resource been recognized as a National Historic Landmark by Secretary of Interior? *

Select

Read-only

2. Imminent Threat of Historic Resource

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

- Is the property in danger due to issues with the Building Envelope which are causing water infiltration (roof leaks, missing or leaking windows or doors)?
- Is there significant damage to structural components such as foundation, roof rafters, load bearing walls, columns and/or beams?
- Has the building been fully vacant for at least 1 continuous year (without utilities)?
- Is there encroachment in the immediate vicinity that is believed to pose an immediate or near future threat to the historic resource?



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

Imminent Threat of Historic Resource

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

Is the property in danger due to issues with the Building Envelope which are causing water infiltration (roof leaks, missing or leaking windows or doors) ? *

Yes

Please describe how the property is in danger due to issues with the Building Envelope which are causing water infiltration (roof leaks, missing or leaking windows or doors). *

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

Document	Files
Photos of Current Building Envelope Condition(s) *	Add Files


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

Yes

Please describe the damage to structural components *

Is the damage to such a degree that it is easily noticeable (such as in the case of partial collapse of a portion of the structure), or it already has been condemned or deemed unsafe by a building official with jurisdiction over the site or project? *

3. Project Concept and Team (1/6)

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

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



Specifications must be submitted in PDF format.



3. Project Concept and Team

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

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

Yes

Please upload Drawings.
Drawings must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards.

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

Document	Files
Drawings *	<div>Add Files</div>

Please upload Specifications.
Specifications must be prepared in consultation with a professional meeting the professional qualifications for architectural history or historic architecture in the Archeology and Historic Preservation Standards.

Specifications must be submitted in PDF Format.

Document	Files
Specifications *	<div>Add Files</div>

3. Project Concept and Team (2/6)

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



HP-AR-a28-Project-Permits-and-Approvals-Form-2023-10-03 (1).pdf - Adobe Acrobat Pro (32-bit)

File Edit View E-Sign Window Help

Home Tools HP-AR-a28-Project... x

Form HP-AR-a28

HISTORIC PROPERTY REINVESTMENT PROGRAM			
Name of Project:		Date:	
Historic Name of Property:			
Project Permits and Approvals			
Please provide a list and status of all required local, State, and Federal government permits and local planning and zoning board approvals that have been issued for the rehabilitation project or will be required to be issued pending resolution of financing.			
Example			
Name of Permit:	Demolition Permit	Type of Permit:	Municipal
Entity Issuing Permit:	City of Anytown, Building Department	Status:	Anticipated
1.			
Name of Permit:		Type of Permit:	
Entity Issuing Permit:		Status:	
2.			
Name of Permit:		Type of Permit:	
Entity Issuing Permit:		Status:	

Please upload Permits And Approvals

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

Document	Files
Permits And Approvals *	<div>Add Files</div>

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

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

3. Project Concept and Team (3/6)

Upload Anticipated Construction Schedule

“Cost of rehabilitation” (eligible rehabilitation costs) means the consideration given, valued in money, whether given in money or otherwise, for the materials and services that constitute the rehabilitation, and includes all costs associated with the structural components within a qualified property or transformative property and any soft costs, in an amount not to exceed 20 percent of the total cost of rehabilitation, associated with a rehabilitation project, except not including any costs associated with an increase in total building volume or associated with any building or structure that does not contribute to the historic significance of the qualified property or transformative property.

“Total cost of rehabilitation” means any and all costs incurred for and in connection with the rehabilitation project by the business entity and any affiliate of the business entity until the issuance of a permanent certificate of occupancy, or upon such other event evidencing project completion as set forth in the rehabilitation agreement, which shall include, but is not limited to, project costs, soft costs and costs of acquisition of land and buildings.

Construction Cost Estimate (CCE) is to be uploaded and must show a clear breakdown of eligible costs.

Upload Anticipated Construction Schedule.

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

Document	Files
Construction Schedule *	<div><div>Add Files</div><div>19 MCW.pdf</div></div>

Cost of Rehabilitation / Eligible Costs *

\$

25,000,000.00

“Cost of rehabilitation rehabilitation” or “eligible costs costs” means the consideration given, valued in money, whether given in money or otherwise, for the materials and services which constitute the rehabilitation. Eligible costs shall be all costs associated with the structural components, as defined by 26 CFR 1.48 1(e)(2), within the qualified property or transformative property, and any soft costs associated with the rehabilitation project. Eligible costs shall not include any costs associated with an increase in total building volume.

