

# Excelsior Jobs Program

1. **Question Ref:** Q\_41  
**Question Type:** Threshold

Does this project predominantly involve any of the following activities at the project location: (1) scientific research and development that will create at least 10 net new jobs in NYS; (2) software development that will create at least 10 net new jobs in NYS; (3) agricultural production or agricultural support (e.g. soil preparation, planting, harvesting and management, on a contract or fee basis) that will create at least 10 net new jobs in NYS; (4) manufacturing that will create at least 25 net new jobs in NYS; (5) financial services data center or financial services customer back office operations that will create at least 100 net new jobs in NYS; (6) a back office operation that includes customer service, information technology and data processing, human resources, accounting and related administrative functions and will create at least 150 net new jobs in NYS; (7) a distribution center involving processing, repackaging, and/or movement of finished or semi-finished goods to retail locations across a multi-state area that will create at least 150 net new jobs in NYS; (8) the creation of at least 300 net new jobs in NYS and the investment of at least \$6 million at the project locations; (9) any of the above mentioned activities by a business that employs at least 50 persons in NYS?

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

## HELP SECTION

If the project activity does not meet one of the definitions as outlined, you are not eligible to participate in the Excelsior Jobs Program.

Refer to Section 352 of Article 17 of the Economic Development Law.  
[http://esd.ny.gov/BusinessPrograms/Data/Excelsior/050211\\_ExcelsiorStatutoryProvisions.pdf](http://esd.ny.gov/BusinessPrograms/Data/Excelsior/050211_ExcelsiorStatutoryProvisions.pdf)

2. **Question Ref:** Q\_928  
**Question Type:** Basic

**Project Street Address:** if the project does not have a definite street address, please skip to "Project without a Street Address" below.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

3. **Question Ref:** Q\_929  
**Question Type:** Basic

Current State of Project Development (i.e. planning, preliminary engineering, final design, etc)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

4. **Question Ref:** Q\_930  
**Question Type:** Basic

Explain what makes your project a regional economic priority - for example creates jobs, economic investment, sustainability and community revitalization, etc.

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

5. **Question Ref:** Q\_970  
**Question Type:** Basic

Additional Project Contact Last Name

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

6. **Question Ref:** Q\_971  
**Question Type:** Basic

Project Without a Street Address: please enter a description of the project location. Include project starting/ending street addresses, cities & zip codes if applicable.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

7. **Question Ref:** Q\_972  
**Question Type:** Basic

Project county or counties.

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

8. **Question Ref:** Q\_975  
**Question Type:** Basic

Estimated Project Timeline: including project start/completion dates, estimates for design, permitting and construction or other major steps.

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

9. **Question Ref:** Q\_976  
**Question Type:** Basic

Statement of Need

**Required:** Yes  
**Answer Type:** Long Answer

**Choice Options:**  
**Default Answer:**

## HELP SECTION

Provide a brief summary of the need for the project in the geographic area proposed, the project's financing needs, including funding gaps and, where applicable, describe the additional short and long term jobs that will be created through the development of the proposed project.

10. **Question Ref:** Q\_1034  
**Question Type:** Basic

Project Zip Code. (please use Zip+4 if known)

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

11. **Question Ref:** Q\_1049  
**Question Type:** Basic

Contact Last Name

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

12. **Question Ref:** Q\_1050  
**Question Type:** Basic

Contact Title

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

13. **Question Ref:** Q\_1051  
**Question Type:** Basic

Additional Contact Title

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

14. **Question Ref:** Q\_1052  
**Question Type:** Basic

Additional Project Contact First Name

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

15. **Question Ref:** Q\_184  
**Question Type:** Basic

NYS Assembly District(s) where the project is located. (please enter a number between 1 and 150 that represents your Assembly District)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:** 1,150  
**Default Answer:**

HELP SECTION

Click [HERE](#) to determine your Assembly district.

16. **Question Ref:** Q\_190  
**Question Type:** Basic

NY Senate District(s) where the project is located. (please enter a number between 1 and 62 that represents your Senate District)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:** 1,62  
**Default Answer:**

HELP SECTION

Click [HERE](#) to determine your Senate district.

