

Maryland Job Creation Tax Credit Application for Preliminary Certification

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General Information About the Applicant:

1) Business Name: _____	
2) Business Address: _____ _____	
3(a) FEIN: _____	3(b) UI Number _____
4) Type of Entity (corp., LLC, etc.): _____	
5(a) Business NAICS Code: _____	5(b) Facility NAICS Code (if different): _____
6) Facility Address: _____ _____	

Project Information

7) Intent Date: _____	8) Effective Date of Start-up or Expansion: _____					
9) Located in a JCTC PFA (please check all that apply):						
<input type="checkbox"/> State Enterprise Zone	<input type="checkbox"/> Federal Empowerment Zone	<input type="checkbox"/> Inside the I-495 or I-695 Beltway				
<input type="checkbox"/> DHCD Designated Neighborhood	<input type="checkbox"/> Incorporated Municipality	<input type="checkbox"/> Growth area designated by the County for the purposes of the JCTC				
10) Projected Job and Wage Information:						
Year						Total
Qualified Positions Per Year						
Aggregate Annual Wages (\$)						
11) All Projected Jobs Pay at Least 150% of Federal Minimum Wage: Yes No						
12) Type of activity business is "primarily engaged in" at business facility (check all that apply)						
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Forestry/Fishing	<input type="checkbox"/> Biotechnology				
<input type="checkbox"/> Mining	<input type="checkbox"/> Research	<input type="checkbox"/> Central Financial Services				
<input type="checkbox"/> Transportation	<input type="checkbox"/> Development	<input type="checkbox"/> Central Real Estate Services				
<input type="checkbox"/> Communications	<input type="checkbox"/> Testing	<input type="checkbox"/> Central Insurance Services				
<input type="checkbox"/> Public Utility	<input type="checkbox"/> Computer Related Services	<input type="checkbox"/> Company Headquarters				
<input type="checkbox"/> Warehousing/Distribution	<input type="checkbox"/> Computer Programming	<input type="checkbox"/> Central Administrative Offices				
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Data Processing	<input type="checkbox"/> Business Services (in a JCTC PFA)				
<input type="checkbox"/> Operations of entertainment, recreation, cultural or tourism related activities in a multiuse facility located within a revitalization area if the facility generates a minimum of 1,000 new full-time equivalent filled positions in a 24-month period						
13) Description of Activities Performed and Products Produced at Facility: _____						

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Collection of Personal Information: In accordance with Executive Order 01.01.1983.18, the Department of Business and Economic Development (“DBED”) advises you as follows: Certain personal information requested by the Department is necessary in determining your eligibility. Failure to disclose this information may result in the denial of one of these benefits or services. Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of the Department and other public officials for purposes directly connected with administration of the program for which its use is intended. Such information is routinely shared with State, federal or local government agencies. You have the right to inspect, amend or correct personal records in accordance with the Maryland Public Information Act.

Publicity: The applicant agrees that the Department of Business and Economic Development may issue press releases and otherwise publicize information about the applicant’s employment levels before and after its qualification for the Job Creation Tax Credit.

Employment and Wage Data: Periodically the Office of Labor Market Analysis and Information of the Maryland Department of Labor, Licensing and Regulation (“DLLR”), in cooperation with the U. S. Department of Labor, Bureau of Labor Statistics (“BLS”), collects employment and wage data from you and other employers who conduct business in the State of Maryland. This information, collected on the Multiple Worksite Report (BLS 3020) and the Annual Refiling Survey (BLS 3023), is kept confidential and may only be used by the Department of Business and Economic Development (“DBED”) with your written consent. DBED is requesting disclosure of this information in order to evaluate the effectiveness of DBED economic development programs and their impact on your company’s employment level.

Consent: I give consent to DLLR to release the information that our company provides on the BLS 3023 form and the BLS 3020 form to DBED, solely for the purpose of evaluating the effectiveness of the DBED economic development programs and their impact on our company’s employment level.

Verification: I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing paper are true.

