



ECONOMIC DEVELOPMENT AUTHORITY

## Emerge Application

To learn about the EmERGE program, visit [njeda.com/emerge](http://njeda.com/emerge)

### 1. Welcome

You have reached the full application page for the NJ EmERGE program, a jobs-based tax credit program created under the Economic Recovery Act (ERA) of 2020.

The EmERGE program makes tax credits available to projects that invest private capital into New Jersey and create good-paying jobs, with a focus on the State's priority sectors.

To ensure a strong return on investment for New Jersey taxpayers, projects that receive tax credits under the EmERGE program must yield a minimum net positive economic benefit to the state of 200 to 400 percent depending on project location and the nature of the project. As an Applicant, you must also demonstrate that you are considering a viable out-of-state location for your project. The NJEDA will conduct due diligence, including reviewing a detailed cost comparison of the project's New Jersey and alternative sites, to verify the award of tax credits is a "material factor" in the business's decision to create or retain jobs in New Jersey.

Prior to starting this step, you should have completed a pre-application and conducted a pre-application meeting with an NJEDA EmERGE team member.

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**.

It is highly recommended that you review the sample application on the EmERGE program website ([www.njeda.com/emerge/](http://www.njeda.com/emerge/)) prior to starting the application in an effort to be prepared to provide the requested information.

The application is broken down into 15+ 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.

The NJEDA EmERGE team will not begin our completeness review of your application until all required information has been provided, and the application fee has been received. After NJEDA staff deem your application complete, we will send an email certification to your CEO to confirm that all information

provided in the application is accurate. This certification must be signed under the penalty of perjury to move forward with a full application review.

This full application will 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.

It is highly recommended that you download a copy of the example application and collect written responses and required documents prior to filling them in on this online form.

In the event of any questions, please contact: [emerge@njeda.com](mailto:emerge@njeda.com)

## 2. Contact Information

Throughout the life of an incentive project – from application, to approval, to certification and 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.

### Primary Point of Contact (Applicant Company)

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

#### Name

<input type="text" value="John"/>	<input type="text" value="Smith"/>
First	Last

#### Title

#### Company

#### Mailing Address

Address Line 1

Address Line 2

<input type="text" value="Trenton"/>	<input type="text" value="New Jersey"/>	<input type="text" value="08625"/>
City	State	Zip Code

#### Phone

#### Email

#### Email (Confirm)

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.

**Are you a representative of the applicant company that is legally authorized to submit this application on behalf of the applicant company?**

Yes

No

## Authorized Representative

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

### Name

Jane

First

Smith

Last

### Title

Authorized Rep

### Company

ABC Company

### Phone

(123) 456-7890

### Email

test@njeda.com

### Email (Confirm)

test@njeda.com

**Would you like the Authorized Representative to receive email communications from NJEDA about the status of your application?**

Yes

No

**Are you the Owner, Chief Executive Officer/equivalent officer for North America operations, or equivalent highest-ranking executive for the applicant company?**

Yes

No

## CEO or Equivalent

As part of the application and approval process, the owner, CEO, or equivalent highest ranking officer of the applicant company will need to certify that the information included in this application is accurate and that the award of tax credits is a "material factor" in the applicant's decision making. If the Primary Point of Contact does not hold this role, please provide the contact information for the owner, CEO, or equivalent highest-ranking executive for the applicant company.

### Name

Joe

First

Smith

Last

### Title

CEO

### Company

ABC Company

### Phone

(123) 456-7890

### Email

### Email (Confirm)

**Would you like the CEO or equivalent to receive email communications from NJEDA about the status of your application?**

Yes

No

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

No

## Consultant

### Consultant Contact Name

First

Last

### Title

### Company

### Address

Address Line 1

Address Line 2

City

State

Zip Code

### Phone

### Consultant Contact Email

### Email (Confirm)

**Is the consultant a registered lobbyist?**

Yes

No

**Registered lobbyist number**

**Would you like the listed Consultant Contact to receive email communications from NJEDA about the status of your application?**

Yes

No

## 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

No

## Contact

**Legal Counsel Contact Name**

Gina  
First

Counsel  
Last

**Title**

Legal Counsel

**Legal Counsel Company**

ABC Counsel

**Phone**

(123) 456-7890

**Legal Counsel Contact Email**

test@njeda.com

**Email (Confirm)**

test@njeda.com

**Would you like the listed Legal Counsel Contact to receive email communications from NJEDA about the status of your application?**

Yes

No

## Accountant

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

No

## Contact

**Accountant Contact Name**

Michael  
First

Accountant  
Last

**Title****Accountant Company****Phone****Accountant Contact Email****Email (Confirm)**

**Would you like the listed Accountant Contact to receive email communications from NJEDA about the status of your application?**

Yes

No

## Media Contact

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

**Would you like to designate a Media Contact?**

Yes

No

## Contact

**Media Contact Name**

First

Last

**Title****Media Contact Company****Phone****Media Contact Email****Email (Confirm)**

## 3. Applicant Organization

We now need to collect information about the company that is applying for the Emerge Program. For this section, 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.

## Legal Organizational Information

**Applicant Organization Name**

The full name of your registered legal entity.

**Applicant Doing Business As (DBA)**

ABC Widgets

Does your business operate under a different name?

**Applicant Country of Incorporation/Establishment/Formation**

United States

Country

**Applicant State of Incorporation/Establishment/Formation**

New York

State

**Applicant Year of Incorporation/Establishment/Formation**

1980

**Please upload any formation documents for the applicant organization**

Sample Doc.pdf

**Applicant Federal Employer Identification Number (FEIN)**

12-3456789

The 9 digit Federal Tax ID number of your organization.

**Applicant New Jersey Tax ID Number**

3989574

## Addresses

**Does the Applicant Organization have a US-based headquarters?**

Yes

No

**Applicant Organization's U.S. Headquarters Address**

123 Main Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08625

Zip Code

**Does the Applicant Organization also have a different global headquarters?**

Yes

No

**Applicant Organization's Global Headquarters Address**

456 North Street

Address Line 1

Address Line 2

Paris

City

France

State / Province / Region

09876

Postal / Zip Code

France

Country

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

- U.S. headquarters address
- Global headquarters address
- A different address

### **Applicant Organization's Mailing Address**

789 East Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State / Province / Region

08625

Postal / Zip Code

United States

Country

### **Applicant Organization's Phone**

(123) 456-7890

### **Applicant Organization's Website**

https://www.njeda.com

**If the applicant organization has a Tax Clearance Certificate from the NJ Division of Taxation, please upload that information here. Please note this is not required at the time of application, but will be required prior to Board approval.**

Sample Doc.pdf

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.

## **Locations and Employees**

### **Worldwide**

#### **Number of Locations/Offices (Applicant Company Only)**

5

How many locations or offices does your company have worldwide, including New Jersey?

**Estimated Number of Employees (Applicant Company Only)**

5

How many employees (regardless of type of employee) do you estimate your company has across all locations, including New Jersey?

**In the United States**

**Number of Locations/Offices (Applicant Company Only)**

5

How many locations or offices does your company have in the United States, including New Jersey?

**Estimated Number of Employees (Applicant Company Only)**

5

How many employees (regardless of type of employee) do you estimate your company has across all United States locations, including New Jersey?

**In New Jersey**

**Number of Locations/Offices (Applicant Company Only)**

5

How many locations or offices does your company have in New Jersey?

**Actual Number of Employees (Applicant Company Only)**

5

How many employees (regardless of type of employee) are currently working in a New Jersey office or location (please include employees who are associated with New Jersey offices or locations, but are now working remotely due to the COVID-19 pandemic)? Please provide the actual number for this field, not an estimate.

**Date of New Jersey Employee Count**

5/29/2021

We recognize that employee numbers naturally vary over time. Please provide the date of the above employee count.

**Small Business Designation**

The Emerge Program offers certain flexible terms for small businesses. For this program, “small business” is defined as a company engaged in a targeted industry, with less than 100 FTE employees at the time of application or within 6 months prior to application. FTE calculations should include any parent organizations that has 80% control of the applicant company.

Please note that NJEDA will confirm your status as a small business under the Emerge Program through employment data you will upload later in this application.

**Are you applying for the Emerge Program as a “Small Business”?**

Yes

No

Please download and complete the [Small Business Employee Information Worksheet](#). On this worksheet, you will need to list all company employees. This includes employees of the applicant company, as well as any parent company (if applicable). This should also include employees working across all locations – both

in and outside of New Jersey. When complete, please upload the completed worksheet to attach this to your application.

