



## NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY APPLICATION FOR FINANCIAL ASSISTANCE

Fill in all the blanks, using "NONE" or "NOT APPLICABLE" where necessary. If more space is needed to answer any specific question, attach a separate sheet, Return **one typed original plus four copies** of this application, **one copy of the financial materials** and a non-refundable application fee of \$500 to: (make check payable to the New Jersey Economic Development Authority)

Mailing address:

New Jersey Economic Development Authority  
PO Box 990  
Trenton, NJ 08625-0990

Delivery address:

New Jersey Economic Development Authority  
36 West State Street  
Trenton, NJ 08625-0990

Please note the most recent version of this application can be downloaded and/or completed online at [www.njeda.com/applications](http://www.njeda.com/applications)

### I. APPLICANT INFORMATION (proposed owner of the project)

#### A. General Information

Name of Applicant (official, legal name without abbreviations)				Name of Contact Person (officer/owner of the applicant)		
Street Address				Mailing Address		
City	State	Zip Code	Federal Employer's I.D. No. (FEIN)	SIC No. *	NAICS No.*	
Trade Name		Type of Business		Website Address (if applicable)		
Telephone Number		Telefax Number		Email Address		
Loan/Bond Amount		How did you learn about the EDA?			Application Date	

*Amount of Financing Requested*

If guarantee, amount to be guaranteed
---------------------------------------

\*Standard Industrial Classification and North American Industrial Classification System Numbers **must** be provided (see your IRS Return or consult your accountant).

INTERNAL USE ONLY
<b>Application No. P</b> _____ <b>Finance Officer</b> _____ <b>Program:</b> _____

**B. Applicant's Business Organization:** Corporation  Partnership  Sole Proprietorship  LLC

Not-for-Profit  Other (describe): \_\_\_\_\_

Where is the company headquartered? \_\_\_\_\_

Year company formed: \_\_\_\_\_ If incorporated, what year? \_\_\_\_\_ in what state chartered? \_\_\_\_\_

Is the applicant a subsidiary or direct or indirect affiliate of any other organization?  Yes  No

If "yes", indicate name and address, and employer identification number of related organization and relationship.

(Use separate page if needed and include as Exhibit I.B.)

**C. List 100% ownership including all officers, directors and partners of the applicant. Also list all owners and stockholders of applicant, and any individuals/entities guaranteeing the loan (complete all columns for each person). If the applicant is a publicly-held corporation, please provide the latest 10-K and proxy statement indicating stock ownership. If applicant is a 501 (c)(3) Not-for-Profit organization, please list all officers and trustees of the applicant.**

(Use separate page if needed and include as Exhibit I.C.)

Name (list first, middle & last) Home Address (incl. zip code)	Birth Date	Social Security Number	Office Held	Percent Ownership	Residency
					<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident
					<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident
					<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident
					<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident

**D. For each person or entity listed in items B and C above, please provide the names and business addresses of all other companies, partnerships, proprietorships, or business associations in which such person or entity holds 10% or more interest, stock, or ownership, and the percentage of such ownership.** (Use separate page if needed and include as Exhibit I.D.)

**E. Have any of the persons or entities listed in items A, B, C, or D above:**

1. been, within the last five years, a party in litigation involving laws governing hours of labor, minimum wage standards, discrimination in wages or child labor?  
 yes     no
2. been, or is now, charged with, convicted of, under indictment, on parole, on probation or a plaintiff in, any criminal or civil offense other than a minor motor vehicle violation?  
 yes     no
3. been, or is now, subject to, or has pending, any disciplinary action by any administrative, governmental or regulatory body?  
 yes     no
4. been, or is now, subject to any order resulting from any criminal, civil or administrative proceedings brought against such persons or parties by any administrative, governmental, or regulatory agency?  
 yes     no
5. been, or is now, denied any license by any administrative, governmental or regulatory agency on the grounds of moral turpitude?  
 yes     no
6. been, or is now, informed of any current or on-going investigation with respect to possible violations by such persons or parties of state or federal securities, anti-trust or criminal laws?  
 yes     no
7. been, or is now, denied a business-related license or had it suspended or revoked by any administrative, governmental or regulatory agency?  
 yes     no
8. been, or is now, disbarred, suspended or disqualified from contracting with any federal, state or municipal agency?  
 yes     no
9. been, or is now, in receivership or adjudicated bankrupt?  
 yes     no
10. been, or is now, in default on a personal or business loan?  
 yes     no

If the answer is "yes" to any question in E above, furnish details on a separate page as Exhibit I.E. Be sure to answer the questions correctly, they are important. The fact that you have an arrest or conviction record will not necessarily disqualify your application, but a deliberate incorrect answer will probably cause your application to be rejected. Any information you wish to submit that may expedite this investigation should be set forth in Exhibit 1. E.

**F. Is your company or any of its principals certified in another firm as a Minority Business Enterprise (MBE) or a Women Business Enterprise (WBE) by any public agency or is an application pending?**

- yes     no    If "yes", please list individual's name, certification basis (MBE or WBE) and ethnic origin.  
Use separate page if needed and include as Exhibit I.F.)

