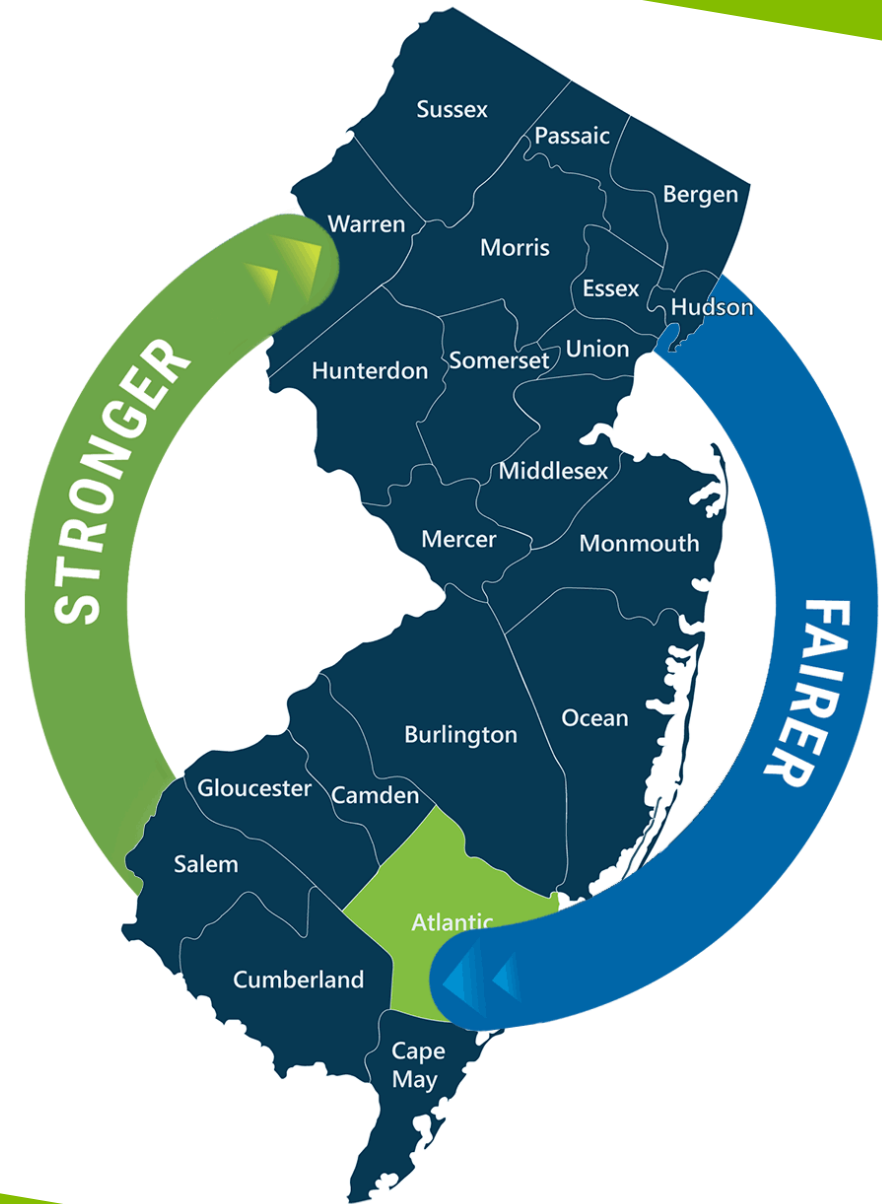


Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II

September 2024



Applicant Checklist

Available online

<https://www.njeda.gov/wp-content/uploads/2024/07/ART-Phase-II-Applicant-Checklist.pdf>

ACTIVATION, REVITALIZATION, AND TRANSFORMATION (A.R.T.) PROGRAM – PHASE II

UPCOMING INFO SESSIONS (IN PERSON AND VIRTUAL)

Click here to register for a virtual review of the application
(September 10th, 11:00 AM – 12:00 PM ET)

1
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11:00 AM

TUESDAY

September 10, 2024
APPLICATION REVIEW WEBINAR: ACTIVATION, REVITALIZATION, AND TRANSFORMATION (A.R.T.) – PHASE II

The New Jersey Economic Development Authority's Activation, Revitalization, and Transformation (A.R.T.) Program – Phase II is a competitive grant program for nonprofit organizations aimed at catalyzing community placemaking efforts by leveraging the arts and cultural sector as a creative force ...

LEARN MORE

The application window for this program is expected to open in Q3 2024. Please revisit this page for updates and additional information.

PROGRAM GUIDE

BOARD MEMO

PROGRAM SPECIFICATIONS

SCORING CRITERIA

APPLICANT CHECKLIST

Activation, Revitalization, and Transformation (A.R.T.) – Phase II Program Applicant Checklist

Applicant Name	
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Required Items for A.R.T. – Phase II Grant Program:

1. Online applications will be accepted during a defined, minimum 60-calendar day application period. All applications will be reviewed following the closure of the application period.
2. All documentation listed in this section must be submitted for application to proceed to the Scoring Phase of the application process.
3. Documents listed in this section are eligible for *curing* during the 10-business day *cure* period. (If NJEDA Staff Reviewers determine that there is an issue with any of the Eligibility documents [Items 1 – 8 below], applicants will be notified via email. Applicants will then have 10-business days to submit documents NJEDA Staff Reviewers have specified, to move their application forward to the Scoring Phase of the application process.)
4. All documents must be the official document as issued by certifying entity. No emails, transcripts, summaries, or other alternate verification documents can be used to satisfy the documentation requirements listed below.