### **Small Business Employee Information Worksheet**

Sample Doc.xlsx

Under Emerge, a Small Business may start to receive disbursement of tax credits without having met its full job creation requirement in full, if the business can show its meeting a growth plan (defined as annual full-time job growth of 25% of its workforce at the QBF).

### **Please describe how the small business intends to meet the growth plan of 25% annual full-time job growth of its workforce at the QBF.**

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### **Growth Plan**

Sample Doc.pdf

You may upload the aforementioned small business growth plan here, if you wish

# Operational Information

## Applicant Entity Type

- Sole Proprietorship
- Partnership
- C Corporation
- S Corporation
- Limited Liability Corporation
- Nonprofit Organization

What is the ownership structure of the applicant?

## Is the applicant a publicly traded company?

- Yes
- No

## Exchange Ticker Symbol

ABCD

NYSE:XXXX

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

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If you are not sure what to provide, please refer to any information that you provide to customers to describe the services or products your company provides (i.e. About Us section of website, press release language, etc.).

#### **North American Industry Classification System (NAICS) Code**

12345

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](#).

#### **Has the applicant organization received NJEDA assistance in the past?**

Yes

No

**Please describe the NJEDA assistance the applicant company previously received. Please be as specific as possible in detailing the programs through which you received NJEDA assistance, the facilities or projects associated with that assistance, the timeframes in which the assistance was**

**provided, and the status of any awards or agreements.**

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**Is the applicant company involved in religious activities?**

Yes

No

**Religious Activity Form**

Sample Doc.pdf

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

**Is the applicant company involved in political or lobbying activities?**

Yes

No

**Political Activity Form**

Sample Doc.pdf

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

## 4. Affiliates

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

### Contributing Affiliates

**Other than the applicant company, are any of the following related entities contributing jobs (new or at-risk of leaving New Jersey) or capital investment to the project as part of this application? These entities will be considered “Contributing Affiliates” of the applicant.**

- Holding Company
- Subsidiary
- Parent Company with Control
- Parent Company without Control
- Other Affiliates

Yes

No

### Contributing Affiliates

#### Contributing Affiliate 1

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

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

#### Affiliate Type

- Holding Company
- Subsidiary
- Parent Company with Control
- Parent Company without Control
- Other Affiliate

#### Affiliate Organization Name

ABC Affiliate Company

The full name of the registered legal entity.

#### Affiliate Doing Business As (DBA)

ABC Affiliate Widgets Parent Company

Does the affiliate operate under a different name?

### Percent Ownership Stake in Applicant Company

Enter 0 if not applicable.

**Is this affiliate a co-applicant on this Emerge application?**

- Yes  
 No

**Is this affiliate expecting to utilize the Emerge tax credits?**

- Yes  
 No

**Will the affiliate be contributing jobs (new or at-risk of leaving NJ) to the project?**

- Yes  
 No

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

- Yes  
 No

### Applicant Country of Incorporation/Establishment/Formation

Country

### Applicant State of Incorporation/Establishment/Formation

State

### Affiliate Year of Incorporation/Establishment/Formation

**Please upload any formation documents for the Official Affiliate**

Sample Doc.pdf

### Affiliate Federal Employer Identification Number (FEIN)

The 9 digit Federal Tax ID number of the affiliate.

### Affiliate New Jersey Tax ID Number

## Addresses

**Does the Affiliate Organization have a US-based headquarters?**

- Yes  
 No

**Affiliate Organization's U.S. Headquarters Address**

123 Main Street

Address Line 1

Address Line 2

Trenton

New Jersey

08625

City

State

Zip Code

**Does the Affiliate Organization also have a different global headquarters?**

Yes

No

**Affiliate Organization's Global Headquarters Address**

123 West Street

Address Line 1

Address Line 2

Stockholm

Sweden

City

State / Province / Region

12345

Sweden

Postal / Zip Code

Country

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

U.S. headquarters address

Global headquarters address

A different address

**Affiliate Organization's Mailing Address**

789 East Street

Address Line 1

Address Line 2

Trenton

New Jersey

City

State / Province / Region

08625

United States

Postal / Zip Code

Country

**Affiliate Organization Phone**

(123) 456-7890

**Website**

<https://www.njeda.com>

If the affiliate company has a Tax Clearance Certificate from the NJ Division of Taxation, please upload that information here. Please note this is not required at the time of application, but will be required prior to Board approval.

Sample Doc.pdf

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

## Locations and Employees

### Worldwide

#### Number of Locations/Offices (Affiliate Only)

5

How many locations or offices does the affiliate have worldwide, including New Jersey?

#### Estimated Number of Employees (Affiliate Only)

5

How many employees (regardless of type of employee) do you estimate the affiliate has across all locations, including New Jersey?

### In the United States

#### Number of Locations/Offices (Affiliate Only)

5

How many locations or offices does the affiliate have in the United States, including New Jersey?

#### Estimated Number of Employees (Affiliate Only)

5

How many employees (regardless of type of employee) do you estimate the affiliate has across all United States locations, including New Jersey?

### In New Jersey

#### Number of Locations/Offices (Affiliate Only)

5

How many locations or offices does the affiliate have in New Jersey?

#### Actual Number of Employees (Affiliate Only)

5

How many employees (regardless of type of employee) are currently working in a New Jersey office or location (please include employees who are associated with New Jersey offices or locations, but are now working remotely due to the COVID-19 pandemic)? Please provide the actual number for this field, not an estimate.

#### Date of New Jersey Employee Count

5/21/2021

We recognize that employee numbers naturally vary over time. Please provide the date of the above employee count.

**Affiliate Entity Type**

- Sole Proprietorship
- Partnership
- C Corporation
- S Corporation
- Limited Liability Corporation
- Nonprofit Organization

What is the ownership structure of the Affiliate?

**Is the Affiliate a publicly traded company?**

- Yes
- No

**Exchange Ticker Symbol**

WXYZ

NYSE:XXXX

**Please provide a high-level, 2-3 short paragraph description of the Affiliate company. Please include information on the Affiliate’s relationship with the Applicant. Please also include the type of business the Affiliate is involved in, the Affiliate’s mission statement, the markets or customer base the Affiliate serves, and any other information about the Affiliate that the NJEDA should understand to review your application.**

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If you are not sure what to provide, please refer to any information that the Affiliate provides to customers to describe the services or products the Affiliate provides (i.e. About Us section of website, press release language, etc.).

**North American Industry Classification System (NAICS) Code**

67890

Please be sure to use the same code that is listed on the Affiliate's most recent business tax filings.

**Has the affiliate organization received NJEDA assistance in the past?**

- Yes
- No

**Please describe the NJEDA assistance the applicant company previously received. Please be as specific as possible in detailing the programs through which you received NJEDA assistance, the facilities or projects associated with that assistance, the timeframes in which the assistance was provided, and the status of any awards or agreements.**

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**Is the affiliate involved in religious activities?**

- Yes
- No

**Religious Activity Form**

Sample Doc.pdf

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

**Is the affiliate involved in political or lobbying activities?**

- Yes
- No

**Political Activity Form**

Sample Doc.pdf

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

## Non-Contributing Affiliates

Does the applicant company have other non-retail affiliates to report as part of this application that have similar business operations in New Jersey or significant business operations in New Jersey that may impact NJEDA's decision on this application? These entities will be considered "Non-Contributing Affiliates" of the applicant.

- Yes  
 No

## Non-Contributing Affiliates Section

### Non-Contributing Affiliates

#### Non-Contributing Affiliate 1

**Affiliate Type**

- Holding Company  
 Subsidiary  
 Parent Company with Control  
 Parent Company without Control  
 Other Affiliate

**Affiliate Organization Name**

ABC Subsidiary

The full name of the registered legal entity.

**Affiliate Doing Business As (DBA)**

XYZ Widgets

Does the affiliate operate under a different name?

**Percent Ownership Stake in Applicant Company**

0%

Enter 0 if not applicable.

**Affiliate Federal Employer Identification Number (FEIN)**

12-3456789

The 9 digit Federal Tax ID number of the affiliate.

**Affiliate Organization Phone**

(123) 456-7890

**Website**

<https://www.njeda.com>

Please provide a 1-2 sentence description about the affiliate company, including its business operations and relationship to the applicant company, size, and US/Global footprint.

