

Cumberland Empowerment Zone Corp. Application for Financial Assistance

Please provide the information requested, using "None" or "Not Applicable" where necessary. If more space is needed to answer any specific question, attach a separate sheet. A fully completed application will eliminate unnecessary delays. Return completed application and all required supporting documentation to the Cumberland Empowerment Zone Corp. along with a non-refundable \$150.00 application fee.

I. APPLICANT INFORMATION:

Name: _____ Date of Application: _____

Name of Contact Person/Title: _____

Address (Street/City/Zip): _____

Telephone Number: _____ Fax Number: _____

Type of Business: _____

Trade Name: _____ Employer's I.D. # : _____

Amount of Financing Requested: _____ Number of Permanent Full-time Jobs
Created: _____ Maintained: _____

Total Project Costs: _____ Number of Permanent Part-time Jobs
Created: _____ Maintained: _____

II. PROJECT/BUSINESS LOCATION:

Street Address: _____

Municipality: _____

Block (s) and Lot (s): _____

III. PROJECT DESCRIPTION: (One Page)

(Please include a brief history and discussion of the project's benefit to the Empowerment Zone and its residents)

IV. BUSINESS INFORMATION:

- A. Business Organization: Corporation Partnership Sole Proprietorship LLC Other
If incorporated, State: ____ Date Founded: ____ Years in Continuous Operation: ____
- B. Is the applicant a subsidiary, direct or indirect affiliate of any other organization? Yes No
If yes, indicate name, address, employer I.D. number, related organization and relationship.
- C. List all officers and partners of the applicant. Also list all principals and stockholders of the applicant owning 10% or more of the project. If the applicant is a publicly held corporation, please provide the latest proxy statement indicating stock ownership and 10-k.
- D. Provide the names and business addresses of all other companies, partnerships, proprietorships, or business associations in which such person or entities listed in items B and C above holds interest, stock, or ownership, and the percentage of such ownership.
- E. Does the applicant or any principal of the applicant have any familial or business relationship with any member of the Empowerment Zone Board of Directors, Advisory Board or staff?
Yes No
If yes, please provide information regarding the relationship.
- F. Please answer the following for any persons or entities listed in A, B, C, and D above. If the answer is yes to any of the following questions, provide details on a separate page titled Exhibit IV. F.
1. Has been, or is now, charged with, convicted of, under indictment, on parole or probation, or a plaintiff in, any criminal or civil offense other than a minor motor vehicle violation?
Yes No
 2. Has been, is now subject to or has pending, any disciplinary action or order resulting from criminal, civil or administrative proceedings by any administrative, governmental or regulatory body? Yes No
 3. Has been, or is now denied a business-related license or had it suspended or revoked by any administrative, governmental or regulatory agency? Yes No
 4. Has been or is now disbarred, suspended or disqualified from contracting with federal, state or municipal agency? Yes No

V. BANKING, ACCOUNTING AND LEGAL PROFESSIONALS: (Provide applicant information)

Banking:

Name of Institution(s): _____

Address: _____

Contact Person/Title: _____

Telephone Number _____ Fax Number _____

Accounting:

Name of Firm: _____

Address: _____

Contact Person/Title: _____

Telephone Number _____ Fax Number _____

Legal:

Name of Firm: _____

Address: _____

Contact Person/Title: _____

Telephone Number _____ Fax Number _____

**VI. PROJECT INFORMATION:
(Complete A & B if project involves construction, renovation or purchase of buildings)**

A. Project Site (Land)

1. Indicate approximate size in acres or square feet: _____

2. Are there buildings now on the project site? Yes No

Provide number and size in square feet for each building.

3. What is the present use of the site?

VI. PROJECT INFORMATION (continued)

4. Indicate the present owner of the site.

Name: _____ Contact Person: _____

Street Address: _____

Telephone Number: _____ Fax Number: _____

5. If the applicant is not the owner of the project site, does the applicant have site control for the project site? Yes No Please provide the following information:

- a. Date the site control agreement was signed with owner.
- b. The purchase price of the project site.
- c. The expiration date of the site control agreement.
- d. Attach executed copy of the site control agreement as Exhibit VI.A.5.D.

6. If the applicant is not the owner of the project site, does the applicant now lease the project site and/or buildings on the site? Yes No Attach an executed copy of the lease.

7. Are there environmental concerns, a DEP letter of non-applicability, and/or ECRA compliance approvals that require regulatory approvals or permits? Have you completed a preliminary assessment in accordance with NJAC 7:26E-3.1? Yes No

If yes to either question above, provide information and plan for addressing said concerns.

9. Is the project property located in a historic district or listed in the New Jersey or National Registers of Historic Places? Yes No

If yes, please provide information.

VI. PROJECT INFORMATION (Circle Appropriate Response)

B. Buildings (Provide information in square feet)

- 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).

- 2. Does the project consist of the construction of a new building(s)? Yes No
Provide number and size of the new building(s). Attach a copy of local site plan approval.

- 3. Does the project consist of additions and/or renovations to existing buildings? Yes No
Provide size of the addition and/or nature of the renovation. Attach a copy of local site plan approval.

- 4. Does the project require the relocation of residents and/or businesses? Yes No
If yes, please provide the proposed relocation plan and timetable.

- 5. Has construction work on the project begun? Yes No

- 6. Has a local building permit been issued? Yes No

- 7. Anticipated date to begin construction: _____

- 8. Describe in detail the principal uses of the building(s) by the project occupant(s). If required, use a separate sheet and title Exhibit VI.B.8.