17. **Optional Question Header:**

**Applicant Information**

**Question Ref:** Q\_546  
**Question Type:** Basic

Legal Name of Applicant

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

18. **Question Ref:** Q\_547  
**Question Type:** Basic

Contact First Name

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

19. **Question Ref:** Q\_549  
**Question Type:** Basic

Type of Applicant (select all that apply)

**Required:** Yes

**Answer Type:** Multi Choice

**Choice Options:** Federal, State, County, City, Town, Village, Tribal, School District, County or Town Improvement District, District Corporation, For-Profit, Not-For-Profit, Individual, Business Corporation, IDA, LDC,LLC,LLP, Public Authority, Public Benefit Corp, Sole-Proprietorship. HDFC,BID, LP

**Default Answer:**

20. **Question Ref:** Q\_550

**Question Type:** Basic

If you are a DBA, what is your DBA name?

**Required:** No

**Answer Type:** Short Answer

**Choice Options:**

**Default Answer:**

21. **Question Ref:** Q\_551

**Question Type:** Basic

Applicant Street Address

**Required:** Yes

**Answer Type:** Short Answer

**Choice Options:**

**Default Answer:**

22. **Question Ref:** Q\_552

**Question Type:** Basic

Applicant City

**Required:** Yes

**Answer Type:** Short Answer

**Choice Options:**

**Default Answer:**

23. **Question Ref:** Q\_553  
**Question Type:** Basic

Applicant State

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

24. **Question Ref:** Q\_554  
**Question Type:** Basic

Applicant Zip Code. (please use Zip+4 if known)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

25. **Question Ref:** Q\_555  
**Question Type:** Basic

Applicant Email Address

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

26. **Question Ref:** Q\_556  
**Question Type:** Basic

Select an applicant ID type from the list below that you normally use to identify your organization on application forms.

**Required:** Yes  
**Answer Type:** Single Choice

**Choice Options:** Charity Reg #, Duns Number, Federal Tax ID Number, NYS Unemployment Insurance Tax Number, Social Security Number  
**Default Answer:**

## HELP SECTION

Applicants will be required to provide the specified ID number upon request by the funding agencies.

27. **Question Ref:** Q\_561  
**Question Type:** Basic

Additional Contact Email Address

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

28. **Question Ref:** Q\_562  
**Question Type:** Basic

Additional Contact Phone Number. (please include area code)

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

29. **Question Ref:** Q\_565  
**Question Type:** Basic

Project City

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

30. **Question Ref:** Q\_568  
**Question Type:** Basic

Project State

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

31. **Question Ref:** Q\_572  
**Question Type:** Basic

Project Latitude

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

[Click HERE to determine Latitude](#)

32. **Question Ref:** Q\_573  
**Question Type:** Basic

Project Longitude

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

[Click HERE to determine Longitude](#)

33. **Optional Question Header:**

**Project Description**

**Question Ref:** Q\_575

**Question Type:** Basic

Project Description. Concisely describe the project, indicating the location, what will be planned, designed, and/or constructed, the issues/opportunities to be addressed, and expected outcomes and deliverables. Additional details will be collected later in the application process.

**Required:** Yes

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

34. **Question Ref:** Q\_580

**Question Type:** Basic

Status of Permits

**Required:** Yes

**Answer Type:** Single Choice

**Choice Options:** Complete, Incomplete, Pending, N/A

**Default Answer:**

35. **Question Ref:** Q\_582

**Question Type:** Basic

Estimated Service Life

**Required:** Yes

**Answer Type:** Short Answer

**Choice Options:**

**Default Answer:**

HELP SECTION

List the estimated service life/useful life of capital expenditure that is the focus of this request.

36. **Question Ref:** Q\_651  
**Question Type:** Basic

Applicant Telephone Number, (please include area code)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

37. **Question Ref:** Q\_1603  
**Question Type:** Basic

Was this project or a phase of this project awarded funding in CFA Round I ?

**Required:** Yes  
**Answer Type:**  
**Choice Options:**  
**Default Answer:**

38. **Question Ref:** Q\_1604  
**Question Type:** Basic

If yes, with which agency(s)?