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**Does this affiliate have a New Jersey Location?**

Yes

No

**Please provide a narrative description about the New Jersey location, including the address, the business operations performed there, and the number of employees at the NJ location.**

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**Affiliate New Jersey Tax ID Number**

345678

**Has the affiliate organization received NJEDA assistance in the past?**

Yes

No

**Please describe the NJEDA assistance the applicant company previously received. Please be as specific as possible in detailing the programs through which you received NJEDA assistance, the facilities or projects associated with that assistance, the timeframes in which the assistance was provided, and the status of any awards or agreements.**

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**Please upload an organizational chart or provide documentation that describes or demonstrates the relationship of all affiliates to the applicant company.**

Sample Doc.pdf

## 5. Ownership

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

Yes

No

### Owners

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

## Owner 1

### Percent Ownership Stake in Applicant Company

10%

### Owner Type

- Individual  
 Firm  
 Trust  
 Other

### Legal Name

John

First

Middle

Owner

Last

Suffix

### Address

5 Front Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State / Province / Region

08625

Postal / Zip Code

United States

Country

### Three consecutive years of Business Tax Returns & Financial Statements

Sample Doc.pdf

John Owner

### Three consecutive years of Personal Tax Returns

Sample Doc.pdf

John Owner

### Personal Financial Statement

Sample Doc.pdf

John Owner – please use this [Personal Financial Statement template](#).

### Schedule of Debts

Sample Doc.xlsx

John Owner – please use this [Schedule of Debts template](#).

## 6. Project Details

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

### General Project Information

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

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**Please provide a 1–2 paragraph description of the types of activities and job functions included in the project for which you are seeking Emerge Tax Credits.**

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**Please provide a 1–2 paragraph description of the anticipated facilities required for the project (referred to as the “qualified business facility”) for which you are seeking Emerge Tax Credits.**

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**Please provide a 1–2 paragraph description of the internal business case driving the applicant’s strategic decision to execute the project, and how the project fits into the applicant’s overall business plan and their business plan in New Jersey (or the region)**

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

Yes

No

**Please provide a 1–2 paragraph description of how the project will be split across multiple facilities or locations. If some new jobs will not be physically located at the qualified business facility, please describe.**

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

Sample Doc.pdf

## **Headquarters**

**Does this project include the establishment of the applicant company's headquarters facility in New Jersey?**

Yes

No

**Please describe which of the following best describes the type of headquarters this project involves.**

Global

- National
- Regional

## Opportunity for Industry Leadership

The Emerge Program allows for additional bonuses and the potential for a "Mega Project" designation if a project is determined to include an investment that could catalyze a new industry cluster in the state or an investment that would provide New Jersey an opportunity to take a national or global leadership position in a targeted industry or new technology.

**Does this project include an investment that would meet the "Mega Project" designation?**

- Yes
- No

**Please provide a 2–3 paragraph narrative description for how the proposed project meets the "Mega Project" designation.**

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Please upload additional documentation that would help substantiate this claim.

Sample Doc.pdf

## Project Schedule

Please provide estimated timing for each of the milestones identified below to help NJEDA better understand your project.

### Anticipated Construction Start Date

5/10/2021

### Anticipated Construction End Date

5/18/2021

### Anticipated Start of Business Operations at QBF

5/25/2021

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

5/31/2021

## Environmental Sustainability

Projects that receive financial assistance from NJEDA must meet minimum environmental standards. Please acknowledge the following requirements of [NJEDA's Green Building Standards](#).

I acknowledge that my qualified business facility must comply with Green Building Standards.

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

## 7. Targeted Industry

In this section we will collect information that will help determine if the applicant company, project, or applicant's parent company qualifies to be in an Emerge Program targeted industry.

The Emerge Program has twelve targeted industries. Each of these industries has a [specific definition](#), including a description of the industry, examples of types of activities that NJEDA will consider to be part of that industry and activities that NJEDA excludes from that targeted industry.

Please review the definitions for any industry that you think might apply to either the applicant company, the primary work associated with the project, or the applicant's parent company (if applicable).

- Advanced Transportation and Logistics
- Advanced Manufacturing
- Aviation
- Autonomous Vehicle and Zero-emission Vehicle Research or Development
- Clean Energy
- Life Sciences

- Hemp Processing
- Information and High Technology
- Finance and Insurance
- Professional Services
- Film and Digital Media
- Non-retail Food and Beverage

**Based on your review of the above definitions, please select all of the following that are true.**

- The applicant company's core business is in a targeted industry
- The activity undertaken by the project's full-time employees will primarily be in a targeted industry
- The applicant's parent company is in a targeted industry
- The applicant, project, and applicant parent (if applicable) are not in a targeted industry

## **Applicant Industry**

Please identify the targeted industry that you believe most closely matches the activities undertaken by the applicant. If you believe that the applicant meets the definitions of more than one, please select the best fit one and provide additional detail on the other industries in the below narrative description.

### **Industry**

- Advanced Transportation and Logistics
- Advanced Manufacturing
- Aviation
- Autonomous Vehicle and Zero-emission Vehicle Research or Development
- Clean Energy
- Life Sciences
- Hemp Processing
- Information and High Technology
- Finance and Insurance
- Professional Services
- Film and Digital Media
- Non-retail Food and Beverage

See [definitions of targeted industries](#) for more information.

**Please provide a 1–2 paragraph narrative description explaining how the applicant meets the definition of the Advanced Transportation and Logistics industry.**

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If you believe that the applicant meets the definitions of more than one targeted industry, please explain.

**Please upload any additional documentation to substantiate your claim that the applicant meets the definition of the Advanced Transportation and Logistics industry.**

Sample Doc.pdf

## 8. New Jersey Project Location

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

Please use the following tool to look up details about your project's proposed address. These details (e.g., census tract) will help NJEDA determine the appropriate base tax credit level and bonuses that are applicable for your project.

If your project spans multiple locations (QBFs), blocks, lots, census tracts, etc., please provide the information that you think will be the future address of the project and provide additional details in the

below narrative descriptions and uploads.

**Census Tract**

456789

**Project Address**

1 Test Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08625

Zip Code

**In 1–3 paragraphs, please describe why this location was chosen as the best New Jersey location for this project.**

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In your narrative description, please detail the factors that went in to choosing this site and what other sites in New Jersey were considered for this project.

## **Qualified Business Facility and Usage**

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

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

- Leased
- Owned

**What is the class rating of the space you are considering for the New Jersey project location?**

- Class A
- Class B

Class C

**Which of the following options best describes the current status of the real estate transaction at this location?**

Site Visit complete

In early negotiations

Received non-binding Letter of Intent

Received binding Letter of Intent

Working on Draft Lease

Signed Letter of Intent / Negotiating Lease

Currently Leased / Owned

**What is the total Square Footage of the Qualified Business Facility?**

30,000

This should be for the entire facility, not just the portion which the applicant is utilizing.

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

20,000

Useable Square Footage leased by the tenant.

Of the **20,000** square feet that would be used or leased by the applicant company in the QBF, please provide break downs across the following uses for any **new construction** and any **improvements to existing space**:

<b>Usage</b>	<b>New Construction</b>	<b>Existing Space</b>
<b>Industrial</b>	10,000	0
<b>Warehouse / Logistics</b>	0	10,000
<b>Research &amp; Development</b>	0	0
<b>Office / Other</b>	0	0
<b>Totals</b>	10,000 square feet	10,000 square feet

**Total Square Footage Breakdown**

20,000 square feet

All new construction and existing space.

**Please upload a copy of any site plans that will help NJEDA staff better understand the breakdown above, as well as understand the amount of workforce capacity at this site.**

Sample Doc.pdf

**Please provide a 2-3 paragraph narrative description of the capital investment that the applicant**

**anticipates making in the QBF as part of this project.**

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## **Local Taxes and Other Public Assistance**

**Is there a local payroll tax or other local taxes (other than property taxes) that would impact this project?**

Yes

No

**Please provide a description of the additional local taxes.**

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NJEDA does not typically include local property taxes in its net economic benefit calculations. However, for projects with new construction, we do provide an opportunity for applicants to make the case to NJEDA that new local property taxes will result in a positive net benefit to the State.