Total Cost of Rehabilitation (Total Project Costs) *

\$

27,000,000.00

“Total cost of rehabilitation” means any and all costs incurred for and in connection with the rehabilitation project by the business entity and any affiliate of the business entity until the issuance of a permanent certificate of occupancy, or upon such other event evidencing project completion as set forth in the rehabilitation agreement, which shall include, but is not limited to, project costs, soft costs and costs of acquisition of land and buildings.

Upload Construction Cost Estimate (CCE)

The construction cost estimate (CCE) must be prepared by a qualified professional with experience preparing CCEs for projects addressing historic structures. The construction cost estimate for the rehabilitation project shall include, but is not limited to, all construction costs associated with the rehabilitation project, including but not limited to all phases of the selected rehabilitation period, cost breakdown by Construction Specification Institute Master Format Specification Standards 2018. The estimate shall include the total cost of rehabilitation and the cost of rehabilitation/eligible costs.

Document	Files
Construction Cost Estimate (CCE) *	<div><div>Add Files</div><div>19 MCW.pdf</div></div>

3. Project Concept and Team (4/6)

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

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

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

Upload Form **HP-SC3-4b** Resume for the Historic Architect and/or Architectural Historian Consultant.

Please provide a narrative description of experience and qualifications of the business entity and relevant project team members' ability to complete project including examples showing demonstrated history of successful completion of projects of similar size and scope. *

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

Yes

Historic Architect Name *

Address Line 1 *

Address Line 2

State *

City *

Zip Code *

Historic Architect Phone *

Historic Architect Email *

Historic Architect Website (if applicable)

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

Document	Files
HP-SC3-4b Resume for Historic Architect *	<div>Add Files</div>

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

No

3. Project Concept and Team (5/6)

Upload a narrative of the proposed project approach.

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

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

*A completed Part 2- Description of Rehabilitation (NPS Form 10-168a) can be submitted in lieu of the NJEDA Form HP-SC3-5

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

Yes

Has the project received prior approval of application from the DEP's New Jersey Historic Preservation Office under Part 2 of the Historic Preservation Certification application pursuant to 36 CFR 67.3? *

Yes

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

Document

Files

NPS form *

Add Files

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

Document

Files

Project Approach *

Add Files

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

Yes

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

No

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

Document

Files

HP-SC3-5 Detailed Description of Rehabilitation Work *


Add Files

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

NJEDA

ECONOMIC DEVELOPMENT AUTHORITY

3. Project Concept and Team (6/6)

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

Upload Form HP-SC3-4b Resume for Archeologist. →

Upload project team organizational chart. →
Project Team Organization Chart shall be a diagram that visually conveys your project team’s structure by detailing roles, responsibilities, and relationships between individuals within the team.

Will this project include ground disturbance? *

Yes

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

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

Yes

Archeologist Name *

Address Line 1 *

Address Line 2

City *

Zip Code *

State *

Archeologist Phone *

Provide a telephone number

Archeologist Email *

Archeologist Website (if applicable)


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

Document	Files
Form HP-SC3-4b Resume for Archaeologist *	<div>Add Files</div>

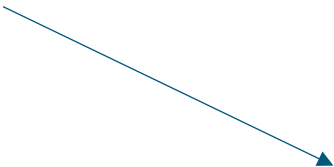
Please upload a project team organizational chart.

Document	Files
Project Team Org Chart *	<div>Add Files</div>

4. Site Control

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

Applicant must upload documentation evidencing site control.



Site Control

Applicant Organization Name:

Annie's Castle

Project Location:

12324 main st, Aberdeen, CA, 00601

Project Name:

Annie Historic School House 2

Historic Property Name:

Annie Historic School House 2

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

No

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

No

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

Yes

Upload documentation evidencing site control

This can include a formal agreement with owner, right of entry, and/or letter of intent.

Document	Files
Evidencing site control *	<div>Add Files</div>

*Questions on this page may vary based on the applicant's answers.

5. Positive Impact on Surrounding Neighborhood

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

If applicable, upload written letter(s) of support from a community group(s) from the neighborhood/area in which the property is located or the municipality for the rehabilitation of the qualified or transformative property, and for the applicant's project.