**Required:** No  
**Answer Type:**  
**Choice Options:** Agriculture and Markets, Empire State Development, Canals, Dept of State, Housing & Community Renewal, Parks & Recreation, Transportation, Environmental Facilities Corp, Dept of Labor, NYSERDA  
**Default Answer:**

39. **Question Ref:** Q\_1605  
**Question Type:** Basic

If funding was received in a prior round of the CFA, indicate the amount of funding received.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

40. **Question Ref:** Q\_1055  
**Question Type:** Attachment

Project review pursuant to the State Environmental Quality Review Act (SEQRA) must be completed prior to the award of any state funds. For projects classified as Type I or Unlisted actions, submit a short or long Environmental Assessment Form. See "View Help" for links to forms.

**Required:** No  
**Answer Type:** Attachment  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

Information and forms can be found at <http://www.dec.ny.gov/permits/357.html> and <http://www.dec.ny.gov/permits/6191.html> . If you are a not-for-profit, please complete and attach the following form:  
<http://nysparks.com/grants/documents/cfa/EMBFormNFPGrants.pdf>

41. **Question Ref:** Q\_1057  
**Question Type:** Attachment

If review of the project has been completed pursuant to State Environmental Quality Review Act (SEQRA), please submit the Negative Declaration or Findings Statement.

**Required:** No  
**Answer Type:** Attachment  
**Choice Options:**  
**Default Answer:**

42. **Optional Question Header:**

**Required Supporting Documentation**

**Question Ref:** Q\_1337

**Question Type:** Attachment

For privately owned companies, IDAs, not-for-profits, educational institutions, start-ups, municipalities, or any business organization other than publicly traded companies, provide: (a) Three years of historical financials; (b) If most recent financials are over 180 days old, add the most recent interim statements, certified by a company officer; (c) Organizational chart and/or description of ownership structure, including the percentage of ownership structure by each individual entity. If the company is a parent, subsidiary and/or affiliate of another company, please provide a description. (d) Additional financial information may be requested.

**Required:** No

**Answer Type:**

**Choice Options:**

**Default Answer:**

HELP SECTION

Financial statements should be audited or reviewed. If the statements are only compiled, they must be accompanied by copies of signed Federal tax returns (3 yrs). Source of financial statements: financial statements should be provided by the Parent company of the grantee (50% or greater ownership) unless the grantee prepares separate audited or reviewed financial statements or files separate tax returns from the parent.

For information about this requirement, contact your local ESD Regional Office.

<http://esd.ny.gov/RegionalOverviews.html>

43. **Question Ref:** Q\_1338

**Question Type:** Attachment

For Start-up companies, in addition to the documents listed above provide: -  
Financial projections (5 years) - Personal financial statements from a personal guarantor(s) of the start-up company - Principal resumes

**Required:** No  
**Answer Type:**  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

For information about this requirement, contact your local ESD Regional Office.  
<http://esd.ny.gov/RegionalOverviews.html>.

44. **Question Ref:** Q\_1450  
**Question Type:** Standard Question

Will the proposed project result in the creation of construction jobs? If so, estimate the number of construction jobs to be created.

Enter zero if not applicable.

**Required:** Yes  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

45. **Question Ref:** Q\_1459  
**Question Type:** Standard Question

Will the proposed project directly or indirectly result in the creation of permanent jobs? If so, estimate the number of permanent full-time equivalent jobs that will be created.

Enter zero if not applicable.

**Required:** Yes  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

46. **Question Ref:** Q\_1507  
**Question Type:** Standard Question

Has the company/applicant ever received prior ESD funding? Y/N. If "Yes", describe each project, the type of assistance received, amount and status of the project.

**Required:** Yes  
**Answer Type:**  
**Choice Options:**  
**Default Answer:**

47. **Question Ref:** Q\_1414  
**Question Type:** Standard Question

Is the applicant a publicly traded company? Indicate Y/N. If "Yes", provide the link to the web page or website that lists the company's financial statements.

For applicants to Environmental Investment Program/Capital, click "View Help" for information.

**Required:** Yes  
**Answer Type:** Yes/No  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

For Environmental Investment Program (EIP)/Capital projects, answer questions for the company (usually called "the co-implementer") that will implement the project and benefit from the funding, if approved.

48. **Question Ref:** Q\_1142  
**Question Type:** Standard Question

Indicate the Primary North American Industrial Classification System (NAICS) Code at the PROJECT LOCATION.