**Do you intend to request NJEDA to include incremental property taxes in the net benefit calculation for your project?**

Yes

No

**What is the estimated incremental property taxes to the municipality per annum after making the project's capital investment?**

\$30,000.00

If you are applying as a small business in the Emerge Program, you can skip this question.

**Please provide an upload of documentation to support this estimate.**

Sample Doc.pdf

This may include any applicable PILOT agreements, information on local tax rates and applicable abatements, real estate appraisal, preliminary assessment from a tax assessor or any other relevant third-party document.

**Does the project intend to utilize Urban Enterprise Zone sales tax benefits?**

Yes

No

**Please provide a 2-3 paragraph narrative description, if applicable, of other government (federal, state, or local) financial assistance the project has received or is anticipated to receive, and intends to utilize on this project.**

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In this narrative description, please specify program name, granting body, dollar amounts or value, terms and status of application.

**Please upload any documentation that would aid the NJEDA staff in understanding the other received or anticipated government (federal, state, or local) support for this program described**

## Landlord Information

### Landlord Name

Stacy  
First

Landlord  
Last

### Landlord Title

Landlord

### Landlord Company

Landlord Company

### Landlord Address

4 Test Street  
Address Line 1

Address Line 2

Trenton  
City

New Jersey  
State

09876  
Zip Code

### Landlord Email

test@njeda.co

### Landlord Phone

(123) 456-7890

### Approximately when did the landlord acquire the project site?

5/1/2021

Is there a preexisting relationship—of any kind—between the landlord and the applicant company?

Yes

No

Please explain the relationship between the landlord and the applicant company.

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## 9. New Full-Time Jobs at the New Jersey Project Location

Please provide information below on all new full-time jobs that will be created at the project location. New full time jobs should be reported below in aggregate across job positions, titles, or salary levels/level of position (i.e. entry-level vs executive level). For example, if the project intends to create 10 new Entry-level Accountant positions, please report a single entry for Position: Entry-level Accountant, Number of Full-Time Jobs: 10. Because we are asking for average salary data, please be mindful of salary levels/levels of positions when creating your entries – for example, an Entry-Level Accountant should not be part of the same line entry as the Chief Financial Officer, even though they both may have financial positions. If in doubt, please err on the side of creating additional rows of data to reflect differences in positions.

**Please Note – In this section you should report new full-time jobs only. We will collect information regarding existing jobs that are at-risk of leaving New Jersey later in the application.**

### Positions

## Position 1

### Title

Entry Level Accountant

Senior Software Engineer

### Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.

10

### Number of New Full Time Jobs who will spend at least 80% of their work time at the project location, but will NOT spend at least 80% of their work time at the QBF.

10

### Total Number of New Full Time Jobs

20

### Average Annual Salary

\$50,000.00

### Hours Worked Per Week (Agerage)

35

35

### Are these jobs being created by the Applicant Company or an Affiliate?

Applicant

Affiliate

## Position 2

### Title

Mid-Level Accountant

Senior Software Engineer

### Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.

10

### Number of New Full Time Jobs who will spend at least 80% of their work time at the project location, but will NOT spend at least 80% of their work time at the QBF.

10

### Total Number of New Full Time Jobs

20

### Average Annual Salary

\$75,000.00

### Hours Worked Per Week (Agerage)

35

35

**Are these jobs being created by the Applicant Company or an Affiliate?**

Applicant

Affiliate

### Position 3

**Title**

Senior Level Accountant

Senior Software Engineer

**Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.**

2

**Number of New Full Time Jobs who will spend at least 80% of their work time at the project location, but will NOT spend at least 80% of their work time at the QBF.**

0

**Total Number of New Full Time Jobs**

2

**Average Annual Salary**

\$125,000.00

**Hours Worked Per Week (Agerage)**

35

35

**Are these jobs being created by the Applicant Company or an Affiliate?**

Applicant

Affiliate

**Total New Full Time Jobs to Be Created**

42

I acknowledge that any jobs associated with this application (new or at-risk of leaving New Jersey) must be provided health benefits under a health plan, no later than 90 days after date of hire.

I acknowledge that any jobs associated with this application (new or at-risk of leaving New Jersey) must be paid no less than \$15 per hour or 120 percent of the minimum wage.

I acknowledge that any jobs associated with this application (new or at-risk of leaving New Jersey) must spend 80% of their time in New Jersey.

To receive any applicable bonuses for these jobs, all full-time employees working at the qualified business facility, **whether they are the jobs for which the company is applying for an incentive or not**, must

receive wages that are the greater of \$15/hour or 120% of minimum wage.

**Will all full-time jobs at the facility receive wages that are the greater of \$15/hour or 120% of minimum wage?**

- Yes
- No

## 10. Other New Jersey Locations

In this section, we will collect additional information about any New Jersey locations currently occupied by the applicant company or its official affiliates or parent company. This includes information about any jobs that are at risk of leaving if the proposed project does not happen in New Jersey, These locations may or may not be the same as the proposed New Jersey project location.

**Is the applicant company or an official affiliate currently located in or operating in New Jersey?**

- Yes
- No

## Locations

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

Please report each **NON-RETAIL** location for the applicant, official affiliates, and affiliate parent. Non-retail locations may include: offices, R&D facilities, industrial or production facilities, or warehousing.

### Location 1

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

- Applicant
- Contributing Affiliate

#### Address

7 Test Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08625

Zip Code

**Is this location leased or owned?**

- Leased
- Owned

**When does lease end?**

10/14/2021

**What is the total Square Footage of the existing facility at this location?**

300,000

**Of the total square footage, what is the useable or leased square footage of the existing facility at this location, currently being used by the applicant company and/or affiliate?**

200,000

## Jobs at this Location

**Please provide a 1–2 paragraph narrative description of the types of job functions at this facility. Please provide an estimated breakdown of the full-time, part-time, and other jobs across these job functions.**

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**Please identify how many of the following types of employees are currently working at this location:**

**Full Time**

100

**Part Time**

50

**Other**

0

**Of the full-time positions, how many of these full-time positions are at-risk of leaving New Jersey**

**if the project is not awarded an Emerge tax credit?**

75

**How many of these at-risk jobs, if any, were previously incentivized by the NJEDA through predecessor incentive programs?**

17

**Employee Information Worksheet**

Sample Doc.xlsx

In addition to providing the number of at-risk jobs here, please download the [Employee Information Worksheet](#), enter the applicable data for each job at risk of leaving New Jersey, and upload it here. If you have at risk employees across multiple locations, a single worksheet can be completed for all at-risk employees across all NJ locations. This information must be attached to your Emerge application.

**Will the Emerge tax credit reduce employment at any other site controlled by the applicant or its corporate parent, inside New Jersey, resulting from automation, merger, acquisition, corporate restructuring or other business activity?**

Yes

No

**Please explain how employment would be reduced.**

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**If not awarded an Emerge incentive, what is the estimated date by which the at-risk jobs would leave the existing facility/New Jersey?**

5/4/2021

**Please provide a 1–2 paragraph narrative description of the reasons that the company is considering moving jobs from this facility Please be thorough and detailed in your response.**

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

Sample Doc.pdf

## 11. Alternate Project Location

In this section, we will collect information about your project's alternative location outside of New Jersey, including location and project cost details. While there may be more than one location you are considering, we would like you to focus on the single alternative location, that is being the most seriously considered for this project.

### Project Address

9 Test Street

Address Line 1

Address Line 2

City

State

Zip Code

### Census Tract

**In 2–3 paragraphs, please describe why this location was chosen as the best alternative (outside of New Jersey) location for this project. In your narrative description, please layout the factors that went in to choosing this site and what other alternative sites you considered.**

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In your narrative description, please detail the factors that went in to choosing this site and what other sites in New Jersey were considered for this project.

### Facility

**Will the facility at the alternate project location be leased or owned?**

- Leased
- Owned

**What is the class rating of the space you are considering for your alternate location?**

- Class A
- Class B
- Class C

**Which of the following options best describes the current status of the real estate transaction at this location?**

- Site Visit complete
- In early negotiations
- Received non-binding Letter of Intent
- Received binding Letter of Intent
- Working on Draft Lease
- Signed Letter of Intent / Negotiating Lease
- Currently Leased / Owned

**What is the total Square Footage of the alternate location's facility?**

This should be for the entire facility, not just the portion which the applicant is utilizing.

**Of the total square footage, what is the useable or leased square footage for the applicant within the alternate location's facility?**

Useable Square Footage leased by the tenant.

