

**BURLINGTON COUNTY BRIDGE COMMISSION
APPLICATION FOR FINANCIAL ASSISTANCE**

The following information is necessary to process a request for financial assistance through the Burlington County Bridge Commission. 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 original plus one copy of this application and one copy of the required financial materials to:**

**Director of Project Development
Burlington County Bridge Commission
1300 Route 73 North
Palmyra, New Jersey 08065**

I. APPLICANT INFORMATION

A. General Information

Name of Applicant	Name of Contact Person (officer/owner of the applicant)
Street Address	Mailing Address
City	State Zip Code
Trade Name	Type of Business
Telephone Number	Telefax Number
<i>Amount of Financing Requested</i> Loan/Bond Amount:	\$ _____

B. Project Description

Please provide a brief narrative description of the proposed project:

C. Applicant's Business Organization: Corporation Partnership Sole Proprietorship LLC
Not-for-Profit Other (describe): _____

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

If yes, indicate name and address of related organization and relationship. (Attach separate pages, if necessary, and label as Exhibit IC)

D. List 100% ownership including all officers, directors and partners of the applicant. 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. (Attach separate pages, if necessary, and label as Exhibit ID)

Name Home Address	Social Security Number	Office Held	Percent Ownership

E. Have any of the persons or entities listed in items A, 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, 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

6. been, or is now, denied a business-related license or had it suspended or revoked by any administrative, governmental or regulatory agency?

_____ yes _____ no

7. been, or is now, disbarred, suspended or disqualified from contracting with any federal, state or municipal agency?

_____ yes _____ no

8. been, or is now, in receivership or adjudicated bankrupt?
 _____ yes _____ no
9. 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 IE.

F. Applicant's attorney, bank and advisors.

1. Name, address and telephone number of counsel to applicant:

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

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

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

G. 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 not, please explain and attach separate sheet if needed and include as Exhibit IG1.
2. Are sales and other business tax payments current?
 _____ yes _____ no If not, please explain and attach separate sheet if needed and include as Exhibit IG2.
3. Are corporate/personal federal and state income tax payments current?
 _____ yes _____ no If not, please explain and attach separate sheet if needed and include as Exhibit IG3.
4. Are municipal property tax payments current at the project site?
 _____ yes _____ no If not, please explain and attach separate sheet if needed and include as Exhibit IG4.

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.

C. Project Site (Land)

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

2. Are there any existing buildings on project site?

_____ yes _____ no

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

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

4. Indicate the present owner of the project site

Name: _____ Contact Person: _____
Business Street Address: _____
City/State/Zip: _____ Telephone: _____

5. 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

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

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

7. 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, attach a separate page, if necessary, and label as Exhibit IIC7.

8. Has the applicant or project occupant applied for or received financial assistance for this project from any other state or local 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).

2. 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).

3. 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.

E. Construction Status

1. Has construction work on the project commenced?

_____ yes _____ no If yes, provide details.

2. Has a local building permit been issued?

_____ yes date issued _____ _____ no

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.

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

3. Does any of the existing (used) equipment to be acquired consist of special purpose structures such as dry docks, greenhouses and power and fuel stations?

_____ yes _____ no If yes, explain and list the items and contemplated rehabilitation costs for each item of equipment.

H. Principal Use of Project

Describe in detail the principal uses by the project occupant(s) of the building(s) and/or equipment to be acquired, constructed or expanded (i.e. manufacturing, research, executive offices for management, warehousing for storage, 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.

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	_____
Engineering & Architectural Fees	_____
Finance Fees	_____
Accounting Fees	_____
Legal Fees	_____
Interest During Construction	_____
Refinancing	_____
Working Capital	_____
Other (specify)	_____

TOTAL PROJECT COSTS	\$ _____

B. Of the total project costs shown above indicate here and on page 1, 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. Please indicate whether any projects costs will include moving expenses, raw materials, work in process or stock in trade. If so, please provide the amount and nature of the project costs.

(check one)

_____ No such costs have been included _____ Such costs have been included, as described below:

VI. TAX-EXEMPT FINANCING (Only complete this section if applicant is seeking bond 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 Commission 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, buildings, 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, the 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. Employment

Indicate below the number of people presently employed and the estimated number that will be employed at the project. All figures should include full-time (working 35 or more hours per week) and part-time employees. Do not include construction workers.

Type of Employment	On Project Site at Present		After Completion of Project	
	full-time	part-time	full-time	part-time
Professional, Managerial, Technical				
Skilled, Semi-Skilled				
Unskilled				
TOTALS				

VII. CERTIFICATION OF APPLICATION

I. THE UNDERSIGNED, BEING DULY SWORN UPON MY OATH, SAYS:

1. I affirm, represent, and warrant that the information contain in this application and in all attachments submitted herewith is to the best of my knowledge true and complete.
2. I authorize the Commission 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.
3. I authorize the Commission 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 Commission.

SIGNATURE: _____

NAME (PRINT): _____

TITLE: _____

DATE: _____