*(Question F is for informational purposes only and will have no effect on the approval process.)*

**G. Is your business a medical office?**  yes     no

1. If "yes", is your office located in a State designated underserved area? (To determine location in designated area, visit <http://www.state.nj.us/health/> or call the NJ Department of Health and Senior Services, 609-292-7837.)

yes     no

2. Is 50% or more of the cost of care provided at your office compensated by Medicaid, the FamilyCare Health Coverage Program and the Children's Health Care Coverage Program, and are those patients residents of a State designated underserved area?

yes     no

H. 1. Name, address and telephone number of counsel to applicant (*not bond counsel*):

2. Name, address and telephone number of accountant to applicant:

3. Name, address and telephone number of financial consultant/financial advisor to applicant:

4. Name, address and telephone number of applicant's principal bank(s) of account and loan officer:

**I. Federal, State and Municipal Tax Payments.**

For the applicant, affiliated entities, and each owner of the applicant:

1. Are federal/state employee withholding tax payments current?

yes  no If "no", please explain and attach separate sheet if needed and include as Exhibit I.I. 1

2. Are sales and other business tax payments current?

yes  no If "no", please explain and attach separate sheet if needed and include as Exhibit I.I. 2

3. Are corporate/personal federal and state income tax payments current?

yes  no If "no", please explain and attach separate sheet if needed and include as Exhibit I.I. 3

4. Are municipal property tax payments current at the project site?

yes  no If "no", please explain and attach separate sheet if needed and include as Exhibit I.I. 4

**II. PROJECT INFORMATION**

**A. Location of Proposed Project**

Street Address \_\_\_\_\_

Municipality \_\_\_\_\_ County \_\_\_\_\_

Block(s) \_\_\_\_\_ Lots \_\_\_\_\_ Section \_\_\_\_\_

Is the project site located in a New Jersey Urban Enterprise Zone?  yes  no  don't know

Is the project site a designated Brownfields Redevelopment Site?  yes  no  don't know

**B. Is or will the project facility be occupied or used by any party other than the proposed applicant?**

yes  no

If "yes", list each entity and have each complete the EDA's **Project Occupant Application**. (Form can be found on our website [www.njeda.com/applications](http://www.njeda.com/applications))

**C. Project Site (Land)**

1. Indicate approximate size (in acres or square feet of land). \_\_\_\_\_

2. Indicate in detail the present use of the project site.

3. Indicate the present owner of the project site.

Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Business Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

4. If the applicant is not now the owner of the project site, does the applicant have an option to purchase the project site?

yes  no If "yes", please indicate:

a. date the option or contract was signed with owner \_\_\_\_\_

b. the purchase price of the project site \$ \_\_\_\_\_

c. the expiration date of option or contract \_\_\_\_\_

d. Please attach **executed copy of the option agreement or contract**.

5. If the applicant is not the owner of the project site, does the applicant now lease the project site or any buildings on the site?

yes  no If "yes", please attach an **executed copy of the lease**.

6. Is there a relationship legally or by virtue of common control between the applicant or proposed occupant of the project, and the present owner of the project property?

yes  no If "yes", describe relationship, use a separate page if needed and include as Exhibit II.C.6.

7. Has any EDA financial assistance been previously arranged by or for the benefit of:

(a) the project, applicant or related parties in New Jersey?

yes  no If "yes", provide the name of the **applicant** and the **application number**.

(b) the owner of this project which you intend to purchase?

yes  no If "yes", provide the name of the **applicant** and the **application number**.

(c) Has the applicant or project occupant applied for or received financial assistance for this project from any other authority or agency?  yes  no If "yes", provide:

a. name of authority or agency \_\_\_\_\_

b. contact person and telephone number \_\_\_\_\_

**D. Buildings**

1. Does the project involve the acquisition of an existing building(s)?

yes  no If "yes", indicate the number and size of the building(s). (Federal tax law requires that existing buildings purchased with Private Activity Bonds must be rehabilitated. Please consult with bond counsel regarding this requirement.) For approved EDA Bond Counsel List: go to website: [www.njeda.com/finance\\_bondcounsel.asp](http://www.njeda.com/finance_bondcounsel.asp)

2. Are there buildings now on the project site?  yes  no

If "yes", indicate number and approximate size in square feet of each building.

3. Does the project consist of the construction of a new building(s)?

yes  no If "yes", indicate the **number and size** of the new building(s) and attach a copy of the municipal site plan approval or date municipal site plan approval is expected.

4. Does the project consist of additions and/or renovations to existing buildings?

yes  no If "yes", indicate the size of the addition and/or nature of the renovation and attach a copy of the municipal site plan approval or date municipal site plan approval is expected.

**E. Construction Status**

1. Has construction work on the project begun?  yes  no If "yes", provide details.

2. Has a local building permit been issued?  yes date issued \_\_\_\_\_

**F. New Equipment**

List each item of new equipment to be purchased as part of the project. If any of this new equipment has been ordered or delivered, please provide the following:

Type of New Equipment	Purchase Price	Amount Paid	Date Ordered	Delivery Date

**G. Existing Equipment**

1. Is any used equipment to be acquired as part of the project?  yes  no

If "yes", please explain and list each item of existing (used) equipment below. (Note: Federal tax law prohibits any use of tax-exempt private activity bond financing to acquire existing (used) equipment. There is an exception for existing (used) equipment that is part of an integrated operation presently installed in a building, the acquisition of which is part of the project.) Attach separate sheet if needed and include as Exhibit II.G. 1 .