<input type="checkbox"/>	1. Completed online application
<input type="checkbox"/>	2. Current Tax Clearance Certificate from the NJ Division of Taxation How to Use NJ Premier Business Services to Obtain Certification
<input type="checkbox"/>	3. Mapping Tool Download -shows eligible Project location
<input type="checkbox"/>	4. IRS Determination Letter- IRS must determine applicant is a 501c3, 501c6 or 501c19
<input type="checkbox"/>	5. Complete the Project Sources and Uses Form Art Project Sources and Uses Template
<input type="checkbox"/>	5a. Provide all project Sources, the Total EDA grant amount requested in Sources
<input type="checkbox"/>	5b. Provide all project Uses, the Total Eligible Costs listed in Uses (Please note: Total Uses MUST equal Total Sources.)
<input type="checkbox"/>	6. Formation document for the applicant entity. Not-for-Profit: Certificate of incorporation and bylaws. Out of State: If the business was formed out of state but operates within the State of NJ, the Certificate of Authority that was obtained by the business in home state must be presented. Same certification as was registered in NJ must be provided. Please note:

	<p>a) Formation Document must be issued by a US state or territory, including the State letterhead and State seal.</p> <p>b) Formation Document must list the type of corporate entity</p> <p>c) Formation Document must list the official corporate name</p> <p>d) Name on Formation Document must match the Applicant's name on Application</p> <p>e) Formation Document must be dated</p> <p>f) Formation Document must be signed or sealed by a state officer or employee</p> <p>g) Businesses using a DBA name must also provide a Certificate of Alternate Name, Registration of Alternate Name or Trade Name Certificate (filed with County Clerk)</p>
<input type="checkbox"/>	7. Project Summary--must list eligible project uses
<input type="checkbox"/>	8. Project Timeline Schedule that demonstrates the project will be completed prior to 12/31/26.
Scoring Section	
<p>Documents provided in section below will be reviewed by the NJEDA Scoring Committee, if all Eligibility Documents required (1-8 above) have been submitted satisfactorily.</p> <p>Applicants may not submit corrections, cures, edits or replacements for any document listed in the Scoring Section below.</p>	
<input type="checkbox"/>	<p>9. Provide project description with cost estimates.</p> <p>a. Include Final plans or Preliminary plans for the proposed project/program.</p> <p><i>(Scoring Criteria Question #1)</i></p>
<input type="checkbox"/>	<p>10. Provide <i>Site Use & Access</i> documents.</p> <p>Please demonstrate the ability to obtain site control through:</p> <p>Executed documents such as: (signed by both parties) lease, deed, permits, Ordinance showing approval, local board approval, rental agreement, Board memo, City Ordinance, Letter of agreement, MOU, Letter of Intent or similar document between owner of site/space and applicant organization detailing terms of usage.</p> <p><i>(Scoring Criteria Question #2)</i></p>
<input type="checkbox"/>	<p>10a. Does the address on the <i>Site Use & Access</i> document match the address on the Application?</p> <p><i>(Scoring Criteria Question #2)</i></p>
<input type="checkbox"/>	<p>10b. Does the address on the <i>Site Use & Access</i> document match the address in the document downloaded from the NJEDA Mapping Tool?</p> <p><i>(Scoring Criteria Question #2)</i></p>

<input type="checkbox"/>	<p>11. Provide narrative statement and documents describing increase in foot traffic.</p> <p><i>(Scoring Criteria Question #3)</i></p>
<input type="checkbox"/>	<p>12. Provide explanation of the level of experience your organization has with similar projects/programs that demonstrates your ability to complete the proposed project/program successfully.</p> <p><i>(Scoring Criteria Question #4)</i></p>
<input type="checkbox"/>	<p>12a. Provide project/program examples and documentation to support your explanation.</p> <p><i>(Scoring Criteria Question #4)</i></p>
<input type="checkbox"/>	<p>13. Provide examples of how project/program will mitigate COVID impacts and build community resilience through its <i>short-term impact (within 1 year of completion)</i> on the local economy, as it relates to local businesses, local employment, local arts and culture production/performance, exhibition, preservation and or education.</p> <p><i>(Scoring Criteria Question #5a)</i></p>
<input type="checkbox"/>	<p>13a. Provide examples of how project/program will mitigate COVID impacts and build community resilience through its <i>long-term impact (after 1 year of completion)</i> on the local economy, as it relates to local businesses, local employment, local arts and culture production/performance, exhibition, preservation and or education.</p> <p><i>(Scoring Criteria Question #5a)</i></p>
<input type="checkbox"/>	<p>14. Provide examples and/or narrative of how project will activate vacant or underutilized space post-COVID.</p> <p><i>(Scoring Criteria Question #5b)</i></p>
<input type="checkbox"/>	<p>15. Provide examples and/or narrative how project will contribute to the community's vision post-COVID?</p> <p><i>(Scoring Criteria Question #5c)</i></p>
<input type="checkbox"/>	<p>16. Provide a narrative (250 words or less) about how the primary focus of your organization is centered around arts and culture.</p> <p><i>(Scoring Criteria Question #6)</i></p>
<input type="checkbox"/>	<p>16a. Provide up to 3 pieces (max.) of documentation that demonstrate your organizational focus.</p> <p><i>(Scoring Criteria Question #6)</i></p>
<input type="checkbox"/>	<p>17. Provide Proof of Partnership(s) with Letter(s) of Intent documenting the commitment and scope of the partnership(s) you plan to engage in to complete this project/program.</p> <p>*Provide one Letter of Intent for each partnership that you will be engaged in for the scope of the project/program.</p> <p><i>(Scoring Criteria Question #7)</i></p>

Sample Application

Welcome

Before beginning the application read through the information provided on the welcome page.

Once ready click “Next” to begin the application



IMPORTANT TIP:

Click “Save” in the beginning to create a reusable link that will save your progress as you complete the application.