**Required:** Yes  
**Answer Type:**  
**Choice Options:**  
**Default Answer:**

HELP SECTION

<http://www.census.gov/cgi-bin/sssd/naics/naicsrch?chart=2007>

49. **Question Ref:** Q\_1410  
**Question Type:** Standard Question

Briefly describe what the project involves in terms of product(s) or services(s) that will be provided at the project location.

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

50. **Question Ref:** Q\_1409  
**Question Type:** Standard Question

What is the first project year? (e.g. the year equipment will be ordered or when first expenditures are expected to be made)

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

51. **Question Ref:** Q\_1398  
**Question Type:** Standard Question

Investment Year 1: Provide a breakdown of qualified investments that will be made at the project location in Year 1. List by category, including: Building

acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

52. **Question Ref:** Q\_1396

**Question Type:** Standard Question

Investment Year 2: Provide a breakdown of qualified investments that will be made at the project location in Year 2. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

53. **Question Ref:** Q\_1395

**Question Type:** Standard Question

Investment Year 3: Provide a breakdown of qualified investments that will be made at the project location in Year 3. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

54. **Question Ref:** Q\_1394

**Question Type:** Standard Question

Investment Year 4: Provide a breakdown of qualified investments that will be made at the project location in Year 4. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

55. **Question Ref:** Q\_1393

**Question Type:** Standard Question

Investment Year 5: Provide a breakdown of qualified investments that will be made at the project location in Year 5. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance.

56. **Question Ref:** Q\_1224

**Question Type:** Standard Question

Have any expenditures for the project been made prior to the date of this application? If yes, explain.

**Required:** Yes

**Answer Type:** Yes/No

**Choice Options:**

**Default Answer:**

#### HELP SECTION

For assistance and information regarding this requirement contact your local Empire State Development Regional Office. <http://esd.ny.gov/RegionalOverviews.html>

57. **Question Ref:** Q\_1197

**Question Type:** Standard Question

Indicate how many existing full-time equivalent jobs the applicant and its related entities employ in all NYS LOCATIONS.

**Required:** No

**Answer Type:**

**Choice Options:** 0,

**Default Answer:**

## HELP SECTION

A Full-time equivalent job equals any combination of two or more part-time jobs that, when combined together, constitute the equivalent of a job of at least 35 hours per week.

Related entities generally include:

- Two corporations that are members of the same controlled group of corporations determined by applying a 10% ownership test
- A corporation and an individual who owns directly or indirectly more than 10% of the value of the outstanding stock of the corporation
- A corporation and a partnership if the same persons own over 10% in value of the outstanding stock of the corporation and more than 10% of the capital interest or the profits interest in the partnership
- Two S Corporations if the same persons own more than 10% in value of the outstanding stock of each corporation
- A partnership and a person who owns directly or indirectly more than 10% of the capital or profits of the partnership
- Two partnerships if the same persons directly or indirectly own more than 10% of the capital or profits of each

For more detailed information, go to:

[http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465\(B\)\(3\)\(C\)-RelatedPerson.pdf](http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465(B)(3)(C)-RelatedPerson.pdf)

58. **Question Ref:** Q\_1263

**Question Type:** Standard Question

Indicate the average annual wage for existing full-time equivalent employees the applicant and its related entities employ in all NYS locations as of the date this application is finalized.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

59. **Question Ref:** Q\_1365  
**Question Type:** Standard Question

Indicate how many of the total existing full-time equivalent employees in New York State are contract employees.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

HELP SECTION

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A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

60. **Question Ref:** Q\_1262  
**Question Type:** Standard Question

Indicate how many existing full-time equivalent jobs the applicant and its related entities employ in all the PROJECT LOCATION(S).

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

HELP SECTION

NOTE: A full-time equivalent job equals any combination of two or more part-time jobs that, when combined together, constitute the equivalent of a job of at least 35 hours per week. Please note if any of these positions are contract employees and if so, how many of the total are contract employees.

Related entities generally includes below.