- 9. Anticipated project operation start-up date: _____

C. Equipment

1. List each item of new equipment to be acquired as part of the project.

Type	Purchase Price

2. List each item of used equipment to be acquired as part of the project.

Type	Estimated Value	Age

VII. PROJECT COSTS

A. Description of Costs

Category	Item	Amount	Total per Category
Land/Building Acquisition	Land	\$ _____	
	Building	_____	
	Total Land/Building Acq.		\$ _____
Site Work	ECRA Clean-Up	\$ _____	
	Grading	_____	
	Paving	_____	
	Walkways	_____	
	Landscaping	_____	
	Storms & Sanitary Sewers	_____	
	Other Site Work	_____	
	Contingencies	_____	
	Total Site Work		\$ _____
Construction/Renovation	Carpentry	\$ _____	
	Electrical	_____	
	Foundation	_____	
	HVAC & Mechanical	_____	
	Masonry	_____	
	Plumbing	_____	
	Structural/Misc Steel	_____	
	Other	_____	
	Total Construction/Renovation		\$ _____
Soft Cost	Appraisals	\$ _____	
	Architect/Engineers	_____	
	Commissions - Real Estate	_____	
	Construction Management	_____	
	Consultants	_____	
	Development Fee	_____	
	Fees & Permits	_____	
	Insurance	_____	
	Interest during Construction	_____	
	Legal	_____	
	Loan Fees	_____	
	Marketing	_____	
	Developer's Overhead	_____	
	R.E. Taxes during Construction	_____	
	Relocation Costs	_____	
	Survey	_____	
Title Insurance	_____		
Other	_____		
Contingencies	_____		
	Total Soft Costs		\$ _____
TOTAL PROJECT COSTS			\$ _____
Real Estate			

VIII. EMPLOYMENT IMPACT (Permanent Jobs)

Financial Assistance from the CEZC requires the applicant to give qualified EZ residents hiring priority.

Job Descriptions: (Provide a brief description of the specific occupational titles that correspond to the new jobs to be created as a result of this funding request, together with estimated annual wages to be paid for each title. Be specific (i.e.) 2 Secretarial positions @ \$18,000 per year; 1 supervisory personnel @ \$35,000 per year.)

Indicate the number of people presently employed and the number that will be employed at the project, at the end of the first year and second years after the project has been completed (do not include construction workers). All projections should be accurate, conservative and achievable. All figures should be based upon full-time equivalents (i.e. two half-day workers equal one full-time equivalent.)

Type of Position	On Site at Present			First year after Completion			Second Year after Completion		
	Total	Created	Maintained	Total	Created	Maintained	Total	Created	Maintained
Professional Managerial									
Technical									
Skilled Semi-Skilled									
Unskilled									
TOTALS									

IX. COLLATERAL

- A. Primary Residence: own rent
 If own, please complete: sole owner joint ownership w/ _____

Address: _____

Block(s) & Lots(s): _____

Approximate Market Value*: \$ _____

Outstanding Mortgage: \$ _____ (attach most recent mortgage statement)

Estimated Equity (Market Value – Outstanding Mortgage): \$ _____

- B. Business Property: own rent
 If own, please complete: sole owner joint ownership w/ _____

Address: _____

Block(s) & Lots(s): _____

Approximate Market Value*: \$ _____

Outstanding Mortgage: \$ _____ (attach most recent mortgage statement)

Estimated Equity (Market Value – Outstanding Mortgage): \$ _____

- C. Other Available Collateral:

Cash Securities, Equipment, Other: (Include description, value and appraisal, if applicable)

Real Estate:

Address: _____

Block(s) & Lots(s): _____

Approximate Market Value*: \$ _____

Outstanding Mortgage: \$ _____ (attach most recent mortgage statement)

Estimated Equity (Market Value – Outstanding Mortgage): \$ _____

*Attach an appraisal for the property. If an appraisal is unavailable, provide a letter signed by a reputable real estate broker or professional stating the property's current market value and a copy of your most recent property tax statement showing assessed value. The need for an appraisal will be evaluated for each application.

X. SOURCES AND USES OF FUNDS

List all sources of financing to be utilized for this project including equity contributions, private financing and other public resources. Attach executed funding commitments for each of the entities providing capital to fund this project.

	Source	Amount	Commitment Expiration Date	Describe Use of Funds
Equity Contribution				
Private Financing				
Public Financing				
EZ Funding				
TOTAL				

CERTIFICATION OF APPLICATION:

Eligibility for financial assistance is determined by the information presented in this application and the required attachments and exhibits. Any changes in the status of the proposed project from the facts presented herein could disqualify the project.

Only the governing entity of the participating agency(s) may take action to determine project eligibility and to authorize the issuance of funds.

By signing below, I, certify that all information and statements made in reference to this application are, to my knowledge, true and complete, and I understand that if such information is willfully false, I may be subject to prosecution. By signing below, I also authorize Cumberland Empowerment Zone Corp.(CEZC) to investigate my/our personal and business financial credit history as necessary to process a loan application. The undersigned authorize any person or consumer reporting agency to give CEZC any information it may have on the undersigned. The Undersigned, in applying for financial assistance from CEZC, recognizes that prior to receiving any financial assistance he or she will agree to comply with all federal, state and local laws and regulations to the extent that such are applicable.

Signature: _____

_____ **Title**

Date: _____

THE GOVERNING ENTITY OF THE PARTICIPATING AGENCY(S) AND/OR CORPORATION(S) RESERVES THE RIGHT TO DETERMINE WHICH PROJECTS TO FINANCE AND TO AMEND THESE GUIDELINES AT ANY TIME.