Welcome: Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II

Program Description

A.R.T. – Phase II is a competitive grant program that will disburse \$15,000,000 in ARP SLFRF funding to address the impact of COVID-19 in 31 selected municipalities throughout the state.

The program supports the creation of public space activation initiatives, such as place making projects, public art installations and arts-based projects.

Eligible Applications will be Scored by the NJEDA Scoring Committee on a Scale of 0 – 100 points, with award recommendations limited to applications that meet or exceed the minimum requirement of 65 points.

Proposed projects must be located in one of the 31 listed municipalities. The municipalities with areas eligible for the program are:

1. Asbury Park
2. Bayonne
3. Belleville
4. Burlington City
5. Camden
6. City of Orange
7. Clifton
8. Dover
9. Dunellen
10. East Orange
11. Egg Harbor City
12. Elizabeth
13. Garfield
14. Hackensack
15. Hammonton
16. Jersey City
17. Linden
18. Lindenwold
19. Long Branch
20. Netcong
21. New Brunswick
22. North Bergen
23. Passaic
24. Paterson
25. Pennsauken
26. Perth Amboy
27. Plainfield
28. Rahway
29. Riverside
30. Trenton
31. Union City

Atlantic City and Newark are ineligible for funding through this phase of the ART Program.

Projects must be completed and all grant award funding must be expended by December 31, 2026.

For applicant eligibility criteria and additional program details, please visit the ART website: [Activation, Revitalization, and Transformation \(A.R.T.\) Program - Phase II - NJEDA](#)

[Click here to download the Applicant Checklist and preview a list of items you will be asked to provide when filling out this application.](#)

Next >

Save

Language Access

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



Language Assistance

Is English your primary language? *

< Back Next > Save

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

Language Assistance

Is English your primary language? *

No

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

|

- Español (Spanish)
- العربية (Arabic)
- 粵語 (Cantonese Chinese)
- 國語 (Mandarin Chinese)
- ગુજરાતી (Gujarati)
- हिन्दी (Hindi)
- Italiano (Italian)
- 한국어 (Korean)
- Po Polsku (Polish)
- Português (Portuguese)
- Tagalog
- Other

Eligibility

Please select the Municipality in which your project will be located:

The 31 municipalities eligible for the program are:

Asbury Park	Bayonne	Belleville	Burlington	Camden
Clifton	Dover	Dunellen	East Orange	Egg Harbor City
Elizabeth	Garfield	Hackensack	Hammonton	Jersey City
Linden	Lindenwold	Long Branch	Netcong	New Brunswick
North Bergen	Orange	Passaic	Paterson	Pennsauken
Perth Amboy	Plainfield	Rahway	Riverside	Trenton
Union City				



Activation, Revitalization, and Transformation (ART) Program - Phase II

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21

Activation, Revitalization, and Transformation (ART) Program - Phase II: Eligibility

Eligible entities are nonprofit organizations with a 501c (3), 501c (6), or 501c (19) status as evidenced in the Applicant's IRS determination letter.

Municipalities, Counties, government entities, and for-profit entities, or any applicant that received a grant from Phase I of the A.R.T. program are not eligible to apply.

Please select the Municipality in which your project will be located: *

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Primary Point of Contact

On this page we will collect contact information for the Primary Point of Contact for this application.

Please ensure that the email provided is the correct email for the primary point of contact on this application.

This contact information is crucial! This is how the NJEDA Staff will contact you with any questions they have.



REMINDER

Click “Save” to create a reusable link that will save your progress as you complete the application.

Primary Point of Contact

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

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

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

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone Number *

Authorized Representative

If the primary point of contact is not an authorized representative for the applicant entity, you will be asked to fill out the contact information for the authorized representative.

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.

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone *

Chief Executive Officer/Owner/Equivalent

If the primary point of contact is not Chief Executive Officer/Owner/Equivalent for the applicant entity, you will be asked to fill out the contact information for the Chief Executive Officer/Owner/Equivalent.

Chief Executive Officer/Owner/Equivalent

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

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Title *

Email Address *

Confirm Email Address *

Phone

Consultant Information

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

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

IF YES, you will be asked to fill out the contact information for the consultant.

Consultant Information

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

Would you like to designate a consultant contact who is assisting with this application? *

Yes No

Salutation

First Name *

Middle Initial

Last Name *

Suffix

Company *

Title *

Email Address *

Applicant Organization

In this section, we are collecting information about the registered business that is applying for this program.

This page will request applicant organization information including but not limited to...

- Entity Type
- Date Established
- Entity Formation Documents
- Federal Tax Identification Number (FEIN)
- NJ Tax Identification Number
- NAICS Code
- NJ Tax Clearance Certificate

If the applicant is involved in religious activities or is religiously affiliated, an additional Religious Activity Questionnaire will be required.

Eligible applicants for this grant are non-profit organizations with a 501c (3), 501c (6), or 501c (19) status.

Applicant Organization

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

Applicant Organization Name *

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

Applicant Doing Business As (DBA)

Entity Type *

Date Established *

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

Yes No NA - Applicant Organization is Government Entity

Mailing Address *

Address Line 1

Address Line 2

City State Zip Code

Applicant Country of Incorporation/Formation *

United States

Applicant State of Incorporation/Formation *

State

Formation Document(s)

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

- Sole Proprietor: [Provide a Certificate of Trade Name](#) (filed with the County Clerk)
- LLC: [Certificate of Formation](#)
- Corporation: [Certificate of Incorporation and Bylaws](#)
- Not-for-Profit: [Certificate of Incorporation and Bylaws](#)
- Out of State: If your entity was formed out of state but operates within the State of NJ, you must file a Certificate of Authority when registering the business in NJ and provide that certificate.

Upload or drag files here.