- Two corporations that are members of the same controlled group of corporations determined by applying a 10% ownership test
- A corporation and an individual who owns directly or indirectly more than 10% of the value of the outstanding stock of the corporation
- A corporation and a partnership if the same persons own over 10% in value of the outstanding stock of the corporation and more than 10% of the capital interest or the profits interest in the partnership
- Two S corporations if the same persons own more than 10% in value of the outstanding stock of each corporation
- A partnership and a person who owns directly or indirectly more than 10% of the capital or profits of the partnership
- Two partnerships if the same persons directly or indirectly own more than 10% of the capital or profits of each

For more detailed information, go to

[http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465\(B\)\(3\)\(C\)-RelatedPerson.pdf](http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465(B)(3)(C)-RelatedPerson.pdf)

61. **Question Ref:** Q\_1186

**Question Type:** Standard Question

Indicate the average annual wage for the employees at the Project Location as of the date this application is finalized.

**Required:** No

**Answer Type:**

**Choice Options:** 0,

**Default Answer:**

62. **Question Ref:** Q\_1196  
**Question Type:** Standard Question

How many of the existing jobs at the project location(s) are at risk if the project does not go forward.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

HELP SECTION

"**At Risk**" shall mean a permanent Full-time employee position currently located in New York State that is found by ESD to be at risk of being lost or moved out of state based on compelling information provided by the applicant.

63. **Question Ref:** Q\_1366  
**Question Type:** Standard Question

Indicate how many of the total existing full-time equivalent employees at the Project Location are contract employees.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

HELP SECTION

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

64. **Question Ref:** Q\_1189  
**Question Type:** Standard Question

Net New Jobs Created Year 1: Indicate the total number of net new jobs at the project location for Year 1.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

65. **Question Ref:** Q\_1392  
**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 1. Please note if any of these positions are contract employees and list separately.

**Required:** No  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

66. **Question Ref:** Q\_1190

**Question Type:** Standard Question

Net New Jobs Created Year 2: Indicate the total number of net new jobs at the project location for Year 2.

**Required:** No

**Answer Type:**

**Choice Options:** 0,

**Default Answer:**

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

67. **Question Ref:** Q\_1391

**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 2. Please note if any of these positions are contract employees and list separately.

**Required:** No

**Answer Type:** Long Answer

**Choice Options:**

**Default Answer:**

#### HELP SECTION

**"Net new jobs"** means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

68. **Question Ref:** Q\_1191  
**Question Type:** Standard Question

Net New Jobs Created Year 3: Indicate the total number of net new jobs at the project location for Year 3.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

#### HELP SECTION

**"Net new jobs"** means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

69. **Question Ref:** Q\_1390  
**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 3. Please note if any of these positions are contract employees and list separately.

**Required:** No  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

## HELP SECTION

**"Net new jobs"** means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

70. **Question Ref:** Q\_1192  
**Question Type:** Standard Question

Net New Jobs Created Year 4: Indicate the total number of net new jobs at the project location for Year 4.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

## HELP SECTION

**"Net new jobs"** means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

71. **Question Ref:** Q\_1389  
**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 4. Please note if any of these positions are contract employees and list separately.

**Required:** No  
**Answer Type:** Long Answer

**Choice Options:**  
**Default Answer:**

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

72. **Question Ref:** Q\_1193  
**Question Type:** Standard Question

Net New Jobs Created Year 5: Indicate the total number of net new jobs at the project location for Year 5.

**Required:** No  
**Answer Type:**  
**Choice Options:** 0,  
**Default Answer:**

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

73. **Question Ref:** Q\_1387  
**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 5. Please note if any of these positions are contract employees and list separately.

**Required:** No  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

## HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

74. **Question Ref:** Q\_1415  
**Question Type:** Standard Question

Indicate what the average percentage is of the applicants' total employees' gross wages paid in benefits (exclude mandated benefits such as Federal Insurance Contributions Act (FICA), Medicare tax, unemployment insurance or workers' compensation insurance).

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

75. **Question Ref:** Q\_1375  
**Question Type:** Standard Question

What percentage of the project's employees are residents of NYS?

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

76. **Question Ref:** Q\_1412  
**Question Type:** Standard Question

Do you conduct, or plan to conduct, research & development activities at this project location? Indicate Y/N. If "Y", please describe.