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

Positive Impact on Surrounding Neighborhood

Applicant Organization Name:
Annie's Castle

Project Location:
12324 main st, Aberdeen, CA, 00601

Project Name:
Annie Historic School House 2

Historic Property Name:
Annie Historic School House 2

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

Does the applicant have written letter(s) of support from a community group(s) from the neighborhood/area in which the property is located or the municipality for the rehabilitation of the qualified or transformative property, and for the applicant's project? *

Yes

Please upload letter(s) of support

Document	Files
Written letter(s) of support *	<div>Add Files</div>

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

Project Economics (1/3)

Form HP-AR-a13 Project Budget Form Workbook
HP-AR-a21 Project Budget (Combined Form File).

Complete all tabs/pages in workbook. File to be uploaded in MS Excel format only.

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

*Non-profit applicants may include projected fundraising amounts as part of their project sources as long as a fundraising plan outlining proposed fundraising activities is submitted as part of the application. This plan shall include outreach and show forecasted timelines and deadlines for achieving established goals.

The screenshot shows the 'A. SOURCES AND USES' tab of the HP-AR-a21 Project Budget Form. The form is divided into several sections: 'Market Value of Property', 'Improvements', and 'Professional Services'. Each section contains a list of items with columns for 'Cost Type', 'Eligible Costs', 'Total Costs', 'Hard', 'Eligible Cost Analysis', and 'Other'. The 'A. SOURCES AND USES' tab is highlighted in the bottom navigation bar.

The screenshot shows the 'Development Subsidy Info' form. It includes the following fields: 'Name of Granting Body' (text input), 'Anticipated or Committed' (dropdown menu), 'Date' (date picker), and 'Amount of Development Subsidy' (text input). There is a 'Save' button at the bottom.

The screenshot shows the upload interface for the HP-AR-a21 Project Budget Form. It includes the following sections:

- Please upload Form HP-AR-a21, Project Budget Form.**
Include all project costs and funding sources for the proposed project. [Click here](#) to download Form HP-AR-a21, Project Budget Form.
Document: Form HP-AR-a21, Project Budget Form *
Files: Add Files
- Please upload documentation supporting each funding source listed in the Sources section of Project Budget Form (HP-AR-a21).**
Document: Funding source supporting document *
Files: Add Files
- Is the Applicant requesting/receiving development subsidies as defined by P.L. 2007, c. 200 (N.J.S.A. 52:39-1) ***
Select
Examples include but are not limited to State, Federal or local grants; Foundation grants; PILOT agreements (Payments In Lieu Of Taxes) etc.

If there are Development Subsidies, they are to be listed here.

Project Economics (2/3)

Upload copy of the Feasibility Study.*

*For projects **located within a government-restricted municipality or that have a total rehabilitation cost of less than \$5 million**, the feasibility study shall include the third party's conclusion regarding whether the project is able to obtain non-recourse conventional bank financing and whether the project is economically feasible without the incentive award; or, for projects **located outside of a government-restricted municipality that have a total rehabilitation cost equal to or greater than \$5 million**, the feasibility study shall include the third party's position regarding the marketability and underwriting of the revenue and expense components of the project for the duration of the commitment period.

Upload Project Pro Forma.**

- [Suggested template](#)
- Upload in Excel only
- **A project proforma is not required for projects with total project costs under \$5 million or for a project located within a Government Restricted Municipality (GRM).

Please upload a copy of a feasibility study for the proposed use of the property by an independent third party.

The study must be dated within 90 days of the application and include the following:

Firm's advice and counsel regarding the marketability and underwriting of the revenue and expense components of the proposed project.

The assessment should contain the following:

1. Findings from the inspection of the site and surrounding neighborhood.
2. Research of comparable retail properties.
3. Analysis of the retail trade area demand.
4. Consideration of general market factors and national trends in similar neighborhoods.

This report also should include:

1. A comprehensive overview of the potential for the retail development in the market at the site through a demand and supply analysis of the markets.
2. A Determination of the demand and achievable rents for retail space in the market.
3. The recommended absorption/lease-up schedule for the retail component based on the potential market demand as well as recognition of current and proposed competitive supply.

The study should address positive features of the site as well as the challenging site influences that should be addressed. New retail developments in the area should be listed as well as other demand drivers such as housing/population trends, cultural and entertainment projects in the vicinity, and the impact of the project on other residential and/or similar projects in the area (if any).