Type of Existing (Used) Equipment	Estimated Value	Age	Date Ordered/ Purchased	Delivery Date	Purchase Price

2. Is any of the existing (used) equipment described in 1 to be rehabilitated or replaced with equipment having substantially the same function?

yes  no If "yes", please explain; attach separate sheet if needed and include as Exhibit II.G.2.

**H. Principal Use of Project**

Please provide a brief narrative description of the project, including details of the principal uses by the applicant and/or project occupant(s) of the building(s) and/or equipment to be acquired, constructed or expanded (i.e. manufacturing widgets, research relating to widget design, executive offices for management of widget company, warehousing for storage of widgets, etc.). Please respond to this item as fully and precisely as possible and enclose any literature describing the principal uses, attach separate sheet if needed and include as Exhibit II.H.

**III. PROJECT COSTS**

A. Description of Costs

<u>Item</u>	<u>Amount</u>
Acquisition of Land	_____
Acquisition of Existing Building	_____
Renovation of Existing Building	_____
Construction of New Building or Addition	_____
Acquisition of Equipment & Machinery	_____
Renovation of Existing (used) Equipment & Machinery	_____
Construction of Roads, Utilities, Etc.	_____
Engineering & Architectural Fees	_____
Finance Fees*	_____
Accounting Fees*	_____
Legal Fees*	_____
Debt Service Reserve Fund	_____
Interest During Construction	_____
Refinancing	_____
Working Capital	_____
Other (specify) _____	_____
<b>TOTAL PROJECT COSTS</b>	_____

\* Not more than 2% of tax-exempt bond proceeds can be used to finance costs of issuance.

Please complete the following table:

<b>SOURCE OF FUNDS</b>	<b>Amount</b>
Bank/Funding Agency	Amount
Applicant Equity	
<b>TOTAL PROJECT COSTS</b>	

B. Of the total project costs shown above indicate here and in item I.A, the bond/loan amount you are requesting.

**Bond/Loan amount requested \$** \_\_\_\_\_

C. Have any of the above expenditures been paid or incurred?  yes  no

If "yes", indicate the expenditures made and the dates on which the expenditures were paid or incurred:

**D. (only complete this section if applicant is seeking bond financing)**

Project costs should not include moving expenses, raw materials, work in process or stock in trade unless applicant is seeking taxable bond financing or is a 501 (c)(3) not-for-profit organization. Please indicate whether any of these items have been included in the above project costs, and if so, the amount and nature thereof.

(Check One)

No such costs have been included.

Such costs have been included, as described below:

**IV. PROJECT BENEFITS AND INDUCEMENTS (Please be specific)**

A. Indicate, in detail, facts which would support the EDA determining that:

1. The project will tend to maintain or provide new employment for the people of New Jersey, maintain or increase the tax base of the economy of New Jersey and maintain or diversify and expand business and industry in New Jersey.

2. The availability of the financial assistance by the EDA will be an important inducement to the project occupant to remain or locate in New Jersey.

B. Briefly indicate and evaluate the alternatives available to project applicant if financial assistance by the EDA is disapproved.

**V. EMPLOYMENT IMPACT (permanent jobs)**

All projections should be accurate, conservative and achievable since employment projections are part of the financing agreements with the EDA. The EDA requires periodic reports on employment during the term of the financing. **All figures should include full-time (working 35 or more hours per week) and part-time employees.**

Type of Employment	On Project Site at Present		Second Year after completion	
	full-time	part-time	full -time	part-time
Professional, Managerial, Technical				
Skilled, Semi-Skilled				
Unskilled				
TOTALS				

A. Job Descriptions: Provide a brief description of the specific occupational titles that correspond to the new jobs to be created as a result of the Authority financing, together with estimated annual wages to be paid for each title. Please be specific (i.e. 4 machine operators @ \$35,000 per year; 5 supervisory personnel @ \$40,000 per year etc.)

(Use separate page if needed and include as Exhibit V.A.)

B. Indicate the number of workers presently employed by the applicant at other sites in New Jersey and globally.

N.J. Employment Locations (city, county)

Number of Full-time N.J. Employees

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Global Employment Locations (city, county, country)

Number of Full-time Global Employees

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Indicate if any employees currently at the locations noted in B above will lose their jobs as a result of the project.

yes  no

If "yes", provide detailed information that would assist the EDA in determining that the proposed project will serve the public purpose despite the loss of employment. Describe any efforts planned to assist these workers in locating alternate employment.

D. Indicate if any employees will be relocated from any of the locations in B above to the project municipality as a result of the project.

yes  no

If "yes", please complete the EDA **Supplemental Information on Relocation Form**. (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))

**VI. TAX-EXEMPT FINANCING (Only complete this section if applicant is seeking bond financing)** *The following questions are intended solely to provide general information to the Authority. They do not constitute tax advice or tax due diligence. Applicants must consult with bond counsel with respect to all matters relating to tax-exempt financing.*

A. List the amount of all tax-exempt bond financing previously arranged by or for the benefit of any principal user anywhere in the United States and the current outstanding principal amount thereof.