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

[http://www.taxalmanac.org/index.php/Internal\\_Revenue\\_Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec._41._Credit_for_increasing_research_activities)

77. **Question Ref:** Q\_1383  
**Question Type:** Standard Question

Indicate the R&D projected expenditures at the project location in Year 1.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

R&D projected expenditures are expenses that qualify under the federal R&D credit per IRC §41 and are attributed to activities conducted in NYS.

[http://www.taxalmanac.org/index.php/Internal\\_Revenue\\_Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec._41._Credit_for_increasing_research_activities)

78. **Question Ref:** Q\_1382  
**Question Type:** Standard Question

Indicate the R&D projected expenditures at the project location in Year 2.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

R&D projected expenditures are expenses that qualify under the federal R&D credit per IRC §41 and are attributed to activities conducted in NYS.

[http://www.taxalmanac.org/index.php/Internal\\_Revenue\\_Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec.41.Credit_for_increasing_research_activities)

79. **Question Ref:** Q\_1381  
**Question Type:** Standard Question

Indicate the R&D projected expenditures at the project location in Year 3.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

#### HELP SECTION

R&D projected expenditures are expenses that qualify under the federal R&D credit per IRC §41 and are attributed to activities conducted in NYS.

[http://www.taxalmanac.org/index.php/Internal\\_Revenue\\_Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec.41.Credit_for_increasing_research_activities)

80. **Question Ref:** Q\_1380  
**Question Type:** Standard Question

Indicate the R&D projected expenditures at the project location in Year 4.

**Required:** No  
**Answer Type:** Short Answer

**Choice Options:**  
**Default Answer:**

HELP SECTION

R&D projected expenditures are expenses that qualify under the federal R&D credit per IRC §41 and are attributed to activities conducted in NYS.

[http://www.taxalmanac.org/index.php/Internal Revenue Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec._41._Credit_for_increasing_research_activities)

81. **Question Ref:** Q\_1379  
**Question Type:** Standard Question

Indicate the R&D projected expenditures at the project location in Year 5.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

R&D projected expenditures are expenses that qualify under the federal R&D credit per IRC §41 and are attributed to activities conducted in NYS.

[http://www.taxalmanac.org/index.php/Internal Revenue Code:Sec. 41. Credit for increasing research activities](http://www.taxalmanac.org/index.php/Internal_Revenue_Code:Sec._41._Credit_for_increasing_research_activities)

82. **Question Ref:** Q\_1367  
**Question Type:** Standard Question

Does, or will, the applicant own the property(ies) or have a lease specifying that it will pay the property taxes to the taxing jurisdiction for this project location(s)?

**Required:** Yes  
**Answer Type:** Single Choice  
**Choice Options:** Yes, No, N/A  
**Default Answer:**

83. **Question Ref:** Q\_1368  
**Question Type:** Standard Question

Please indicate the current annual real property taxes or PILOT payments.

**Required:** No  
**Answer Type:** Short Answer  
**Choice Options:** 0,  
**Default Answer:**

HELP SECTION

PILOT: Payment In Lieu Of Taxes

84. **Question Ref:** Q\_1384  
**Question Type:** Standard Question

Estimate the future annual real property taxes or annual PILOT payments based on the investments in the property. What are the annual savings on real property taxes resulting from a PILOT agreement based on the investments in the property?

**Required:** No  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:**

HELP SECTION

PILOT: Payment In Lieu Of Taxes

## 85. Optional Question Header:

### Agreements - For Applicants To the Excelsior Jobs Program

**Question Ref:** Q\_183

**Question Type:** Certification

As the preparer of this application, I attest to being an authorized representative of the applicant and, by placing my name in the box below, I hereby: 1. Agree to allow the Department of Taxation and Finance to share tax information with the Department of Economic Development. However, any information shared as a result of this agreement shall not be available for disclosure or inspection under the State Freedom of Information law; 2. Agree to allow the Department of Labor to share tax and employer information with the Department of Economic Development. However, any information shared as a result of this agreement shall not be available for disclosure or inspection under the State Freedom of Information Law; 3. Agree to disqualify for empire zone benefits at any location or locations that qualify for Excelsior Jobs Program benefits if admitted into the excelsior jobs program; 4. Allow the Department and its agents access to any and all books and records the Department of Economic Development may require to monitor compliance; 5. Provide to the Department of Economic Development, upon its request, the information outlined in Section 354 (e) of Article 17 of the Economic Development Law; 6. Provide a clear and detailed presentation of all related persons as defined in subparagraph (c) of paragraph 3 of subsection (b) of section 465 of the Internal Revenue Code to the applicant to assure the Department of Economic Development that the jobs indicated in this application are not being shifted within the State; 7. Certify, under penalty of perjury, that the applicant is in substantial compliance with all environmental, worker protection, and local, state and federal tax laws.