Of the **20,000** square feet that would be used or leased by the applicant company in the alternate location's facility, please provide break downs across the following uses for any **new construction** and any **improvements to existing space**:

<b>Usage</b>	<b>New Construction</b>	<b>Existing Space</b>
<b>Industrial</b>	<input type="text" value="10,000"/>	<input type="text" value="0"/>
<b>Warehouse / Logistics</b>	<input type="text" value="10,000"/>	<input type="text" value="0"/>
<b>Research &amp; Development</b>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>Office / Other</b>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>Totals</b>	20,000 square feet	0 square feet

**Total Square Footage Breakdown**

20,000 square feet

All new construction and existing space.

**Please upload a copy of any site plans that will help NJEDA staff better understand the breakdown above, as well as understand the amount of workforce capacity at this site.**

Sample Doc.pdf

**Please provide a 2-3 paragraph narrative description of the capital investment that the applicant anticipates making in the alternate location as part of this project.**

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**Please upload a copy of any documentation that exists with respect to this alternate location. This may include lease agreements, ownership documents, or substantially similar documentation for the applicant's potential out of state location alternatives, to the extent they exist.**

Sample Doc.pdf

## **Local Taxes and Other Public Assistance**

**Has the applicant received a state or local incentive offer from the alternate location?**

Yes

No

**Is this incentive offer subject to the discretion of the state or local entity?**

Yes

No

**Is there a local payroll tax or other local taxes (other than property taxes) that would impact this project?**

Yes

No

**Please provide a description of the additional local taxes.**

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**Has a PILOT agreement been negotiated between the applicant company and the alternate project location?**

- Yes
- No
- Currently in negotiation

**Please upload a copy of the agreement.**

Sample Doc.pdf

**Has the project received a tax abatement?**

- Yes
- No

**Please upload any documentation regarding the tax abatement.**

Sample Doc.pdf

**Please provide a 2-3 paragraph narrative description, if applicable, of other government (federal, state, or local) financial assistance the project has received or is anticipated to receive, and intends to utilize at this alternate location.**

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In this narrative description, please specify program name, granting body, dollar amounts or value, terms and status of application.

**Please upload any documentation that would aid the NJEDA staff in understanding the other received or anticipated government (federal, state, or local) support for this program described above.**

Sample Doc.pdf

## Landlord Information

Landlord Name

Richard

Landlord

First

Last

**Landlord Title**

Landlord

**Landlord Company**

Landlord Company

**Landlord Address**

7 Test Street

Address Line 1

Address Line 2

Trenton

City

New Jersey

State

08625

Zip Code

**Landlord Email**

test@njeda.com

**Landlord Phone**

(123) 456-7890

**Approximately when did the landlord acquire the project site?**

5/18/2021

**Is there a preexisting relationship—of any kind—between the landlord and the applicant company?**

Yes

No

**Please explain the relationship between the landlord and the applicant company.**

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## 12. New Full-Time Jobs at the Alternate Project Location

Please provide information below on all **new full-time jobs** that will be created at the alternate project location. The jobs should be reported below in aggregate across job positions or titles. For example, if the project intends to create 10 new Entry-level Accountant positions, please report a single entry for Position: Entry-level Accountant, Number of Full-Time Jobs: 10. If in doubt, you may create an additional row of data.

### Positions

#### Position 1

##### Title

Entry-Level Accountant

Senior Software Engineer

**Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.**

10

**Number of New Full Time Jobs who will spend at least 80% of their work time in California, but will NOT spend at least 80% of their work time at the QBF.**

0

**Total Number of New Full Time Jobs**

10

**Average Annual Salary**

\$50,000.00

**Hours Worked Per Week (Average)**

35

35

**Are these jobs being created by the Applicant Company or an Affiliate?**

Applicant

Affiliate

## **Position 2**

**Title**

Mid Level Accountant

Senior Software Engineer

**Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.**

15

**Number of New Full Time Jobs who will spend at least 80% of their work time in California, but will NOT spend at least 80% of their work time at the QBF.**

10

**Total Number of New Full Time Jobs**

25

**Average Annual Salary**

\$75,000.00

**Hours Worked Per Week (Average)**

35

35

**Are these jobs being created by the Applicant Company or an Affiliate?**

Applicant

Affiliate

### Position 3

#### Title

Senior Level Accountant

Senior Software Engineer

#### Number of New Full Time Jobs who will spend at least 80% of their work time at the QBF.

2

#### Number of New Full Time Jobs who will spend at least 80% of their work time in California, but will NOT spend at least 80% of their work time at the QBF.

0

#### Total Number of New Full Time Jobs

2

#### Average Annual Salary

\$125,000.00

#### Hours Worked Per Week (Average)

35

35

#### Are these jobs being created by the Applicant Company or an Affiliate?

Applicant

Affiliate

#### Total New Full Time Jobs to Be Created

37

## 13. Award Timelines and Project Costs

In this section, we will collect information about the duration of your requested award and the project costs at your New Jersey and alternative locations.

### Eligibility and Commitment Periods

To estimate your tax credit award NJEDA needs to determine your project's *Eligibility Period* and *Commitment Period*.

Your projects *Eligibility Period* will be the number of years that you wish to get tax credits. The Emerge Program allows eligible applicants to select an *Eligibility Period* of up to seven (7) years. The longer your eligibility period, the greater your total award size will be. However, longer Eligibility Periods will also necessitate a longer *Commitment Period* (see below). NJEDA expects that most applicants will request seven (7) year *Eligibility Periods*.

**If approved for a tax credit, how many years would you like your Eligibility Period to be (i.e., for how many years would you like to receive tax credits)?**

To estimate your project's *Total Project Comparison Costs* for the New Jersey and the Alternative location NJEDA needs to determine your *Commitment Period*, or how many years you intend to commit to keep your project in New Jersey. Your *Commitment Period* will also be a key input into your projects Net Benefit Analysis.

At a minimum, your project's *Commitment Period* must be one and a half times as long as your project's *Eligibility Period*, rounded up to the nearest full year. For example, if you selected seven years for your *Eligibility Period*, your *Commitment Period* will be seven multiplied by one and a half, which equals 10.5 years, rounded up to 11 years. Applicants can elect to extend their *Commitment Period* beyond the minimum to increase their calculated Net Benefit to the State (for example, to meet minimum program requirements or to potentially increase award size). *Commitment Periods* can be extended up to a maximum of 20 years (if an applicant provides evidence, such as a 20-years lease, to the NJEDA that it intends to keep the project in the State for longer). NJEDA expects most applicants will request *Commitment Periods* between 11 and 20 years.

**If approved for a tax credit, how many years would you like your Commitment Period to be (i.e. how many years would you commit to keep your project in New Jersey for the purpose of calculating the project's benefit to the State)?**

## Project Costs

In this section, we will collect information about the project costs the applicant company expects to incur for the proposed project both at the New Jersey QBF or at the alternative location. NJEDA will use the below information for several different calculations, so please read these instructions carefully and be as thorough as possible in your answers to this section.

As part of our evaluation process, NJEDA will first review all cost estimates, both for the New Jersey location as well as the alternate project location for reasonableness. This evaluation will include looking at the applicant's justification and supporting documents. Please include relevant information on assumptions or how estimates were derived in the justification field for each category cost estimate. Please provide any supporting documentation that will help NJEDA staff validate these assumptions.

NJEDA staff may follow-up with applicants to get further information about any cost category that is not clearly justified or supported through documentation. Note: re-engaging with applicants to clarify cost estimates is one of the largest causes of application review delays. Providing clear, and where possible third-party document supported, cost justifications in your original application is one of the best ways to ensure timely processing of your application.

Upon validation of all costs, NJEDA will sum all of the one-time costs for the project in New Jersey. This total will be the projects *Total One-time Project Cost* estimate.

NJEDA will then compute a Net Present Value for all of the annual ongoing costs for the project in New Jersey for each of the years that that the applicant company is requesting to utilize as their project's *Commitment Period*. The result of this calculation will be the New Jersey project's *Total Ongoing Project Cost* estimate.

NJEDA will then calculate the *Total New Jersey Project Comparison Cost* by summing the *Total One-time*

*Project Cost and the Total Ongoing Project Cost.*

NJEDA will repeat this procedure for the Alternative Project Location to calculate the *Total One-time Alternative Project Cost*, the *Total Ongoing Alternative Project Cost*, and the *Total Alternative Project Comparison Cost* respectively.