**B. CAPITAL EXPENDITURES IN PROJECT MUNICIPALITY**

If the amount of Bond financing requested herein, together with any other outstanding tax-exempt bonds, exceeds \$1,000,000 and this is not an exempt facility or qualified 501 (c)(3) not-for-profit organization, the EDA must review the capital expenditures made by the applicant, all project users and any persons or entities related to the applicant or any project user (such entities collectively, the "principal users") for the past three years. Please indicate below the total capital expenditures made by principal users relating to any assets (land, building, equipment, etc.) located in the project municipality (or anticipated to be located in, or transferred into, the project municipality) for the past three years whether or not such capital expenditures were related to this particular project. In this regard, capital expenditures, include, but are not limited to, amounts used to acquire or renovate land, building, equipment or other assets including amounts incurred in connection with capital leases.

*(Check One)*

This application together with any outstanding tax-exempt bonds, involves \$1,000,000 or less in financial assistance, is an exempt facility or a qualified 501 (c)(3) not-for-profit organization.

This application together with any outstanding tax-exempt bonds, involves more than \$ 1,000,000 in financial assistance. The total capital expenditures made by principal users relating to any assets (land, building, equipment, etc.) located in the project municipality (or anticipated to be located in, or transferred into, the project municipality) for the past three years whether or not such capital expenditures were related to this particular project are:

- 1. land \_\_\_\_\_
- 2. building \_\_\_\_\_
- 3. equipment \_\_\_\_\_
- 4. machinery \_\_\_\_\_
- 5. other assets \_\_\_\_\_

**VII. 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/applications](http://www.njeda.com/applications))

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 which might participate in the requested financing with the EDA.

\_\_\_\_\_  
Signature of CEO/CFO

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Date

Sworn and Subscribed before me

this \_\_\_\_\_ day of \_\_\_\_\_ • 20\_\_\_\_

\_\_\_\_\_

NOTARY PUBLIC

My commission expires \_\_\_\_\_

<p><b>THE GOVERNING BOARD OF DIRECTORS OF THE INDIVIDUAL PROGRAMS RESERVE THE RIGHT TO DETERMINE WHICH PROJECTS TO FINANCE AND TO AMEND THESE GUIDELINES AT ANY TIME.</b></p>
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- If seeking Bond Financing,  
go to Attachment I ..... page 14
  
- For Business or Not-for-Profit Financing (Loans & Loan Guarantees),  
go to Attachment II ..... page 15
  
- For NJ Fund for Community Economic Development Loan,  
go to Attachment III ..... page 16
  
- For Technology Financing,  
go to Attachment IV ..... page 17
  
- For Camden Economic Recovery Board applicants,  
go to Attachment V ..... pages 18 - 20
  
- For New Markets Tax Credit applicants,  
go to Attachments II and VI ..... pages 15 and 21 - 23

**Attachment I. FOR BOND FINANCINGS THE FOLLOWING MATERIALS MUST BE ATTACHED:**

A. The following items, where applicable, must be submitted **with your application** for bond assistance:

1. Cover letter with detailed description of:
  - (a) history of applicant's business;
  - (b) project to be undertaken;
  - (c) timetable for the project to proceed;
  - (d) selection of bond counsel from EDA designated bond counsel list and reasons for selection of bond counsel For EDA approved list go to website: [www.njeda.com/finance\\_bondcounsel.asp](http://www.njeda.com/finance_bondcounsel.asp)
  
2. If a "yes" answer was given to question II. B. in the Application for Financial Assistance, please submit:
  - (a) Project Occupant Application and lease agreement for each tenant (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))If a "yes" answer was given to question V.D. in the Application for Financial Assistance, please submit:
  - (b) Supplemental Information on Relocation Form (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
  
3. Evidence of Project Site Control:
  - (a) purchase option or contract with property owner (note: subject to EDA approval);
  - (b) lease agreement with property owner (note: subject to EDA approval)
  
4. Copy of 501 (c)(3) determination letter from Internal Revenue Service (not-for-profit organization only).
  
5. The Underwriter/Placement Agent Selection Form (if Underwriter/Placement Agent selected at time of application). (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
  
6. For sectarian/religiously affiliated educational projects, complete the Religiously Affiliated Educational Institution Questionnaire. (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
  
7. Copy of commitment letter from lender, if available.
  
8. Financial information including:
  - (a) 3 most recent years fiscal statements;
  - (b) current interim statement, if available;
  - (c) copy of applicant's financial projections for 3 years, prepared for the lender.
  
9. Non-refundable application fee of \$500.00 must accompany submission of the application.
  
10. For informational purposes, the Authority's bond closing fee is payable at the time of the bond closing:
  - 1/2 % of tax-exempt bond amount of up to \$15 million, 3/8% of next \$10 million, and 1/2% of the bond amount in excess of \$25 million;
  - For taxable bonds, 1/2 of the closing tax-exempt bond fee noted above;
  - For not-for-profit corporations and governmental bodies, 1/2 % of tax-exempt bond amount up to \$10 million and 1/4% above this amount;
  - Closing fees for conduit bond transactions are capped at \$300,000.