**Required:** Yes

**Answer Type:** Short Answer

**Choice Options:**

**Default Answer:**

HELP SECTION

see IRC SECTION 465 (B) (3) (C) – Related Person

[http://esd.ny.gov/BusinessPrograms/Data/Excelsior/050211\\_ExcelsiorStatutoryProvisions.pdf](http://esd.ny.gov/BusinessPrograms/Data/Excelsior/050211_ExcelsiorStatutoryProvisions.pdf)

86. **Question Ref:** Q\_1038  
**Question Type:** Certification

By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:**

87. **Optional Question Header:**

**Funding Sources (Enter dollar amounts below)**

**Question Ref:** Q\_657  
**Question Type:** Budget

Total Project Cost

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

88. **Question Ref:** Q\_659  
**Question Type:** Budget

Amount provided directly by applicant toward project

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

89. **Question Ref:** Q\_660  
**Question Type:** Budget

State sources committed to project

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

#### HELP SECTION

For each source, list: program name, type of assistance (loan, grant, interest rate subsidy, etc), and amount of assistance. For loans, list interest rate and term.

90. **Question Ref:** Q\_662  
**Question Type:** Budget

Federal sources committed to project

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

91. **Question Ref:** Q\_664  
**Question Type:** Budget

Local (municipal) sources committed to project, if different than applicant.

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

92. **Question Ref:** Q\_665  
**Question Type:** Budget

Private sources committed to project

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

#### HELP SECTION

For each source, list: program name, type of assistance (loan, grant, interest rate subsidy, bond financing, sales tax exemption on construction materials and/or non-manufacturing machinery or equipment, mortgage recording tax waiver, etc), and amount of assistance. For loan and bond financing, list interest rate and term.

93. **Question Ref:** Q\_668  
**Question Type:** Budget

Not-for-Profit/foundation funding committed to project

**Required:** Yes  
**Answer Type:** Short Answer  
**Choice Options:**  
**Default Answer:** 0.00

94. **Optional Question Header:**

#### Expenditure Activities (Enter dollar amounts below)

**Question Ref:** Q\_670  
**Question Type:** Budget

Planning

**Required:** Yes  
**Answer Type:** Long Answer

**Choice Options:**  
**Default Answer:** 0.00

95. **Question Ref:** Q\_672  
**Question Type:** Budget

Design

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

96. **Question Ref:** Q\_674  
**Question Type:** Budget

Construction/Renovation

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

97. **Question Ref:** Q\_676  
**Question Type:** Budget

Property Acquisition

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

98. **Question Ref:** Q\_684  
**Question Type:** Budget

Equipment and Machinery

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

#### HELP SECTION

This category is for the purchase of equipment and machinery directly by the applicant. List each piece of equipment/machinery to be purchased outlining the purpose of its use with an estimated cost. Note that equipment/machinery rental and the value of the use or donation of equipment/machinery should be listed in Other.

99. **Question Ref:** Q\_688  
**Question Type:** Budget

Other

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

#### HELP SECTION

State the cost and describe briefly budget items that do not fit in the categories above  
For actual costs to be incurred list the type of cost, purpose and total cost.  
For Volunteer Services – provide a generalized description and the total value.  
For Donated Professional Services - indicate the service being provided and the total value.  
For Donated Supplies and Materials – indicate the supplies and materials being provided and the total value  
For Equipment Usage or Donated Equipment - indicate the purpose of its use and the total value.

100. **Question Ref:** Q\_719  
**Question Type:** Budget

Furniture and Fixtures

**Required:** Yes  
**Answer Type:** Long Answer  
**Choice Options:**  
**Default Answer:** 0.00

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