For projects located within a government-restricted municipality or that have a total rehabilitation cost of less than \$5 million, the feasibility study shall include the third party's conclusion regarding whether the project is able to obtain non-recourse conventional bank financing and whether the project is economically feasible without the incentive award. For projects located outside of a government-restricted municipality that have a total rehabilitation cost equal to or greater than \$5 million, the feasibility study shall include the third party's position regarding the marketability and underwriting of the revenue and expense components of the project for the duration of the commitment period.

Please upload a copy of a feasibility study for the proposed use of the property by an independent third party.

Upload Feasibility Study

Document	Files
Feasibility Study *	Add Files

Upload Project Pro Forma

Document	Files
Project Pro Forma *	Add Files

Please upload project Pro Forma document in Excel only, including all formulas. Please see suggested Pro Forma template [here](#)

For projects located outside of a government-restricted municipality that have a total rehabilitation cost equal to or greater than \$5 million, financial information must also include information on the projected reasonable and appropriate return on investment based on the business entity's equity, net margin, and cash on cash yield.

Project Economics (3/3)

Upload a narrative of how any required equity contribution will be met. Supporting documentation of the source of equity must be provided and may include financial information of the applicant and/or owners. An equity contribution is not required for projects with total project costs under \$5 million or for a project located within a Government Restricted Municipality (GRM).



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

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

- For projects with eligible costs under \$5 million or located in a Government Restricted Municipality, backup information on funding sources for the project are to be uploaded here.
- All applicants are required to submit backup documentation showing fund availability for all sources listed on the Project Budget Form (NJEDA Form HP AR a21). Such documentation may include LOIs for all construction and bridge loans, bank statements for cash at hand, approval documentation for grants received, and a fundraising plan (non-profit applicants only). In the case of other tax credit programs for which the entity may be planning to apply, such documentation may include proof of submission of an application, and/or information regarding the expected application date and the approximate date by which a decision is expected. **Non-profit applicants may include projected fundraising amounts as part of their project sources as long as a fundraising plan outlining proposed fundraising activities and outreach, and showing forecasted timelines and deadlines for achieving established goals has been prepared and is submitted as part of this application.**



Please provide a narrative of how any required equity contribution will be met. Supporting documentation of the source of equity must be provided and may include financial information of the applicant and/or owners.

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



Document	Files
Source of Equity *	<div><div> Add Files</div><div>39 MCW.pdf </div></div>

Please attach financial information of the rehabilitation project and any other documentation demonstrating economic and commercial viability pursuant to N.J.A.C. 19:31-26.3(a).

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

Document	Files
Rehabilitation Project Financial Information & Economic and Commercial Viability *	<div><div> Add Files</div><div>40 MCW.pdf </div></div>

Please upload any additional information that may be considered useful for the Authority to complete its underwriting process .FOR PROJECTS WITH TOTAL REHABILITATION COSTS OF UNDER \$5 MILLION OR LOCATED IN A GOVERNMENT RESTRICTED MUNICIPALITY, THIS FIELD SHOULD BE USED TO UPLOAD BACKUP INFORMATION ON FUNDING SOURCES FOR THE PROJECT.

Document	Files
Additional Information	<div><div> Add Files</div><div>41 MCW.pdf </div></div>

ⓘ All applicants are required to submit backup documentation showing fund availability for all sources listed on the Project Budget Form (NJEDA Form HP AR a21). Such documentation may include LOIs for all construction and bridge loans, bank statements for cash at hand, approval documentation for grants received, and a fundraising plan (non-profit applicants only). In the case of other tax credit programs for which the entity may be planning to apply, such documentation may include proof of submission of an application, and/or information regarding the expected application date and the approximate date by which a decision is expected. Non-profit applicants may include projected fundraising amounts as part of their project sources as long as a fundraising plan outlining proposed fundraising activities and outreach, and showing forecasted timelines and deadlines for achieving established goals has been prepared and is submitted as part of this application.

Diversity, Equity, and Inclusion

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



Diversity, Equity, & Inclusion

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

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

☐ Minority

☐ Women

☐ Veteran

☐ LGBTQ

☐ Disabled

☐ None of the above

☐ Prefer not to answer

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

☐ Small Business Enterprise (SBE)

☐ Disadvantaged Business Enterprise (DBE)

☐ Minority-Owned Business Enterprise (MBE)

☐ Woman-Owned Business Enterprise (WBE)

☐ Veteran-Owned Business Enterprise (VOB)

☐ Disabled Veteran-Owned Business Enterprise (DVOB)

☐ None of the above

☐ Prefer not to answer

Additional DE&I Information

In this section, we would like more information about any actions your company has taken or is taking with respect to Diversity, Equity & Inclusion. If these questions are not applicable, you may skip them.