**Attachment II. FOR BUSINESS OR NOT-FOR-PROFIT FINANCINGS THE FOLLOWING MATERIALS MUST BE ATTACHED:**

The following, where applicable, must be submitted **with your application** for financial assistance:

1. Financial information prepared by an accountant and acceptable to the EDA, including:
  - A. Applicant's Financial Information:
    - \_\_\_\_\_ (a) financial statements (balance sheet; operating statement; statement of cash flow) for the three most recent years;
    - \_\_\_\_\_ (b) complete signed copies of the three most recent years tax returns for the business
    - \_\_\_\_\_ (c) most recent quarterly financial statement if fiscal statement is more than 3 months old;
  - B. Applicant's Financial Projections for three years including:
    - \_\_\_\_\_ (a) accountant's cover letter;
    - \_\_\_\_\_ (b) statement of operations (profit and loss);
    - \_\_\_\_\_ (c) detailed assumptions used in creating projections.
    - \_\_\_\_\_ (d) balance sheets;
    - \_\_\_\_\_ (e) statement of cash flow;
  - C. If not shown in fiscal financial statement, schedule of:
    - \_\_\_\_\_ (a) short term notes and loans payable;
    - \_\_\_\_\_ (b) property owned and/or mortgaged;
    - \_\_\_\_\_ (c) explanation of any contingent liabilities or litigation;
    - \_\_\_\_\_ (d) long term debt;
    - \_\_\_\_\_ (e) accounts receivable aging
    - \_\_\_\_\_ (f) accounts payable aging.
2. Detailed description of:
  - \_\_\_\_\_ (a) history of applicant's business in more detail than shown on your cover letter;
  - \_\_\_\_\_ (b) project and use of loan proceeds.
3. Name, address, telephone number and contact person of:
  - \_\_\_\_\_ (a) five largest customers;
  - \_\_\_\_\_ (b) five largest suppliers.
4. Resumes, personal financial statements and signed personal tax returns for each owner identified in question I.C owning 10% or more of the applicant and for any individuals/entities guaranteeing the loan.
5. Resumes of key employees/officers of the company that may not be 10% owners.
6. Two bank loan rejection letters, if you are requesting an EDA Loan.
7. Copy of financial commitment letter from other lending sources.
8. Copy of 501 (c)(3) determination letter from Internal Revenue Service (not-for-profit organization only)
9. Support from local municipality (for Local Development Financing Fund loan only)
  - \_\_\_\_\_ (a) Letter from Mayor of municipality indicating degree of support and local resources committed to project.
  - \_\_\_\_\_ (b) A resolution from the local governing body expressing support for the project.
10. The following are to be included if you answered "yes" to certain questions in the "Application for Financial Assistance", if your answer is "no" to those questions these items are not required:
  - \_\_\_\_\_ (a) Project Occupant Application; Lease agreement with tenant which is subject to approval of EDA financing (if answered "yes" to II.C.6); (Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
  - \_\_\_\_\_ (b) Supplemental Information on Relocation Form (if answered "yes" to V.C or D);(Form can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
  - \_\_\_\_\_ (c) Contract with property owner, which is subject to approval of EDA financing (if "yes" to II.C.4)
  - \_\_\_\_\_ (d) EDA Affirmative Action Certificate (if answered "yes" to II.D.3 or 4). (Forms can be found on our website: [www.njeda.com/applications](http://www.njeda.com/applications))
11. Non-refundable application fee of \$500.00 must accompany submission of the application.
12. As part of the due diligence process, the Authority may require additional information including, but not limited to appraisals on real property and/or equipment, environmental studies, etc.

**Attachment III. FOR A NEW JERSEY FUND FOR COMMUNITY ECONOMIC DEVELOPMENT LOAN, THE FOLLOWING MATERIALS MUST BE ATTACHED:**

- \_\_\_\_\_ Bylaws and Articles of Incorporation
- \_\_\_\_\_ List of the Board of Directors and their professional affiliations
- \_\_\_\_\_ Three year business plan including:
  - \_\_\_\_\_ Organizational chart with description of staff positions
  - \_\_\_\_\_ List of current key personnel with resumes
  - \_\_\_\_\_ Three year operating pro-forma for the organization (historic or projected)
  - \_\_\_\_\_ Current operating budget
  - \_\_\_\_\_ Annual financial statements for the past three years and interim statement (audited, if available)
  - \_\_\_\_\_ Annual Reports for the past three years (if available)
  - \_\_\_\_\_ List of operating revenue sources (including restrictions on amounts, conditions, etc.)
  - \_\_\_\_\_ Local public and private sector support (if available)
  - \_\_\_\_\_ Funding commitments ongoing, for this project
  
- \_\_\_\_\_ If applying to the Loans to Lenders Program
  - \_\_\_\_\_ Lending and risk management policies (including underwriting criteria and loan monitoring procedures)
  - \_\_\_\_\_ Product Description including rates, terms and allowed uses of loan proceeds
  - \_\_\_\_\_ Cash/investment management policy
  - \_\_\_\_\_ Sample loan documents (including application, loan agreement and promissory note)
  - \_\_\_\_\_ Current portfolio status report and risk analysis - please include aging of portfolio
  