Date

Signature

(Type or Print) Name and Title

Business Name

For further information contact:	
Name:	Title:
Phone: ()	Fax: ()

Please return this form to: Mark A. Vulcan
Director, Tax Incentives
Maryland Job Creation Tax Credit Program
Maryland Department of Business and Economic Development
401 East Pratt Street, 17th floor
Baltimore, Maryland 21202

Maryland Job Creation Tax Credit Instructions for the Preliminary Application

Below are instructions for filling out the Maryland Job Creation Tax Credit (JCTC) Preliminary Application. The instructions are guidelines. You may download the JCTC statute and regulations from the Maryland Department of Business and Economic Development's (DBED) website at: <http://www.choosemaryland.org/businessservices/taxincentives/jobcreation.html>

General Information:

- 1) Provide the full legal name of the entity, as it should appear on the certificate. If Maryland law requires the business entity to register with the State Department of Assessments and Taxation (SDAT), this name must be registered as a business entity in good standing. You may check the status of your business entity at: http://sdatcert3.resiusa.org/ucc-charter/CharterSearch_f.asp
- 2) Provide the address of the business entity. This is the address the certificate will be mailed to unless otherwise noted on the application.
- 3) Provide the Federal Employee ID Number and unemployment insurance number.
- 4) Provide the type of business entity, i.e. Corporation, Limited Liability Corporation, Sole Proprietorship.
- 5) Provide the North American Industrial Classification Code (NAICS) of the business entity and if different, of the facility that will be creating the new positions. More information on NAICS codes can be found at: <http://www.census.gov/epcd/www/naicstab.htm>
- 6) Provide the address of the facility that will be creating the new positions. The expansion or establishment of a business must be at a single location in the state. A single business entity may have more than one eligible location, provided that each is certified and meets the requirements of the statute.

Project Information

- 7) Provide the date that the business declared its intent to claim the JCTC. A business may only count new qualified positions created after the intent date.
- 8) Provide the effective date of the start-up or expansion. This is the date that the business begins creating new qualified positions.
- 9) If you are located in one or more JCTC Priority Funding Areas (PFA), please check all areas that apply. If you are unsure if your address is in a JCTC PFA, contact Stacy Kubofcik, Tax Incentive Group, Department of Business and Economic Development at 410-767-4980.
- 10) In the chart, provide the number of "qualified positions" the business projects to create at the facility, the annual wages of those positions and the year in which they will be created. A qualified position is a full-time position, paying at least 150 percent of the prevailing federal minimum wage. The business entity must create a minimum number of qualified positions within any 24-month period (after the intent date). The minimums are: a) 60 new qualified positions; b) 25 new qualified positions in a JCTC PFA; c) 30-59 "high wage" positions where the aggregate annual wages of the positions exceeds 60 multiplied by the State's average annual salary.
- 11) Verify that all new qualified positions pay at least 150 percent of the prevailing federal minimum wage. Federal Minimum Wage will increase to \$5.85/hr on July 25, 2007 and one year later to \$6.55 in 2008 and to \$7.25 in 2009. Businesses will have to pay at least \$8.78/hr after July 25, 2007; \$9.83 in 2008 and \$10.88 in 2009.
- 12) To qualify a business must be primarily engaged in a qualified activity at the facility. This means at least 51 percent of its business must be in one or more of the activities listed. Check all activities that apply. A business entity that is primarily engaged in business services must be located in a JCTC PFA to qualify.
- 13) Provide a written description of the activities performed and products produced at the facility.

Attach a copy of the JCTC/ One Maryland Employment Affidavit to this application.

Attach a copy of "Exhibit A (Collection of Statistical Data About the Applicant)". Exhibit A is voluntary and does not affect the eligibility of the applicant.

Exhibit A (Collection of Statistical Data About the Applicant)

This form is for gathering statistical data only. The information provided in this form has no bearing on the Applicant's eligibility for the tax credit applied for and will not be a part of the application approval process. The furnishing of this information is voluntary; failure to do so will have no effect on the approval of the tax credit application.

If the Applicant is an individual:

Is the Applicant Female? Yes_____ No _____

Is the Applicant of Hispanic or Latino origin? Yes_____ No_____

Which of the following categories describes the Applicant (multiracial respondents may select all applicable racial categories):

American Indian or Alaska Native_____

Asian_____

Black or African American_____

Native Hawaiian or other Pacific Islander_____

White_____

If the Applicant is a business organization:

If the Applicant is a business that is owned and controlled primarily by individuals who are identified in any of the following categories, please check all the categories that apply:

Female_____

Of Hispanic or Latino origin_____

Asian_____

American Indian or Alaska Native_____

Black or African American_____

Native Hawaiian or other Pacific Islander_____

White_____

Is the Applicant a State/Federal/Other certified Minority Business Enterprise?

Yes___ No___

If yes, please provide your:

State MBE certification number:_____

Federal 8(a)/SDB certification number:_____

Identify who the other issuer is and the other certification number: _____