Please describe whether your company's leadership team is made up of a diverse group of individuals. Please provide as much detail as possible about the composition of your leadership team as it relates to groups that have been historically underrepresented (minority, woman, veteran, LGBTQ, disabled).

☐ Question is not applicable

☐ Prefer not to answer

Prevailing Wage and Affirmative Action Requirements

Prevailing Wage and Affirmative Action Requirements

Construction and buildings services activities under Historic Property Reinvestment Program are subject to New Jersey affirmative action and prevailing wage requirements.

(a) The Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4 and N.J.A.C. 19:30-3, apply to the rehabilitation project. The affirmative action requirements shall apply until the later of the completion of the rehabilitation project or two years after the first tax credit is issued.

(b) The Authority's prevailing wage requirements, N.J.S.A. 34:1B-5.1 and N.J.A.C. 19:30-4 et seq., apply to construction contracts for work performed, including work performed by tenants, for the rehabilitation project starting at NJEDA Board Approval. The prevailing wage requirements shall apply until the later of the end of the selected rehabilitation period or two years after the first tax credit is issued.

(c) The Authority's prevailing wage requirements, N.J.S.A. 34:1B-5.1 and N.J.A.C. 19:30-4 et seq., shall apply to building services at the qualified property or transformative property starting with NJEDA Board project approval. For all rehabilitation projects, the prevailing wage requirements shall continue for 10 years following the end of the selected rehabilitation period. In the event a portion of a rehabilitation project is undertaken by a tenant and the tenant has a leasehold of more than 35 percent of space in the building owned or controlled by the business entity, the requirement that each worker employed to perform building service work at the building be paid not less than the prevailing wage shall apply to the entire rehabilitation project and all tenants.

Effective April 1, 2020, contractors and subcontractors for construction contracts that require payment of prevailing wage must provide proof of registration under the Public Works Contractor Registration Act (Act), N.J.S.A. 34:11-56.48 et seq. The Act does not require proof of registration for such contracts that were awarded prior to April 1, 2020. Information regarding the Act can be found on the New Jersey Department of Labor's website: [Department of Labor & Workforce Development \(nj.gov\)](#).

If you have any questions about these requirements, please contact NJEDA by sending an email to HistoricTaxCredit@njeda.gov.

I acknowledge any construction on this project, undertaken either by the applicant or a tenant, is subject to prevailing wage requirements. *

Select

I acknowledge that in the event a portion of a rehabilitation project is undertaken by a tenant and the tenant has a leasehold of more than 35 percent of space in the building owned or controlled by the business entity, the requirement that each worker employed to perform building service work at the building be paid not less than the prevailing wage shall apply to the entire rehabilitation project and all tenants. *

Select

I acknowledge that the prevailing wage requirements for construction work performed at the project site shall apply until the later of the end of the selected rehabilitation period or two years after the first tax credit is issued. *

Select

I acknowledge that any building services performed on the project site are subject to the prevailing wage requirements starting at project Board approval and extend for a period of 10 years following project completion. *

Select

I acknowledge that the Authority's affirmative action requirements, N.J.S.A. 34:1B-5.4 and N.J.A.C. 19:30-3, shall apply to the rehabilitation project and until the later of the completion of the rehabilitation project or two years after the first tax credit is issued. *

Select

I acknowledge that any contractor working on this project must be registered with the New Jersey Department of Labor pursuant to the Public Works Contractor Registration Act, N.J.S.A. 34:11-56.48 et seq., prior to the start of construction. *

Select

Notice Regarding Affirmative Action/Prevailing Wage & Green Buildings Form

Please note, Applicant/Co-Applicant receiving a tax credit award will be required to complete a Notice Regarding Affirmative Action/Prevailing Wage & Green Buildings Form prior to the execution of the Rehabilitation Agreement with the Authority.[Notice of Construction NOC-2025](#).