Additional Information

If the applicant is involved in political or lobbying activities, an additional Political Activity Questionnaire will be required.

Additional Information

Is the entity involved in political or lobbying activities? *

Yes No

Provide a Political Activity Questionnaire form

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

Political Activity Questionnaire *

or drag files here.

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Cannabis Questionnaire

Cannabis Questionnaire

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

Yes No

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

Yes No

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New Jersey State law prohibits certain cannabis licensees and certified personal use cannabis handlers' employers from receiving or continuing to receive most financial incentive awards.

Diversity Equity and Inclusion

In this section, we would like more information about the diversity of your organization.

Answers have no impact on eligibility for assistance and providing information is optional, to be used for tracking purposes only.

Within each of these questions, “Prefer not to answer” can be selected if that is the case OR if the question is not applicable to your organization.

Diversity, Equity, & Inclusion

In this section, we would like more information about the diversity of your organization. Answers have no impact on eligibility for assistance and providing information is optional, to be used for tracking purposes only. Within each of these questions, “Prefer not to answer” can be selected if that is the case OR if the question is not applicable to your organization.

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

- Minority
- Woman
- Veteran
- LGBTQ
- Disabled
- None of the above
- Prefer not to answer

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

- Small Business Enterprise (SBE)
- Disadvantaged Business Enterprise (DBE)
- Minority-Owned Business Enterprise (MBE)
- Woman-Owned Business Enterprise (WBE)
- Veteran-Owned Business Enterprise (VOB)
- Disabled Veteran-Owned Business Enterprise (DVOB)
- None of the above
- Prefer not to answer

Additional DE&I Information

In this section, we would like more information about any actions your organization has taken or is taking with respect to Diversity, Equity, and Inclusion

Please describe whether your organization'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). *

Project Overview (1/3)

In this section, we would like to learn about the location of your project, your project proposal, and how you plan to impact the community if awarded the grant.

Project Location City Must Be in one of the 31 Eligible Municipalities.

Use the NJEDA Mapping Tool provided [here](#), and in the application, to create and upload your Mapping Tool Report.

Directions for Applicants:

1. Turn on the map Layer called "ART – Phase 2 Eligible Areas," and make sure all other colorized layers are off by unchecking the boxes, if they are on.
2. Find the location of your property using the search bar at the top of the map.
3. Check that the address of your proposed location falls within the PINK area.
4. Select the print icon, and using the "Map Only" layout and "PDF" format, click print.
5. Download and save the PDF for use in your application.

** Please Note: You must have Adobe Acrobat to download the PDF from the Mapping Tool. If you do not have Acrobat, you can Copy & Paste the map to Microsoft Word or provide us with a Screen Shot of the location from our Mapping Tool. The image you give us must be from the NJEDA Mapping Tool.*

Project Overview

Project Location

Project Name *

Project Location *

Address Line 1

Address Line 2

City * **State** **Zip Code ***

Select an eligible municipality New Jersey

Zip Code

Is the project located in an Opportunity Zone Eligible Census Tract? *

Yes No

Block and Lot

⊗ Item 1

Block * **Lot ***

Is there more than one address associated with the project location? *

Yes No

NJEDA Mapping Tool Report

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

Please use the mapping tool to search for your project site location. Select the ART icon on the top toolbar for instructions to download and save your location map using the Print icon, then upload it here.

Project Overview (2/3)

Project Proposal (You may use the blank box OR upload your project narrative as a separate document and write “Included as upload” in the box.)

#1:

Examples of what the description and cost estimates may include, but are not limited to: any artist’s estimates for work on the project, teaching costs, contact or estimates for work, venue estimates, etc.

Final plans could be shown by completed project bidding, project plans that are approved by your organizational board and/or community officials, etc.

1. Project/Program Proposal

The A.R.T. Program is a grant product that will support the creation of public space activation initiatives, such as placemaking projects, public art installations, and arts-based projects. These activities may include, but are not limited to art exhibitions, performances, festivals, parades, concerts or concert series, film and video screenings, and cultural programming. Funding can also be granted to support operational costs for the applicant to execute art or placemaking projects.

Please describe the project, including cost estimates, and/or preliminary or final plans in your response. *

(8 Points for final plans and cost estimates, 3 points for preliminary plans or estimates, 0 if otherwise.)

If you would prefer to upload a document with your response to this question, you may use the upload button and write "Included as upload" in the box below.

Project Proposal Upload

or drag files here.

Total Project Cost *

Total Grant Amount Requested *

Project Overview (3/3)

In this section, we want to ensure your ability to cover the total project costs and plans for completing the project by December 31, 2026.

Total Grant Amount Requested must be between \$100,000.00 and \$500,000.00.

Download the [Project Sources and Uses template](#) provided in the application and identify all current sources and uses of funding for your project before uploading as an excel file.

NJEDA funds can account for 100% of project funding.

***Total Sources must equal Total Uses.**

***The Grant Amount requested in application must be listed in the sources section.**

Note: Grant funds must be expended by December 31, 2026, as per the rules of this program. The project schedule you upload in this section must clearly demonstrate a plan to complete the project prior to this date.

[Click here](#) to download and complete the Project Sources and Uses template before uploading it in the section below. Amounts provided for sources and uses must specify if cost estimates or quoted figures were obtained through preliminary planning measures.

If the amount requested on the NJEDA A.R.T. Phase II Grant application is not listed as a Source or if the Total Sources do not equal the Total Uses, then the Source & Use document will be considered incomplete, and the application will receive a non-discretionary declination.

Please upload your Project Sources and Uses *

or drag files here.

Please note: The Project Sources and Uses must be uploaded as an excel file.

Please upload a project schedule and explain how the projects will be completed by December 31, 2026. Be sure to include all important milestones that will help ensure the success of this project. *

or drag files here.