- \_\_\_\_\_ If applying to the Real Estate Finance or Pre-development Loan Program
  - \_\_\_\_\_ Description of project
  - \_\_\_\_\_ Project market demands/financial feasibility analysis
  - \_\_\_\_\_ Pro-Forma (detailed 5 year projection of project costs and revenues)
  - \_\_\_\_\_ Copy of contract to purchase real estate
  - \_\_\_\_\_ Summary of similar past successful projects
  - \_\_\_\_\_ Evidence of ability to contribute at least 5% equity in a project
  - \_\_\_\_\_ Copies of commitments from additional sources of financing for the project

**Attachment IV. FOR ALL TECHNOLOGY APPLICANTS THE FOLLOWING MATERIALS MUST BE ATTACHED:**

1. Business plan (preferably within 90 days of date of application) - specific components to include, but not limited to:
  - a) description of technology, the problem or challenge being solved
  - b) technological advantage that this product/service has
  - c) market - define including size as well as niche and expected share
  - d) competition - describe what alternatives exist and who is providing
  - e) proof of concept and intellectual property
  - f) commercialization path and work to be done
  - g) project milestones
    - 1) achieved to date
    - 2) to be achieved
    - 3) timeline for milestone achievement
  - h) describe and detail amount and sources of funding to date
  - l) management team, Board members and Advisory Board members - qualifications, experience, resumes and responsibilities
2. Amount of funding which is presently being sought.
3. Detailed use of proceeds (cost budget) by specific items.
4. Schedule of proposed draw down of funding.
5. Financial model - monthly until positive cash flow (3 year minimum horizon)
  - a) balance sheet
  - b) income statement
  - c) cash flow
  - d) detailed assumptions
6. Ownership name, address, and percent of ownership for all owners.
7. Provide committed source(s) and amount of other funding which will be or has been raised in conjunction with this project.
8. Written description of relationship applicant has - - collaborations, partnerships, joint ventures, strategic arrangements, investment groups (angels, etc.), vendors and customers.

**Attachment V. FOR ALL CAMDEN ECONOMIC RECOVERY BOARD APPLICANTS THE FOLLOWING MATERIALS MUST BE ATTACHED:**

Please attach as many additional sheets as required to fully answer questions:

1. If the organization is tax exempt, have you finalized agreements with the Camden Redevelopment Agency regarding PILOT or service charge requirements as described in Section 53 of the Act? Briefly explain the status of these discussions.

2. If answered "no" to question II.C.4 & 5 & 6, please describe plan and schedule for site control including a detailed description of the acquisition of property or building, assemblage/consolidation of lots required, etc.

3. Is an environmental analysis required on the subject property?  yes  no

Describe the status of the environmental investigation, including any known or suspected environmental problems. *(If remediation has been completed, attach documentation demonstrating completeness such as a letter of no-further-action.)*

4. Do you believe that there is adequate water and sewer at the site to support your development?

yes  no

5. Do you have the following building professionals under contract at the time of this application?

Architect  yes  no

Construction Manager  yes  no

(If "no", do you plan to hire a construction manager?  yes  no)

General Contractor  yes  no

If applicable, please provide contact details for your architect, construction management firm and general contractor. Please indicate address, contact person and title, telephone, fax and email address.

6. Will the applicant develop the project? If not, please indicate the developer. Include address, contact person and title, telephone, fax, email address and tax identification number.

7. Please indicate what ERB funds will be used for:

\_\_\_ Affordable Housing

\_\_\_ Market Rate Housing

\_\_\_ Commercial

\_\_\_ Industrial

\_\_\_ Office

\_\_\_ Cultural/Recreational/Educational

\_\_\_ Infrastructure

\_\_\_ Health & Safety (including demolition and environmental)

\_\_\_ Mix (describe components) \_\_\_\_\_

\_\_\_ Other \_\_\_\_\_

8. Describe all approvals received and anticipated for this project. (Please attach copies of all permits received to date.)

a) Site Plan Approval	Anticipated (Y/N) ___	Received (Y/N) ___
b) Schematic Drawings	Anticipated (Y/N) ___	Received (Y/N) ___
c) Design Drawings	Anticipated (Y/N) ___	Received (Y/N) ___
d) Construction Drawings	Anticipated (Y/N) ___	Received (Y/N) ___
e) Construction Permits	Anticipated (Y/N) ___	Received (Y/N) ___
f) Historic Review	Anticipated (Y/N) ___	Received (Y/N) ___
g) Traffic/Offsite Improvements	Anticipated (Y/N) ___	Received (Y/N) ___

9. Financing Commitments

a) Do you have financing commitments in place? (*If "yes" please attach copies of commitment letters and contact information*)

b) If the application is a housing project, have you requested assistance from New Jersey Housing Mortgage Finance Agency (NJHMFA)?

yes  no  N/A

If "yes", please provide a copy of the application and commitment documentation. For more information on housing financing programs that may be applicable for your project, please visit the NJHMFA website at [www.nj-hmfa.com](http://www.nj-hmfa.com).