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

Previous

Next

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

Authorized Representative for Certifications

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

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

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

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

Applicant Representation

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

Yes

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

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

Yes

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

Applicant's General Counsel or Chief Legal Officer

Contact for a Government Entity

General Partner

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

Sole Proprietor

Person with Legal Responsibility for the Application

None of the above

Upload Certifications

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

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

Upload Certifications

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

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

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

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

[Legal Questionnaire](#)

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

[Acknowledgments of Applicant](#)

[Certification of Application](#)

Document	Files
Legal Questionnaire *	<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
Acknowledgments of Applicant *	<div>ⓘ Add Files</div>

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

Legal Questionnaire

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

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

New Jersey Economic Development Authority Legal Questionnaire

Applicant Name: ShazHistoric

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

Persons (entities or individuals) applying for NJEDA programs are subject to the Authority's Disqualification/Debarment Regulations (the "Regulations"), which are set forth in N.J.A.C. 19:30-2.1, et seq. Applicants are required to answer the following background questions ("Legal Questionnaire") pertaining to causes that may lead to debarment, disqualification, or suspension from eligibility under the Regulations and Executive Orders 34 (Byrne 1976) and 189 (Kean 1988) after consideration of all relevant mitigating factors.

Note that this form has recently been modified.

Please review this form in its entirety prior to providing any responses or certifications.

DEFINITIONS

Notwithstanding any terms defined elsewhere or otherwise herein, the following definitions shall govern in responding to this Legal Questionnaire:

"Affiliates" means any entities or persons having an overt or covert relationship such that any one of them directly or indirectly controls or has the power to control another. This includes (however is not limited to):

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

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

RELEVANT AFFILIATES

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

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

Yes

Affiliate Owners

ADD AFFILIATE OWNERS

Entity / Individual ↑ Ownership Percentage (%)

There are no records to display.

Applicant-Owned Affiliates

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

ADD APPLICANT-OWNED AFFILIATES

Entity ↑ FEIN # - If applicable

There are no records to display.

Other Affiliates

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

ADD OTHER AFFILIATES

Entity ↑ FEIN # - If applicable

There are no records to display.

RELEVANT TIMEFRAMES

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

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

Note that in cases where Applicant has previously submitted and certified a legal questionnaire to the Authority, the Applicant may refer to its prior legal questionnaire and report only those matters that are new or have changed in status since the date of last reporting.

Part A. Past Proceedings

Has Applicant, or any identified Affiliates of Applicant, been found or conceded or admitted to being guilty, liable or responsible in any Legal Proceeding, or conceded or admitted to facts in any Legal Proceedings that demonstrate responsibility for any of the following violations or conduct? (Any civil or criminal decisions or verdicts that have been vacated or expunged need not be reported.)

1. Commission of a criminal offense as an incident to obtaining or attempting to obtain a public or private contract, or subcontract there under, or in the performance of such contract or subcontract. *

10. Violation of any State or Federal law that may bear upon a lack of responsibility or moral integrity, or that may provide other compelling reasons for disqualification. Your responses to the foregoing question should include, but not be limited to, the violation of the following laws, without regard to whether there was any monetary award, damages, verdict, assessment or penalty, except that any violation of any environmental law in category (vi) below need not be reported where the monetary award, damages, etc. amounted to less than \$1 million. *

i. Laws banning or prohibiting discrimination or harassment in the workplace.

ii. Laws prohibiting or banning any form of forced, slave, or compulsory labor.

iii. The New Jersey Conscientious Employee Protection Act, N.J. Stat. Ann. § 34:19-1 et seq., or other "Whistleblower Laws" that protect employees from retaliation for disclosing, or threatening to disclose, to a supervisor or to a public body an activity, policy or practice of the employer, that the employee reasonably believes is in violation of a law, or a rule or regulation issued under the law.

iv. Securities or tax laws resulting in a finding of fraud or fraudulent conduct.

v. Environmental laws, where the monetary award, penalties, damages, etc. amounted to more than \$1 million.

vi. Laws banning anti-competitive dumping of goods.

vii. Anti-terrorist laws.

viii. Criminal laws involving commission of any felony or indictable offense under State or Federal law.

ix. Laws banning human rights abuses.

x. Laws banning the trade of goods or services to enemies of the United States.