Please note: Per federal program guidelines, all A.R.T. Phase II funds must be obligated by 31, 2024, and must be expended by December 31, 2026.

Project/Program Site and Increase in Foot Traffic

In this section, we want to understand that you have the ability to use or are able to obtain permission to use the site or sites that you plan to use for your proposed project or program and how you plan to engage with the community to meet the goals of the program.

#2:

- If you already have access to the project site or if you have started the process of obtaining site access, please use the upload button to include any and all documentation from relevant entities, demonstrating that you have permission and access to the proposed project site for the specified timeframe of the project. For example, if you own the site, show proof of ownership; if the municipality owns the site, show permission to use the site.

#3:

- Submit information/data from over the past year or two for the area, site, venue of the proposed project, illustrating and describing in as much detail as possible, how your project will bring more people to the site and community.

2. Project/Program Site

Use & Access

Please describe Site Use & Access. Does your entity currently have the ability to use or obtain permission to use the site for the purposes described in the project? *

(7 Points if the applicant has demonstrated site use and access, 0 if otherwise.)

If you would prefer to upload a document with your response to this question, please do so below and write "Response in upload" in the box above.

Please upload Site Use & Access Upload

 or drag files here.

Draft or executed documents (signed by both parties) such as: lease, deed, permits, Ordinance showing approval, local board approval, rental agreement, Board memo, City Ordinance, or Letter of agreement between owner of site/space and applicant organization detailing terms of usage.

3. Increase in Foot Traffic

Describe how this project will increase foot traffic in the local community based on existing historic traffic data such as foot traffic measurements, ticket sales, audience counts or other similar measures. *

(5 Points if the applicant has demonstrated significant increase in foot traffic [greater than 50% increase], 3 if partial increase [1% to 50% increase], 0 if no increase.)

If you would prefer to upload a document with your response to this question, please do so below and write "Response in upload" in the box above.

Please upload documents that demonstrate existing historic traffic data such as foot traffic measurements, ticket sales, audience counts or other similar measures.

 or drag files here.

Organizational Experience

In this section, we want to know that your organization has the experience, expertise and capability to successfully complete the proposed project, based on past, relevant, organizational history.

#4:

- Describe the projects in detail, including the scope of the projects, where they took place, the timeframe of the projects, who produced, led or managed the project and how the project engaged the community/audience. Please submit any supporting documentation for the project (press releases, programs, marketing materials, organizational calendars, etc.)

4. Organizational Experience

Explain the level of experience the applicant organization has with similar projects demonstrating their ability to complete the proposed project successfully. Please include any previous projects that involved arts-based activity in spaces open to the public or municipal spaces and explain the status of those projects. *

(15 points for two projects completed, 8 points for one project completed and 0 points for no relevant examples.)

Please supply your project manager resume(s) and any additional documentation to demonstrate the project/program production team's experience and ability to complete the program/project successfully. *

Upload or drag files here.

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Project Impact and Engagement (1/2)

In this section, we want to know how your proposed project will mitigate the negative, economic impact of COVID – 19 in the community both short-term and long-term.

#5 a & b:

- Be as detailed and specific, as possible, providing examples and/or any relevant data.

5. Project/Program Impact and Engagement

5a. Describe how your project/program will contribute to the resilience of your community post-COVID and mitigate COVID impacts.

Provide examples of how this project will mitigate COVID impacts and build community resilience through its short-term impact (within 1 year of completion) on the local economy, as it relates to local businesses, local employment, local arts and culture production/performance, exhibition, preservation and or education. Provide additional examples of the same for the project's long-term impact (beyond 1 year of completion). *

(Up to 15 pts for a response that demonstrates short & long-term impact)

If you would prefer to upload a document with your response to this question, please do so below and write "Response in upload" in the box above.

Project Impact Response Upload, 5a (optional)

or drag files here.

5b. Describe how your project/program will Activate vacant or underutilized space post COVID.

The activation of vacant or underutilized spaces can include but is not limited to facilities, classrooms, production areas, galleries, exhibition and performance spaces, public and private buildings, or parts of buildings, public or private empty/vacant lots or parcels; streets, blocks and/or neighborhoods; public spaces such as parks, playgrounds, or arts installations that have been impacted by COVID. *

(Up to 10 pts for a response that demonstrates activation of underutilized space)

If you would prefer to upload a document with your response to this question, please do so below and write "Response in upload" in the box above.

Project Impact Response Upload, 5b (optional)

or drag files here.

Project Impact and Engagement (2/2)

In this section, we want to know how your proposed project coincides with the community's overall vision of itself.

#5 c:

- Be as detailed and specific, as possible, citing relevant examples that illustrate how your project ties into the larger community vision.

5c. Describe how your project/program will contribute to the community's vision post-COVID.

Describe how this project addresses the community's vision as expressed by county, municipal, or neighborhood-level plans, studies and/ or statements. Examples include plans and studies focused on community arts and arts education, economic development, Main Street, Sustainable NJ, small business entrepreneurship, cultural and heritage plans, local arts and culture development, historic preservation, travel and tourism promotion, local beautification and placemaking, neighborhood redevelopment, neighborhood revitalization or other plans. *

(Up to 10 pts for a response that demonstrates how the project addresses the community vision)

If you would prefer to upload a document with your response to this question, please do so below and write "Response in upload" in the box above.

Project Engagement Response Upload, 5c (optional)

Upload or drag files here.

< Back

Next >

Save

Organizational Focus

In this section, we want to know whether or not arts and culture is the primary focus of your organization.