See below for a full list of both one-time and ongoing costs and descriptions of each cost category.

Applicants should complete an entry for each cost category. If there are no associated projects costs in the category, please enter “0” in the value field and “N/A” in the justification field.

In cases where there are significant differences in the alternative site as compared to the New Jersey location that would significantly alter the cost basis for the two projects (e.g., if the applicant company was considering a 100,000 square foot Class A office facility in New Jersey and a 150,000 square foot Class B office facility in the alternative locations), please correct costs to create an “apples to apples” comparison. All adjustments should be made in the alternative location column and should be clearly explained in the justification field or in a supporting document.

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

- Hard construction costs for new construction
- Hard construction cost for renovations, repairs, or improvements
- Remediation
- Demolition and site preparation
- Site-related utility and infrastructure improvements
- Permanent heavy machinery and equipment acquisition and installation
- Furniture, Fixtures and Office Equipment
- One-time technology infrastructure costs
- Landlord contributions
- Eligible project soft costs (may be up to 20% of the total of all above categories)

Finally, NJEDA will utilize the validated cost category information to determine the New Jersey project’s estimated *Hard Construction Cost*, which will be used as an input into the Net Benefit Analysis. *Hard Construction Cost* will be calculated using the following categories:

- Hard construction costs for new construction
- Hard construction cost for renovations, repairs, or improvements
- Remediation

- Demolition and site preparation
- Site-related utility and infrastructure improvements
- Landlord contributions

## UPFRONT COST CATEGORIES AND DEFINITIONS

- **Building acquisition** (only for arms-length transactions)
- **Land acquisition** (if separate from building acquisition and only for arms length transactions)
- **Hard construction costs for new construction** (of buildings, structures, or facilities)
- **Hard construction cost for renovations, repairs, or improvements** (of a building, structure, or facility)
- **Remediation** (both site and building remediation can be included; please exclude any federal, state or local financial assistance)
- **Demolition and site preparation**
- **Site-related utility and infrastructure improvements** (including but not limited to: water, electric, sewer, and stormwater, and transportation infrastructure improvements; landscaping and tree planting; solar panel and energy storage components installations, installation costs of renewable energy systems, etc.)
- **Permanent heavy machinery and equipment acquisition and installation** (please include any major machinery or equipment that is permanently built into the facility and could not be moved to another location; examples of this type of equipment include a heavy-lift crane that is built into the facility or production equipment that the facility is built into the facility and installed before construction is completed; do not double count any costs already included in hard construction costs)
- **Eligible project soft costs** (eligible costs include, but are not limited to: architecture, design, permitting and permit fees, engineering, financing and legal, loan origination and closing costs, construction management, and freight and shipping delivery; note: for the sake of calculating the eligible capital investment for a project, soft costs totaling up to 20% of the six previous cost categories will be eligible; any excess costs in eligible categories will not be included in the capital investment calculation)
- **Ineligible project soft costs** (ineligible project soft costs will be included in the overall project cost comparison across sites, but will not be included as eligible capital investment to meet the Emerge Program's eligibility requirements; please include costs such as air fare, mileage, tolls, gas, meals, related to project development, site launch marketing costs, temporary signage costs, incentive consultant fees, Authority tax credit application fees, loan interest payments, escrows, or other similar costs).
- **Non-permanent machinery and equipment acquisition and installation** (including, but not limited to: movable production equipment, vehicles, and other heavy machinery that could be removed to another site or sold if the site were to be re-purposed for an alternative use; capital leases of non-permanent machinery and equipment can be included in this section as outlined in the program regulations)

- **Furniture, fixtures and office equipment** (such as copiers, desks, lighting fixtures, and other similar items; capital leases of furniture, fixtures, and office equipment can be included in this section as outlined in the program regulations)
- **One-time technology infrastructure costs** (including items such as local area network, servers, routers, and similar IT investments; excluding software, wireless service plans, or any other ongoing costs)
- **One-time human resources-related costs** (including severance, employee relocation costs, recruitment bonuses,
- **Lease termination costs** (please include any early lease termination costs associate both with any NJ locations or alternative locations)
- **Moving Costs** (including packing material)
- **Other one-time costs** (please specify what these costs are in the justification field; NJEDA staff will review justification and supporting documentation and determine eligibility of these items at the Authority's discretion)
- **Landlord contributions** (please specify the total amount of the above costs that are expected to be paid for by the site's landlord on behalf of the applicant (tenant); please provide additional documentation regarding these costs or allowances in the justification field)

## **ONGOING ANNUAL COST CATEGORIES AND DEFINITIONS**

**Rental costs** (Annual – please utilize this cost category if you are a tenant in a landlord owned facility)

**Ownership costs** (Annual – if you have purchased your facility/site, please include estimate the annual cost of ownership of the asset. For example, calculate the terminal value the facility/site at the end of the projects commitment period; calculate the difference between the current fair market value (such as a sales price) and the terminal value; divide that difference by the total number of years in your commitment period, add in any relevant ongoing annual financing costs, and include that figure into this cost category; please provide a description of the methodology you are using in the justification field and support it with an attached document)

**Real estate taxes** (Annual)

**Property insurance** (Annual)

**Building maintenance** (Annual)

**Electricity** (Annual)

**Other utilities** (Annual)

**Estimated payroll** (Annual; applicants can include estimates that reflect the different labor market conditions across the New Jersey and the alternative site; adjustments derived solely from changes in average tenure of employees due to current employees not relocating and being replaced by new employees should be excluded unless those savings can be realized in both the New Jersey and the

alternative locations)

**Disability & unemployment insurance** (Annual)

**Health care coverage costs** (Annual)

**Facility security costs** (Annual)

**Facility transportation costs** (Annual - including company paid shuttle services, parking facility costs, and other related items)

**Inbound/outbound distribution and logistics costs** (Annual – include only costs that are directly linked to the specifics of distribution and logistics related to the project site; you may exclude this category if distribution and logistics costs will be similar across both the New Jersey and the alternative location)

**Other annual costs** (please specify what these costs are in the justification field; NJEDA staff will review justification and supporting documentation and determine eligibility of these items at the Authority’s discretion)

## One-Time Costs

One-Time Cost 1		
Cost		
Building acquisition		
Spacer	New Jersey Project Location	Alternate Project Location
Cost	\$100,000.00	\$120,000.00
Who is incurring cost?	<input checked="" type="radio"/> Applicant <input type="radio"/> Affiliate <input type="radio"/> Landlord <input type="radio"/> <input type="text"/>	<input checked="" type="radio"/> Applicant <input type="radio"/> Affiliate <input type="radio"/> Landlord <input type="radio"/> <input type="text"/>
Justification / Description	Test	Test
Supporting Documentation	Sample Doc.pdf	Sample Doc.pdf

## Summary of One-Time Costs

Spacer	New Jersey Project Location	Alternate Project Location
Total One-Time Project Costs	\$100,000.00	\$120,000.00
Total Eligible Capital Investment	\$0.00	\$0.00



re-run certain analyses, such as the net-benefit test, at certification.

**Do you anticipate that the project will enter into a Labor Harmony Agreement for new or retained full-time employees involved in retail, distribution, or warehousing? Please distinguish between new/retained full-time employees at the QBF and new full-time employees outside of the QBF, and specifically how many in each group do you expect will enter into a Labor Harmony Agreement.**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please estimate the number of full-time new jobs and the number of full-time retained jobs that will be subject to the labor harmony agreement.**

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**Will the project provide employees at or associated with the QBF access to child care either through an on-site quality child care facility free of charge to its employees, or by offering employees a minimum of \$1,500 per employee per year in reimbursements, subsidies or vouchers,**

**paid by the applicant company for the cost of child care?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details as to whether the child care will be on-site or a reimbursement/voucher-based model. While the bonus will be available to all eligible new and retained jobs regardless of use, please estimate how many employees are expected to utilize the program annually.**

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**Does the applicant company intend to enter into an agreement with a prisoner re-entry program for the purpose of identifying and promoting employment opportunities at the applicant company for former inmates and current inmates leaving the corrections system, and does the applicant company intend to hire at least one active participant from the re-entry program?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on whether you have already engaged with potential prisoner re-entry programs or intend to do so in the future. While the bonus will be available to all eligible new and retained jobs regardless of whether or not they are criminal justice involved individual, please estimate how many jobs you expect to fill with re-entering prisoners for this project.**