10. Does the Project have neighborhood and community support? Please explain.

11 . Strategic Revitalization Plan Criteria

a) Provide a brief description of the project: (*Please include the scope of the project, land uses, owners, tenants, neighborhood/area context, beneficiaries, etc.*)

b) Briefly describe how the project contributes to the revitalization of Camden and advances the goals of the Strategic Revitalization *Plan (job creation for neighborhood residents and neighborhood revitalization)*. Include how this project may catalyze economic redevelopment of the surrounding area.

c) Is the project consistent with the City's Master Plan, neighborhood or redevelopment area plans?

yes  no Please explain.

## 12. Please attach the following exhibits:

a) Organization Business Plan and Experience

Please attach a detailed description of your organization and its work, experience with similar projects, as well as the organization's business plan. Include by-laws, Articles of Incorporation and 501 (c) 3 status, as applicable. Business plan should include information on marketing, competition, operating procedures and personnel (include resumes of all principals). If the business plan is of extended length, please provide a summary.

b) Financial Statements

Please attach the three most recent years of consolidated financial statements or annual reports that include the three most recent years of consolidated financial statements. If the fiscal statement is more than three months old, also provide the most recent quarterly financial statement. For applicants that are subsidiary corporations, include parent company financial statements. If financial statements are not prepared for the applicant company, provide the three most recent years' tax returns.

c) Financial Projections

Please attach financial projections for the construction and operation (at least 3 years) of the subject property.

d) Governance Documents

Please attach corporate governance documents as to the ownership and management of the business.

e) Project Development Documents

Please attach any written documentation requested in the application. *(In addition, if available, please attach copy of contract of sale, deed, title opinion, appraisal, boundary survey).*

## f) Map

Please attach clear map(s) of the project site showing its location within the City, block and lot.

## 13. Non-refundable application fee of \$500 for a for-profit company or \$250 for a not-for-profit company must accompany submission of application.

**Attachment VI. FOR ALL NEW MARKETS TAX CREDIT APPLICANTS THE FOLLOWING MUST BE ATTACHED:**

In addition to attachments required for **Business or Not-For-Profit Financings**, the following information, where applicable, attaching additional sheets as necessary, must be submitted with your application for financial assistance:

1. In what 2000 Census Tract is the project located? \_\_\_\_\_

If census tract is not known, go to:

[http://factfinder.census.gov/servlet/AGSGeoAddressServlet?\\_lang=en&\\_programYear=50&\\_treeId=420](http://factfinder.census.gov/servlet/AGSGeoAddressServlet?_lang=en&_programYear=50&_treeId=420)

2. Check all below that apply to the 2000 Census Tract in which the project is located.

- Project is located in a 2000 Census Tract with a poverty rate greater than 30%
- Project is located in a 2000 Census Tract with median income of less than 60% of Metropolitan Area, or if not in Metropolitan Area, as measured by the statewide area median income
- Project is located in a 2000 Census Tract with unemployment rate 1.5 times or greater than the national average

3. Check all below that apply regarding any Federal or State designations of the area in which the Project is located.

**Federal**

**State**

- |   |   |
|---|---|
| <input type="checkbox"/> Empowerment Zone<br>or Renewal Community | <input type="checkbox"/> Smart Growth Area  |
| <input type="checkbox"/> SBA HUB Zone                             | <input type="checkbox"/> Main Street Program  |
| <input type="checkbox"/> HOPE VI Redevelopment Area               | <input type="checkbox"/> Special Improvement District<br>or Business Improvement District |
| <input type="checkbox"/> CDFI Hot Zone                            | <input type="checkbox"/> Transit Village  |
| <input type="checkbox"/> Other (Please describe)                  | <input type="checkbox"/> Innovation Zone  |

4. Please describe how the Project will benefit the city in which it is located. (Benefits may include, but not be limited to, the Project's provision of needed neighborhood services, anticipated payment of property taxes or Payments in Lieu of Taxes (PILOT) to the municipality, positive "spin-off" economic impacts and fiscal benefits to the city that outweigh the costs of providing municipal services.)

5. Does the Project meet the definition of a Qualified Active Low Income Community Business (QALICB)?  
Please refer to attached definition page and provide detail on how Project meets criteria of each 'test.'

6. Provide details on Federal, State, Local and other governmental assistance being utilized by the project including, but not limited to: USEDA BEDI Grant, USEDA EDJ Grant and HUD 108 Loan.
7. Applicant and Developer experience:
- (a) Please attach a description of your organization and its work
  - (b) If the project has a developer separate from the applicant, please attach a description of developer's prior experience with similar projects
8. If the project will have tenants, a complete list of each tenant for which a lease has been signed including: business name, current business address, contact person and title, telephone, fax, email, SIC code number and NAICS code number, tax identification number, type of business and square footage occupied. For the un-leased square footage, please characterize the type of businesses that are anticipated to occupy the remaining space.
9. Information of job creation that will result from the project including current and anticipated tenants:
- (a) Of responses provided in Section V. EMPLOYMENT IMPACT, provide the number of permanent full-time jobs to be provided to residents of the city in which the project will be located, including current and anticipated tenants; number of permanent full-time jobs to be provided to Low Income Residents of the city in which the project will be located, including current and anticipated tenants; number of permanent full-time jobs that are new to New Jersey.
  - (b) Describe any past history of the applicant and tenants, if any, in increasing permanent full-time employment among residents of the cities in which prior projects were located. Also describe the employment that was provided to Low Income Residents of cities where projects were located. Please provide specific job numbers.
  - (c) Please check all that apply regarding employment characteristics of the permanent full-time jobs to be created by the Project including current and anticipated tenants:
    - Project will increase wages or incomes for Low Income Residents of a NMTC census tract
    - Project is or has tenants owned by residents of, or otherwise committed to remain in, a NMTC census tract
    - Project is or has tenants that are minority or women-owned businesses, or businesses owned by Low Income Persons
    - Project has as tenants businesses or not-for-profits or project itself is a provider of childcare, health care, education or other benefits to Low Income Residents of NMTC census tracts(s)
    - Project is or through its tenants is providing goods and services to Low Income Residents of NMTC census tract