#6:

- Provide a narrative that describes the overall mission of your organization along with 3 pieces of documentation that illustrate your organizational focus.
- See explanation of “supporting documentation”:



6. Organizational Focus

Describe how the primary focus of the Applicant organization is centered around arts and culture. Provide a narrative of no more than 250 words and no more than three (3) pieces of supporting documentation that show organizational focus: *

(20 points if narrative and supporting documentation provided to demonstrate this is an Arts & Culture focused organization; 0 points if it is not)

If you would prefer to include your response as an upload along with your supporting documentation, please do so below and write "Response in upload" in the box above.

Arts and Culture Response and Supporting Documentation *

Upload or drag files here.

Supporting documentation can include but is not limited to charter or formation documents; awards of other federal/ state/ local government and/or private or public philanthropic grants, awards, prizes or other benefits for arts and culture related activities or projects; membership documents in a local, state, national or international organization related to arts and culture advocacy, promotion or public service; proof of previous teaching or exhibition work related to arts and culture; participation in or collaboration on an academic, economic or government study related to arts and culture, annual programming documentation, annual report, annual financials and other documents that prove arts & culture focus

< BackNext >Save

Partnerships

In this section, we want to know if your organization intends to work with a partner or partners in order to successfully complete the proposed project or program by December 31, 2026 and to understand the intended role and scope of the partnership

#7:

- A Letter of Intent must be submitted for each partnership.
- Letters of Intent need to address items **a – e**.
- Letters of Intent need to be signed by both your organization and the partnering entity.

a) the benefit that the partnership brings to the project;
b) commitment to the scope of the project;
c) the timeline for executing and completing the project;
d) the expected final product, and;
e) any other personal, material, or financial resources committed to the project (if applicable)

7. Partnerships

If the Applicant organization is partnering with an individual artist, artist collective, an arts and cultural non-profit, a municipal entity, a community group, or private sector entity, provide proof of partnership with a Letter of Intent approved by both entities that includes:

- a) the benefit that the partnership brings to the project;
- b) commitment to the scope of the project;
- c) the timeline for executing and completing the project;
- d) the expected final product, and;
- e) any other personal, material, or financial resources committed to the project (if applicable)

Has the applicant entered into any agreements with or engaged other professionals who will be working on this project? *

Yes No

Partnerships

⊗ Partner 1

Partner *

Partner Address *

If the Applicant organization is partnering with an individual artist, artist collective, an arts and cultural non-profit, a municipal entity, a community group, or private sector entity, provide proof of partnership with a Letter of Intent approved by both entities that includes:

+ Add Partner

Work Activities

*Projects including construction activities or any of the trades may be subject to New Jersey and **Prevailing Wage** requirements.*

In this section we want to understand the type and scope of work included in your proposed project or program in order to assess whether or not the rules of Prevailing Wage will apply.

If you click “Yes” on any of these 4 Questions, you will be prompted to give us information about the specific “contractor/subcontractor or professional service” you plan to engage. We realize that at the time of submitting the application, you may not have a designated “contractor” to do the work. You will still be able to complete the application and, if you are awarded a grant, you will be asked to us that specific information at a later time.

***Please Note: Volunteers that do not earn payment (wages or monetary gifts) for their work, would not be subject to Prevailing Wage compliance.**

Work Activities

Are any proposed items/expenses as covered in your scope of work/project proposal related to construction contract related expenses? (See below note for additional details) *

Yes No

Please note: These include contracts, invoices, approved quotes and purchase orders for construction, reconstruction, demolition, alteration, duct cleaning, repair work, maintenance work including painting and decorating, millwork fabrication, remediation, removal of hazardous substances, custom fabrication, excavation, grading, pile driving, concrete form or other types of foundation work.

Are any project expenses related to construction contracts for trade workers such as electricians or laborers? (See below note for additional details) *

Yes No

Please note: For example, contractors involved in stage building, mechanical or lighting related work.

Are any proposed items/expenses as covered in your scope of work/project proposal related to equipment installation greater than \$2,000? *

Yes No

Is any of the work to be performed on or at a property that is publicly owned or leased? (See below note for additional details) *

Yes No

Please note: Publicly owned or leased is real estate or property that is owned or leased by the state of New Jersey, a New Jersey county or New Jersey municipality or any of its instrumentalities including but not limited to public buildings, public parks, public street or roads, state or community college campuses, housing authority site, local transportation site or state historical monuments.

Construction, Renovation, or Installation of Equipment (1/2)

NJDOL Public Works Registered Contractor/Subcontractor:

All contractors used for any construction costs more than \$1999 must be registered as a New Jersey Department of Labor and Workforce Development (DOL) Public Works Registered Contractor and must abide by NJ prevailing wage and affirmative action requirements. Any quotes submitted from contractors/subcontractors that are not NJDOL Public Works Registered Contractors at the time of application will not be eligible to be used in your proposed project.

Professional Services:

All professional services including, but not limited to, architectural, engineering, construction management services must provide verification proof of NJ Business Registration and a Verification of Professional Service form.

Construction, Renovation, or Installation of Equipment

NJDOL Public Works Registered Contractor/Subcontractor: All contractors used for any construction costs more than \$1999 must be registered as a New Jersey Department of Labor and Workforce Development (DOL) Public Works Registered Contractor and must abide by NJ prevailing wage and affirmative action requirements. Any quotes submitted from contractors/subcontractors that are not NJDOL Public Works Registered Contractors at the time of application will not be eligible to be used in your proposed project.

[Click here for a list of New Jersey Public Works Registered Contractors.](#)

Professional Services: All professional services including, but not limited to, architectural, engineering, construction management services must provide verification proof of NJ Business Registration and a Verification of Professional Service form.

Professional Services/ Contractor/Subcontractor

The NJEDA acknowledges that you may not have a designated contractor/subcontractor and/or professional service vendor at the time of application. However, please complete this section and submit whatever specific information you do have at this time for every contractor/subcontractor and/or professional service listed as part of your project.