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**Will the project generate at least 50% of the Qualified Business Facility's energy through on-site solar energy generation?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on the size of anticipated solar installations, how this will fit into your capital investment, and any relevant corporate sustainability goals already announced by the**

**applicant company or applicant's parent company.**

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**Does the applicant company intend to fund a training program specific to the applicant company's industry, which has the capacity to enroll 10 percent or more of the applicant company's full-time workforce, or pay a State educational institution to provide to the public a training program specific to the applicant company's industry?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on whether you have already engaged with potential educational institution training partner or if you intend to run the training program internally. Please explain if you anticipate this training will be for existing workforce or if will be made available to other members of the public.**

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**Is the applicant company engaged in a targeted industry, and does the applicant company intend to use the Qualified Business Facility to conduct a full-time collaborative research relationship with a college or university? The full-time collaborative research relationship must commence after approval of the application and must require at least 35 hours per week of collaborative activity.**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on whether you have already engaged with New Jersey-based colleges or universities. Please explain what the topic of the collaborative research relationship would be and how the program would operate.**

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**Will the qualified business facility be located in a qualified incubator facility, defined as a commercial building located within an incentive area: that contains 5,000 or more square feet of office, laboratory, or industrial space; that is located near and collaborating with a research institution, teaching hospital, college, or university; with at least 50 percent of the gross leasable area restricted for use by one or more technology startup companies?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on which qualified incubator facility you project would utilize and your current relationship with that incubator. Please explain how your company would engage with other members of New Jersey’s innovation economy located at the incubator.**

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**Will the project be a marine terminal project in a municipality located outside a government-restricted municipality, but within the geographical boundaries of the South Jersey Port District?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please include details on the proposed projects location, any prior experience running marine terminal projects in New Jersey or elsewhere, and any interactions the applicant company has had with the South Jersey Port Corporation to date. Please provide information on the South Jersey Port Corporation’s level of interest in participating in this project.**

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**Will the Qualified Business Facility be Leadership in Energy and Environmental Design (LEED) Certified, with a Gold or Platinum rating?**

Yes

No

**Please provide a 1–2 paragraph narrative description explaining this part of your project. In the description, please provide details on the where in the LEED rating process you are currently and if the applicant company has any prior experience with LEED certified facilities. Please confirm that any incremental costs associated with the LEED certification process have been included in the proposed Total Project Costs for both the New Jersey project location and the alternative location.**

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A bonus available under Emerge if one-third or more of the members of the applicant company's governing board or other governing body self-identify as members of an underrepresented community, which shall be Black, African American, Hispanic, Latino, Asian, Pacific Islander, Native American, Native Hawaiian, Alaska Native or lesbian, gay, bisexual, or transgender. If the applicant wishes to pursue this bonus, NJEDA reserves the right to speak with governing body members and/or collect information from the business or governing body members for compliance purposes.

**Please select the option that is most accurate:**

One-third or more of the applicant company's governing body members currently self-identify as members of an underrepresented community.

One-third or more of the governing body members do not self-identify as members of an underrepresented community at this time, however the applicant company would like to pursue this bonus.

The applicant company does not wish to pursue this bonus.

**Please share any information that you can about how the governing body meets this requirement.**

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## 15. Other Factors Driving Your Decision Making

In this section we will collect information on the other factors that may be driving your decision making on where to locate the proposed project. We will also request updates on information provided during the pre-application process.

### Updates to Information Provided on Pre-Application

**During the pre-application process, you indicated that the applicant company or any related entity have not yet obtained site control of the proposed qualified business facility in New Jersey. Is this still accurate?**

Yes

No

**During the pre-application process, you indicated that the applicant company or any related entity do not have a purchase contract for the purchase of the property. Is this still accurate?**

Yes

No

**Has the applicant company or any related entity signed a lease for the QBF?**

Yes

No

**Does this lease include penalty-free contingency that the lease is conditional on the approval of the tax credit?**

Yes

No

**During the pre-application process, you indicated that the applicant company or any related entity have not started construction on the QBF. Is this still accurate?**

Yes

No

**During the pre-application process, you indicated that no formal decision (such as an applicant Board decision, an applicant parent company Board decision, or a formal management decision) had been made to locate the project in New Jersey. Is this still accurate?**

Yes

No

**During the pre-application process, you indicated that neither the applicant company nor any related entity had made any public announcement about locating in New Jersey. Is this still accurate?**

Yes

No

**Has the applicant company or any related entity incurred any expenses related to the qualified business facility, including but not limited to: moving, furniture, fixtures and equipment purchases?**

Yes

No

**Please provide a 1–2 paragraph narrative description of any additional expenses that have been made, when and why they were undertaken, and whether similar expenses have been made for alternative locations.**

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## Additional Factors Driving Your Decision Making

Please provide a **3-4 paragraph** narrative description of the business's rationale for the following:

- Please provide a description of the overall business rationale for locating this project in New Jersey. In your narrative, please specifically address the following:
  - Do you believe New Jersey's geographic location or infrastructure provide a unique benefit to this project compared to the alternate project location? Why or why not?
  - Do you believe this project would benefit from New Jersey's large retail / corporate customer base compared to the alternate project location? Why or why not?
- In addition, please also include information on what the business rationale would be for locating the project in the alternate location instead of New Jersey.

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**Alternatively, you may also choose to upload this as a document to be attached to the application.**

## Key Factors

In alignment with the above narrative, please select (up to five) the most important factors that are driving the applicant's decision as to where to locate the project. Please weight these factors utilizing a total of 100 points. The higher the point total assigned to a factor, the more important it is to the applicant's decision making.

Factor	Weight
Talent Pool	20
Costs	50

Proximity to Colleges/Universities	10
Transportation & Logistics	10
Proximity to Client Base or Supporting Vendors	10

**Total: 100**

## 16. Diversity, Equity, & Inclusion

In this section, we would like more information about the diversity of your company any actions your company has taken or is taking with respect to Diversity, Equity & Inclusion. This information is optional and for tracking purposes only.

**Is the applicant organization a New Jersey certified small, minority, woman, veteran or disabled-veteran owned business?**

- Yes  
 No

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

- Small Business Enterprise (SBE)  
 Minority/Woman-Owned Business Enterprise (MWBE)  
 Veteran Owned Enterprise (VOB)  
 Disabled Veteran-Owned Business Enterprise (DVOB)

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

- Minority  
 Woman  
 Veteran  
 LGBTQ  
 Disabled

**With which of the following does the majority owner of the applicant organization self-identify?**

- Black / African American  
 Alaska Native  
 Native American  
 Asian, Pacific Islander, or Native Hawaiian  
 Hispanic / Latinx

**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).**

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**Please describe whether your company's Board of Directors 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).**

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**Please describe any diversity initiatives, programs or plans the applicant company has established.**

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**Please upload any documentation detailing diversity initiatives, if available.**

Sample Doc.pdf

## **17. Prevailing Wage and Other Program Requirements**

Construction and buildings services activities under Emerge are subject to New Jersey affirmative action and prevailing wage requirements. We want to make sure you are aware of this requirement.

Projects that have a total upfront project cost of at least \$10 million must enter into a community benefits agreement with NJEDA and the municipality in which the project is located. In some circumstances, the municipality may request that the relevant county enter into the agreement on the municipality's behalf. Certain other exceptions are possible when a project over \$10M in total upfront project cost is located at a site with an existing redevelopment agreement and the municipality or county certifies the NJEDA's Tax Credit Approval Letter.

For any questions about this requirement, please contact your NJEDA representative.

**I have read the above statement and understand the Emerge Program's Community Benefit Agreement requirement.**

Be advised that projects utilizing financial assistance for construction related costs are subject to state prevailing wage requirements. In addition, the Emerge Program also has prevailing wage requirements for building service workers.

If your application is approved all construction contracts related to this project must pay at least the relevant prevailing wage rate. This requirement will continue for two years after your first receipt of tax credits for those construction contracts subject to the New Jersey Prevailing Wage Act.

In addition, if your application is approved, all building service worker contracts (such as janitors, security guards, maintenance staff, etc.) must pay at least the relevant prevailing wage rate. This requirement will continue for the full commitment period of the project.