Part B. Pending Proceedings

11. To the best of your knowledge, after reasonable inquiry, are Applicant, or any officers or directors of Applicant, or any Affiliates, a party to pending Legal Proceedings wherein any of the offenses or violations described in questions 1-10 above are alleged or asserted against such entity or person? With respect to laws banning or prohibiting discrimination or harassment in the workplace, please provide only information pertaining to any class action lawsuits or individual lawsuits alleging violations under the New Jersey Law Against Discrimination. *

If the answer to any of the foregoing questions is affirmative, you must provide the following information as an attachment to the application: (i) the case name and court/administrative agency (including jurisdiction and venue) in which such matters were tried or are pending; (ii) the charges or claims adjudicated or alleged; and (iii) status of the matter (e.g. Pending Dismissed following Settlement, Dismissed following Motion, etc.).

Please Note: An Applicant may refer to or attach specific provisions of a 10-K/Q or other filings with the U.S. Securities and Exchange Commission (SEC); however, the Applicant should be aware that different laws apply to disclosures to the Authority. This means that the Authority does not have the same types of materiality thresholds as the SEC. The Applicant is expected to supplement its SEC filings to ensure that all relevant matters are disclosed to the Authority, including any matters that were below the SEC's materiality threshold and any matters that may have occurred after its most recent filing.

Please Note: Eligibility is determined based on the information presented in the completed Application. If at any time while engaged with the Authority the Applicant should become aware of any facts that materially alter or change its answers, or that render any of them incomplete or inaccurate, the Applicant has a duty to promptly report such facts to the Authority in writing. The Authority reserves the right to require additional clarifying or explanatory information from the Applicant regarding the answers given, to ask additional questions not contained in this Legal Questionnaire, and to perform its own due diligence investigations and searches.

Document	Files
Legal Questionnaire Addendum	Add Files

CERTIFICATION OF LEGAL QUESTIONNAIRE AND AUTHORIZATION TO RELEASE INFORMATION

This certification shall be signed as follows:

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

I hereby represent and certify that I have reviewed the information contained in this Legal Questionnaire, and that the foregoing information is true and complete under penalty of perjury. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment. I further agree to inform the New Jersey Economic Development Authority of any changes in the foregoing information which may occur prior to execution of any agreement with the Authority and so long as any such agreement is in effect. Failure to disclose relevant matters may render the Applicant ineligible for the financial benefits sought and may subject the Applicant to disqualification, debarment, suspension, or referral to the office of the state's Attorney General.

The undersigned, on behalf of the Applicant, understands and acknowledges that information and documents provided to the New Jersey Economic Development Authority: (1) are subject to public disclosure during deliberations of the Authority at public meetings regarding the application and as set forth in the minutes of the Authority's public meetings; and (2) are subject to public disclosure under certain laws, including, but not limited to, the Open Public Records Act, N.J.S.A. 47A:1-1 et seq., and the common law right-to-know.

Electronic Signatures

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

Legal Questionnaire Electronic Signature *

Title *

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

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

Program Name: **Historic Property Reinvestment Program**

Applicant Name: **ShazHistoric**

Applicant DBA: **Test**

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

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

Certification

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

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

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

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

If applicable, provide Additional Certification of Federal License

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

Program Specific Certification and Acknowledgements

Historic Property Reinvestment Program Required Application Certifications and Acknowledgements

Eligibility for financial assistance under the Historic Property Reinvestment Program is determined based on all information, required attachments, and schedules submitted as part of this application. Any changes in the status of the proposed project from the facts presented within the submitted application may disqualify or delay the project: including but not limited to, the commencement of construction or the acquisition of assets such as land or equipment. Please contact EDA staff before taking any action that would change the status of the project as reported in this application.

State and federal law as well as EDA regulations and policies regarding prevailing wage and affirmative action require the submission of certain reports and certificates as well as the inclusion of certain provisions in construction contracts. Please consult with the EDA staff for details.

I certify the applicant has no outstanding obligations to any bank, loan company, corporation, or individual not mentioned in this application and attachments. *

Select

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

Select

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

Select

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

Select

I acknowledge that for a rehabilitation project that has a total rehabilitation cost equal to or greater than \$5 million and is located outside of a government-restricted municipality, in accordance with N.J.A.C. 19:31Y-1.8(e), as approved by the EDA Board on September 10, 2025, if the actual capital financing approach utilized by the rehabilitation project has resulted in a project financing gap that is smaller than the project financing gap determined at Board approval, the Authority shall reduce the amount of the tax credit award. If there is no project financing gap due to the actual capital financing approach utilized by the project, then the developer shall forfeit the tax credit award. *