⊗ Contractor/Subcontractor or Professional Service 1

Are you working with a Contractor, Subcontractor, or Professional Service? *

+ Add Contractor/Subcontractor or Professional Service

Are you working with a Contractor, Subcontractor, or Professional Service?

If your organization plans to work with more than one Contractor, Subcontractor, or Professional Service, please click the +Add Contractor/Subcontractor, or Professional Service button the number of times needed to provide details for each one.

Construction, Renovation, or Installation of Equipment (2/2)

Contractor/Subcontractor Information

Contractor/Subcontractor Information

⊗ Contractor/Subcontractor 1

Name of Contractor/Subcontractor *

Contractor Quote *

or drag files here.

NJ Business Registration Form *

or drag files here.

Please [click here](#) to download and complete the Contractor Verification Form prior to uploading it in the section below.

Contractor Verification Form *

or drag files here.

NJ Small/Women/Minority/Veteran Business Enterprise (SWMBE) certification, if applicable

or drag files here.

Square footage of proposed construction site *

Please provide a detailed explanation of the proposed construction and any specialized equipment or materials required, if applicable. *

Download the [Contractor Verification Form](#) provided in the application and complete before uploading as a PDF.

Professional Services Information

⊗ Contractor/Subcontractor or Professional Service 1

Are you working with a Contractor, Subcontractor, or Professional Service? *

Professional Service

Professional Service Information

⊗ Professional Service 1

Name of Professional Services Company *

NJ Business Registration Form *

or drag files here.

Please [click here](#) to download and complete the Professional Service Verification Form prior to uploading it in the section below.

Professional Service Verification Form *

or drag files here.

NJ Small/Women/Minority/Veteran Business Enterprise (SWMBE) certification, if applicable

or drag files here.

Download the [Professional Service Verification](#) provided in the application and complete before uploading as a PDF file.

Duplication of Benefits

In this section, we will ask if you have applied for or received any other funds (governments loans/grants, private or bank loans, donations, insurance proceeds, etc.)

IF NO, certify this is correct and proceed to the next page.

IF YES, select all the program(s) your business has applied to or received funding for from the list that appears and/or check “Other” to include any other funding sources not covered in the list. For each source, you will need to provide the following information:

- Name of Funding Source
- Program Status: In Process or Approved
- Approved/Applied Date
- Approved/Applied Amount
- Purpose of Funds

Duplication of Benefits Affidavit

This affidavit must be completed by all applicants that are applying for the Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II. Please provide below information about all sources of funds that the Applicant has applied for, been awarded and/or received for the same purpose or purposes as the Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II proposed projects. The information within this affidavit will provide the NJEDA with vital information for processing the application required by the Stafford Act Section 312 on Duplication of Benefits.

As an authorized signer (Owner, CEO, or similar level of officer) for this entity, I hereby state and certify to the United States Federal Government and to NJEDA as follows:

Have you applied for or received any other funds or assistance for any of the projects proposed in this application? *

Sources of funds include, but are not limited to: Federal, State and local loan/grant programs, private or bank loans, gifts or donations, and insurance proceeds.

I certify that there is no Duplication of Benefits and no other government funds were used for expenses detailed in the application projects.

Once you've provided details for all other assistance applied for and/or received for this project, you will need to certify that there is no Duplication of Benefits.

Prevailing Wage and Affirmative Action Requirements

Prevailing Wage, Contractor Registration, and Affirmative Action Requirements

Please be aware that construction activities under the Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II are subject to New Jersey Contractor Registration, prevailing wage, and affirmative action requirements.

Projects utilizing financial assistance for construction related costs that total \$2,000 or more are subject to state prevailing wage requirements. During the eligibility period, each worker shall be paid not less than the prevailing wage rate for the worker's craft or trade, as determined by the Commissioner of the Department of Labor and Workforce Development pursuant to P.L. 1963, c. 150 ([N.J.S.A. 34:11-56.25 et seq.](#)) and P.L.2005, c. 379 ([N.J.S.A. 34:11-56.58 et seq.](#)).

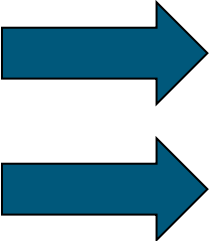
Effective April 1, 2020, contractors and subcontractors for construction contracts that require payment of prevailing wage must provide proof of registration under the Public Works Contractor Registration Act ([N.J.S.A. 34:11-56.48 et seq.](#)) The Act does not require proof of registration for such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

For projects receiving financial assistance, any contractor or subcontractor hired for construction work and having a total company workforce of four (4) or more employees must provide documentation demonstrating their good faith efforts to employ minority and women workers in each construction trade. This effort should be consistent with the applicable county employment goals established in accordance with [N.J.A.C. 17:27-7.2](#) and align with the affirmative action requirements outlined in [N.J.A.C. 19:30-3.5](#).

If you have any questions about these requirements, please contact the Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II team at ArtPhase2@njeda.gov before submitting this application.

- I acknowledge any construction on this project, undertaken either by the applicant or as a result of this application, is subject to prevailing wage and affirmative action requirements.
- I acknowledge that any contractor working on this project must be registered with the New Jersey Department of Labor (DOL) and possess a valid public works certificate at the time of approval.

You must click both boxes in order to proceed to the next page in the application!



Applicant Representative for Certifications

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

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

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

If you are an Authorized Representative you will be prompted to fill out these pages throughout the application (Slides 26-28).

Applicant Representation

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

Yes

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

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

Yes

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

Applicant's General Counsel or Chief Legal Officer

Contact for a Government Entity

General Partner

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

Sole Proprietor

Person with Legal Responsibility for the Application

None of the above

Upload Certifications

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

Upload Certifications

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

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

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

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

[Legal Questionnaire](#)

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

[Application Certifications](#)

Legal Questionnaire *

or drag files here.