Effective April 1, 2020, any and all construction contracts awarded in New Jersey that require payment of prevailing wage must provide proof of valid Construction Contractor Registration Certification (CRC). The Act will not require contracts that were awarded prior to April 1, 2020 to provide proof of CRC. Bidders cannot list any subcontractors in any bid proposal unless the subcontractor is registered. Information regarding this Act can be found on the New Jersey Department of Labor's Website.

If you have any questions about these requirements, please contact your NJEDA representative before submitting this application.

**I acknowledge that any construction on this project is subject to Prevailing Wage.**

**I acknowledge that any building services on this project is subject to Prevailing Wage.**

**I acknowledge that any contractor working on this project must be registered with the New Jersey Department of Labor (DOL) prior to the start of construction.**

**Notice Form**

Sample Doc.pdf

Please download, complete, and attach the [Notice Regarding Affirmative Action / Prevailing Wage & Green Buildings Form](#).

## **18. Legal Questionnaire**

Applicant Name: **ABC Company**

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

### **DEFINITIONS**

Notwithstanding any terms defined elsewhere or otherwise herein, the following definitions shall govern in

responding to this Legal Questionnaire:

“Affiliates” means any entities or persons having an overt or covert relationship such that any one of them directly or indirectly controls or has the power to control another. For the purposes of application for, or ongoing compliance with, Authority-administered programs, this includes:

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

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

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

### **RELEVANT TIMEFRAMES**

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

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

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 officers or directors of Applicant, or any 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.

\_\_\_ Yes \_\_\_ No

2. Violation of the Federal Organized Crime Control Act of 1970, or commission of embezzlement, theft, fraud, forgery, bribery, falsification or destruction of records, perjury, false swearing, receiving stolen property, obstruction of justice, or any other offense indicating a lack of business integrity or honesty.

\_\_\_ Yes \_\_\_ No

3. Violation of the Federal or State antitrust statutes, or of the Federal Anti-Kickback Act (18 U.S.C. 874).

\_\_\_ Yes \_\_\_ No

4. Violation of any law governing the conduct of elections of the Federal Government, State of New Jersey or of its political subdivision.

\_\_\_ Yes \_\_\_ No

5. Violation of the "Law Against Discrimination" (P.L. 1945, c169, N.J.S.A. 10:5-1 et seq., as supplemented by P.L. 1975, c127), or of the act banning discrimination in public works employment (N.J.S.A. 10:2-1 et seq.) or of the act prohibiting discrimination by industries engaged in defense work in the employment of persons therein (P.L. 1942, c114, N.J.S.A. 10:1-10, et seq.).

\_\_\_ Yes \_\_\_ No

6. To the best of your knowledge, after reasonable inquiry, violation of any laws governing hours of labor, minimum wage standards, prevailing wage standards, discrimination in wages, or child labor.

\_\_\_ Yes \_\_\_ No

7. To the best of your knowledge, after reasonable inquiry, violation of any law governing the conduct of occupations or professions of regulated industries.

\_\_\_\_ Yes \_\_\_\_ No

8. Debarment by any department, agency, or instrumentality of the State or Federal government.

\_\_\_\_ Yes \_\_\_\_ No

9. Violation of the Conflict of Interest Law, N.J.S.A. 52:13D-12 *et seq.*, including any of the following prohibitions on vendor activities representing a conflict of interest, or failure to report a solicitation as set forth below:

(i) No person shall pay, offer or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any Authority officer or employee or special Authority officer or employee, as defined by N.J.S.A. 52:13D-13(b) and (e), with which such person transacts or offers or proposes to transact business, or to any member of the immediate family as defined by N.J.S.A. 52:13D-13(i), of any such officer or employee, or partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13(g).

(ii) The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any Authority officer or employee or special Authority officer or employee from any person shall be reported in writing by the person to the Attorney General and the NJEDA Ethics Liaison Officer.

(iii) No person may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such person to, any Authority officer or employee or special Authority officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to the Authority, or with any person, firm or entity with which he or she is employed or associated or in which he or she has an interest within the meaning of N.J.S.A. 52:13D-13(g). Any relationships subject to this subsection shall be reported in writing to the NJEDA Ethics Liaison Officer and the State Ethics Commission, which may grant a waiver of this restriction upon application of the Authority officer or employee or special Authority officer or employee upon a finding that the present or proposed relationship does not present the potential, actually or appearance of a conflict of interest.

(iv) No person shall influence, or attempt to influence or cause to be influenced, any Authority officer or employee or special Authority officer or employee in his or her capacity in any manner which might tend to impair the objectivity or independence of judgment of the officer or employee.

(v) No person shall cause or influence, or attempt to cause or influence, any Authority officer or employee or special Authority officer or employee to use, or attempt to use, his or her official position to secure unwarranted privileges or advantages for the person or any other person.

\_\_\_\_ Yes \_\_\_\_ No

(If Yes for any of the above, specify subsection)

1. 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 (v) 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.

(vii) Laws banning anti-competitive dumping of goods.

(viii) Anti-terrorist laws.

(ix) Criminal laws involving commission of any felony or indictable offense under State or Federal law.

(x) Laws banning human rights abuses.

(xi) Laws banning the trade of goods or services to enemies of the United States.

\_\_\_ Yes \_\_\_ No

#### **Part B. Pending Proceedings**

1. 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.

\_\_\_ Yes \_\_\_ No

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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) a brief explanation of the circumstances giving rise to such matters. Also, for affirmative answers to question 1-10, please attach copies of document(s) reflecting the final resolution (e.g., final judgments, verdicts, plea bargains, consent orders, administrative findings, or settlement agreements).

Note that an Applicant may refer to or attach specific provisions of a 10-K/Q or other filings with the U.S. Securities and Exchange Commission (SEC); however, the Applicant should be aware that different laws

apply to disclosures to the Authority. This means that the Authority does not have the same types of materiality thresholds as the SEC. The Applicant is expected to supplement its SEC filings to ensure that all relevant 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.

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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.

### Part C. Applicable Affiliates

Please provide a list of all entities or persons considered to be "Affiliates" of Applicant based upon the above definitions.

## Affiliates

Name of Affiliate (Entity or Person)	Federal Employer Identification Number (EIN) (if applicable)
ABC Affiliate	12-3456789
DEF Affilaite	23-4567890

## Certification of Legal Questionnaire and Authorization to Release Information

*This certification shall be signed as follows:*

- *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.

## 19. Certification of Application

PLEASE NOTE:

Eligibility of financial assistance by the New Jersey Economic Development Authority is determined by the information presented in this application and the required attachments and schedules. Any changes in the status of the proposed project from the facts presented herein could disqualify the project, including but not limited to, the commencement of construction or the acquisition of assets such as land or equipment. Please contact the staff of the EDA before taking any action which would change the status of the project as reported herein. The EDA's regulations and policies regarding the payment of prevailing wages and affirmative action in the hiring of construction workers require the submission of certain reports and certificates and the inclusion of certain provisions in construction contracts. Please consult with the EDA staff for details concerning these matters. (Forms can be found on our website [www.njeda.com/forms](http://www.njeda.com/forms))

Only Board Members of the governing board of the particular program for which you are applying, by resolution, may take action to determine project eligibility and to authorize the issuance of funds.

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

1. I have received a copy of the "Regulation on Payment of Prevailing Wages" and the "Affirmative Action Regulation" and am prepared to comply with the requirements contained therein.
2. I affirm, represent, and warrant that the applicant has no outstanding obligations to any bank, loan company, corporation, or individual not mentioned in the above application and attachments; that the information contained in this application and in all attachments submitted herewith is to the best of my knowledge true and complete and that the bond/loan applied for herein is not for personal, family, or household purposes.
3. 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 EDA which may at its option terminate its financial assistance.
4. 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 EDA.
5. I authorize the EDA to obtain such information including, but not limited to, a credit bureau check as it may require, covering the applicant and/or its principals, stockholders and/or investors.
6. I authorize the EDA 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 EDA.
7. I certify that the applicant company is not in default with any program administered by the State of New Jersey.

**I am Authorized Signer and I accept the terms and conditions.**

Yes

No

## **20. Fee Payment**

There is a **\$10,000** non-refundable application fee. The NJEDA will not begin review of your application until the application fee has been received.

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

**Please select a payment method:**

Payment by Check

Wire Payment

## **Check Instructions**

Please make check payable to **NJEDA** and mail to the below address:

NJEDA  
P.O. Box 990  
36 West State Street  
Trenton, NJ 08625-0990

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