10. Provide a list of building professionals (developer, architect, general contractor, etc.) under contract with contact information for each including firm name, contact, address, phone, fax and e-mail.
  
- 11 . Provide a complete and detailed construction schedule, including site identification phase, site acquisition phase, public hearing or planning board review as applicable, code review, groundbreaking, construction, occupancy and rent up, if applicable. Please provide details on any necessary permits, both expected and already approved. Also provide estimated or actual completion and approval dates for schematic drawing, design drawings and construction drawings.
  
12. Provide details on estimated need and cost for infrastructure improvements such as water and sewer upgrades, roadway improvements and electrical supply.
  
13. Provide information on any environmental analysis of the project property including status of environmental investigation. Also indicate whether it is a Federal or State designated brownfield site and if brownfield financial assistance is being used to redevelop the site. If applicable, please attach documentation, such as a Letter of No-Further-Action.
  
14. Attach the applicant's Business Plan.
  
15. Provide corporate governance documents (include Operating Agreement, Articles, Bylaws, Partnership, as applicable).
  
16. Attach title documents and lease agreements for the project property.
  
17. Non-refundable application fee of \$500 must accompany submission of application
  
18. Other transaction fees will apply at commitment and closing

**Definitions**

1. **Low Income Community (LIC)** - any population census tract if:
  - a) the poverty rate for such tract is at least 20 percent; or
  - b)
    1. in the case of a tract not located within a Metropolitan Area, the median family income for such tract does not exceed 80 percent of statewide median family income; or
    2. in the case of a tract located within a Metropolitan Area, the median family income for such tract does not exceed 80 percent of the greater of statewide median family income or the Metropolitan Area median family income.
  
2. **Low Income Person or Resident** - an individual residing in a LIC that has an income, adjusted for family size, that does not exceed 80 percent of statewide median family income. For an individual living in a Metropolitan Area, income that does not exceed 80 percent of the greater of statewide median family income or the Metropolitan Area median family income.
  
3. **Qualified Active Low Income Community Business (QALICB)** - with respect to any taxable year, any corporation (including a non-profit corporation) or partnership if for such year which:
  - (i) uses at least 40% of its tangible property within a LIC ("Property Test");
  - (ii) provides at least 40% of its services in a LIC ("Services Test"); and
  - (iii) at least 50% of its total gross income is derived from the active conduct of a "Qualified Business" within a LIC ("Income Test"). (The Income Test is met if both the Property Test and Services Test is at least 50%). A QALICB also must meet the definition of Qualified Business which is any trade or business, except for wholly rental residential real estate projects, certain large farms, and certain other excepted business types (such as golf courses, gambling facilities and liquor stores).

**EMPOWERMENT ZONE AND RENEWAL COMMUNITY****CONTACTS and ADDRESS LOCATOR**

USHUD Website: <http://www.hud.gov/index.html>

Address Locator: <http://hud.esri.com/egis/cpd/rcezec/welcome.htm>

**EMPOWERMENT ZONE****CAMDEN**

Rick Cummings, Managing Director  
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Email: [rickcummins@camdenez.org](mailto:rickcummins@camdenez.org)

**CUMBERLAND**

Sandra T. Forosisky, Executive Director  
Cumberland Empowerment Zone Corp.  
50 E. Broad St.  
Bridgeton, NJ  
Phone: (856) 459-1700  
Fax: (856) 459-4099  
Email: [sandvf@cezcorp.org](mailto:sandvf@cezcorp.org)

**OTHER WEB PAGES****SBA HUB ZONE**

U.S. Small Business Administration (SBA) Historically Underutilized Business Zones (HUB ZONES)  
Address Locator: <http://www.sba.gov/>

**BROWNFIELDS**

U.S. Environmental Protection Agency (EPA): <http://www.epa.gov/>  
N.J. Department of Environmental Protection (DEP): <http://www.state.nj.us/dep/>

**HOPE VI**

U.S. Housing and Urban Development (HUD)  
HOPE VI <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>

**CDF1 HOT ZONES**

U.S. Department of Treasury  
Community Development Financial Institution (CDFI)  
Hot Zones: [http://www.cdfifund.gov/docs/2003\\_cdfi\\_application\\_glossary.pdf](http://www.cdfifund.gov/docs/2003_cdfi_application_glossary.pdf)

**UEZ**

N.J. Commerce and Economic Growth Commission  
Urban Enterprise Zone (UEZ): <http://www.newjerseycommerce.org/UEZ.shtml>

**RENEWAL COMMUNITIES****CAMDEN**

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