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

or drag files here.

Application Certifications *

Legal Questionnaire*

In this section we will be collecting the Legal Questionnaire.

*This page will only be visible if the individual filling out the application is the authorized representative.

Legal Questionnaire

Applicant Name:

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.

Note that this form has recently been modified.
Please review this form in its entirety prior to providing any responses or certifications.

DEFINITIONS

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

"Affiliates" means any entities or persons having an overt or covert relationship such that any one of them directly or indirectly controls or has the power to control another. 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 company 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.

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

In this section we will be collecting the Certification of Non-Involvement in Activities in Russia or Belarus.

*This page will only be visible if the individual filling out the application is the authorized representative.

Certification of Non-Involvement in Activities in Russia or Belarus

Program Name: Atlantic City Food Security Grant Program

Applicant Name:

Applicant Doing Business As:

Pursuant to N.J.S.A. 52:32-60.1, et seq. ([P.L. 2022 c.3](#)) any person or entity (hereinafter 'Applicant') that seeks to be approved for or continue to receive an economic development subsidy from the New Jersey Economic Development Authority must complete the certification below indicating whether or not the Applicant is identified on the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons List, available here: <https://sanctionssearch.ofac.treas.gov/>. If the New Jersey Economic Development Authority finds that an Applicant has made a certification in violation of the law, it shall take any action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

Certification

I, the undersigned, have read and reviewed the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons List, and having done so certify (must check one appropriate box and complete the Authorized Signature section below):

- A. That the Applicant is not identified on the OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus and is not engaged in activities related to Russia or Belarus. OR
- B. That I am unable to certify as to "A" above because the Applicant is identified on the OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus. OR
- C. That I am unable to certify as to "A" or "B" above because the Applicant, though identified on the OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus, is engaged in activities in Russia or Belarus consistent with federal law, regulation, license or exemption. A detailed, accurate and precise description of how the Applicant's activity related to Russia and/or Belarus is consistent with federal law is set forth below, including a copy of the license or listing the exemption. (Attach Additional Sheets If Necessary).

If applicable, please provide a copy of the license or list the exemption:

Upload or drag files here.

Authorized Signature

Certification of Application**

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. 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:

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

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

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

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

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

*This page will only be visible if the individual filling out the application is the authorized representative.

Program Acknowledgements**

Program Acknowledgements

- I, the Applicant, certify that the proposal provided in this application is responsive to the negative public health and/or economic impacts of the COVID-19 pandemic and complies with all the ARP program requirements.
- I, the Applicant, certify, that I have the experience necessary for implementing a minimum of one project that is similar to the project being proposed in this application.
- I, the Applicant, certify that the information provided in this application articulates how the proposal will have a positive long-term impact in its community and the overall benefit to the community at large.
- I, the Applicant, certify that the proposal provided in this application demonstrates the long-term financial viability of the project and evidence that the project will be completed prior to 12/31/26.
- I, the Applicant, certify that I will provide relevant documentation, including all invoices, necessary for reporting obligations in support of all project expenditures utilizing these Program Grant funds, if applicable or requested by U.S. Treasury, New Jersey Department of Community Affairs and/or New Jersey Economic Development Authority.
- I, the Applicant, have provided in this application an explanation of how this capital expenditure is the most appropriate to address the economic harms caused by COVID.
- I, the Applicant, acknowledge that all Project costs and Program Grant funding are subject to federal Duplication of Benefits requirements and a cost reasonableness analysis that will be undertaken by the New Jersey Economic Development Authority prior to Project approval.
- I, the Applicant, acknowledge that Projects that are developed/redeveloped with the ART Grant Program funding may be subject to compliance with New Jersey prevailing wage law and the Public Works Contractor Registration Act (N.J.S.A. 34:11-56.48 et seq.) and compliance with other labor standards requirements, as well as other state requirements which may be applicable depending on Project details and funding amounts.

*This page will only be visible if the individual filling out the application is the authorized representative.

Electronic Signature

Electronic Signature

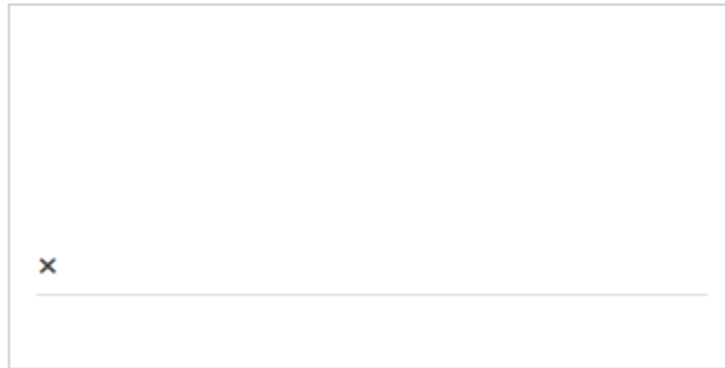
Pursuant to written policy, the New Jersey Economic Development Authority allows documents to be signed electronically and hereby agrees to be bound by such electronic signatures. Please confirm that you, as a signatory to this document, also agree to be bound by electronic signatures.

I agree to be bound by electronic signatures

Full Name *

Title *

Signature *



Date *

3/11/2024

[draw](#) type

Application Submission

Application Submission

Thank you for your interest in the Activation, Revitalization, and Transformation (A.R.T.) Program - Phase II.

If you are ready to submit this application to the NJEDA for review, please click the Submit button.

If you would like to make any changes to the application at this point, please click the Back button.

If there is any additional supporting documentation that you would like to provide, please use the upload button below.

or drag files here.

Full Name *

Title *

Date *

9/4/2024

CLICK SUBMIT