Select

I acknowledge that in accordance with N.J.A.C. 19:31Y-1.8(c)(2), as approved by the EDA Board on September 10, 2025, if the actual cost of rehabilitation is less than the cost of rehabilitation set forth in the application, the tax credit shall be calculated based on the actual cost of rehabilitation. *

Select

I acknowledge the Authority may, in its discretion, conduct inspections of the site of the project at any time during the course of the project, during the compliance period, and while the applicant or any co-applicant retains any obligation under the Program. *

Select

I, the undersigned authorize representative of the applicant, certify that any contractors or subcontractors that will perform work at the redevelopment project: (1) are registered as required by "The Public Works Contractor Registration Act," P.L.1999, c.238 (N.J.S.A. 34:11-56.48 et seq.); (2) have not been debarred by the Department of Labor and Workforce Development from engaging in or bidding on Public Works Contracts in the State; and (3) possess a tax clearance certificate issued by the Division of Taxation in the Department of the Treasury. *

Select

Applicant Certifications

Applicant Certifications

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

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

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

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

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

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

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

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CEO Certifications

It is a requirement of the Historic Property Reinvestment Program for the applicant to submit written certifications by the chief executive officer or equivalent officer of the eligible applicant stating that: all good faith efforts have been made and additional capital cannot be raised from other sources on a non-recourse basis; the applicant applying for the Program is in substantial good standing with the Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury; and the officer has reviewed the information submitted and information contained in the application and all attachments is true, accurate, and complete.

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

CEO Certifications

It is a requirement of the Historic Property Reinvestment Program for the applicant to submit written certifications by the chief executive officer or equivalent officer of the eligible applicant stating that: all good faith efforts have been made and additional capital cannot be raised from other sources on a non-recourse basis; the applicant applying for the program is in substantial good standing with the Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury; and the officer has reviewed the information submitted and information contained in the application and all attachments is true, accurate, and complete.

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

Please upload the CEO Certification for the Applicant

Document	Files
CEO Certification Form *	Add Files Test Document.pdf

It is a requirement of the Historic Property Reinvestment Program for a co-applicant to submit written certifications by the chief executive officer or equivalent officer of the eligible co-applicant stating that: the co-applicant applying for the program is in substantial good standing with the Department of Labor and Workforce Development, the Department of Environmental Protection, and the Department of the Treasury; and the officer has reviewed the information submitted and information contained in the application and all attachments is true, accurate, and complete.

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

Please upload the CEO Certification for the Co-Applicant

Document	Files
CEO Certification for the Co-Applicant *	Add Files

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

Fee Acknowledgement

Fee Payment (non-refundable)- Payment Breakdown:

- For qualified projects with rehabilitation (eligible) costs under \$5 Million: \$1,000
- For qualified projects with rehabilitation (eligible) costs between \$5 and \$10 Million: \$2,000
- For qualified projects with rehabilitation (eligible) costs over \$10 Million: \$7,000
- For transformative projects: \$18,000

Payment by wire transfer or credit card:

Depending on the applicant’s payment selection type, instructions to process payment will follow.

Please be advised that wire payments must be received by the NJEDA within 14 calendar days of application submittal. Payment by credit card, if possible, is recommended.*

Fee Payment Method

There is \$ **Fee Amount**, a non-refundable application fee.

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

In addition, the NJEDA charges fees during the closing and certification process which are detailed at the EDA product page. These fees vary depending upon the product chosen to fit your needs and the complexity/size of the project.

Select form of payment: *

Credit Card
Wire Transfer

Previous Next

Payment by Credit Card:

Applicant will be redirected to payment page:

Select form of payment: *

Credit Card

Previous Go To Payment Page

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

Electronic Signature

Your application will be submitted upon hitting the “Submit” Button.

Electronic Signature

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

☐ I agree to be bound by electronic signatures *

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

Full Name *

WXkZcRB

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

Enter the code from the image

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Submit

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

Submission Confirmation Page

The submission confirmation page will list the Applicant’s application confirmation number.

All future application communication will be sent to the email provided in the application.

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



[Home](#) > [Historic Property Reinvestment Application](#)

Historic Property Reinvestment Application

Step 30 of 30

Historic Property Reinvestment Program Application

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

Your application confirmation number is: CAPP

Unique confirmation number

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

Primary Point of Contact Email

Dear : John Doe

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

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

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

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

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

Thank You,
NJEDA

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Return to homepage



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



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