

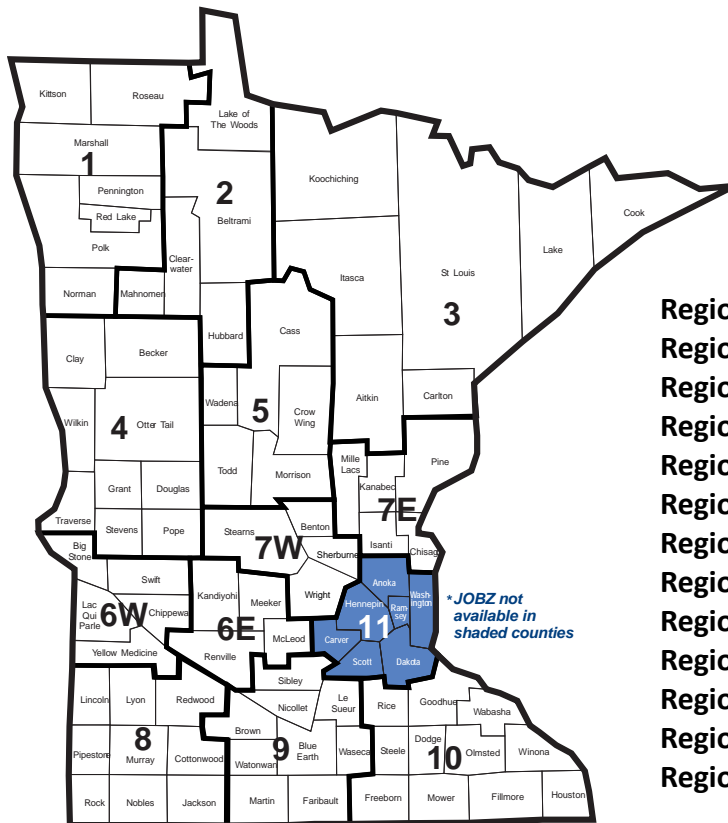
**JOB OPPORTUNITY BUILDING ZONE (JOBZ)
PROGRAM APPLICATION**

APPLICATION PROCEDURES

The Job Opportunity Building Zone Program, or JOBZ, is a program that provides tax exemptions to qualified businesses in order to create jobs and stimulate economic development in distressed regions in Minnesota. JOBZ is intended for high-paying manufacturing businesses, although other businesses may be eligible.

In order to be eligible to receive JOBZ benefits, an application must be submitted and approved by the Department of Employment and Economic Development (DEED). The application and a step-by-step guide explaining the approval process is shown on the next page. Once you complete this application, submit it to the DEED Representative shown below who is responsible for the region or county in which the qualified business will be located.

[Click here for more information](#), or please contact:



Region	Representative	Phone
Region 1	Emily Johnson	651-259-7450
Region 2	Emily Johnson	651-259-7450
Region 3	Emily Johnson	651-259-7450
Region 4	Bart Bevins	651-259-7424
Region 5	Emily Johnson	651-259-7450
Region 6E	Brad Simenson	651-259-7428
Region 6W	Brad Simenson	651-259-7428
Region 7E	Carol Pressley	651-259-7427
Region 7W	Samantha DiMaggio	651-259-7426
Region 8	Brad Simenson	651-259-7428
Region 9	Samantha DiMaggio	651-259-7426
Region 10	Carol Pressley	651-259-7427

JOB OPPORTUNITY BUILDING ZONE (JOBZ) PROGRAM APPLICATION

COMPLETING THE JOBZ PROGRAM APPLICATION: STEP-BY-STEP INSTRUCTIONS

1. The business contacts the local community to express interest in the JOBZ program. The subzone administrator provides the business with general information related to JOBZ and makes a preliminary determination regarding whether the business meets those requirements and if the JOBZ program is the best fit for the project. Sub-zone administrators should also contact the DEED representative for the region or county in which the business is located.

During these discussions, other forms of assistance that could be used in place of or as a supplement for JOBZ should be explored. A statement will be required from the subzone administrator certifying that they have considered other forms of financial assistance common in economic development including at a minimum: tax abatement, tax increment financing, private financial assistance, additional DEED programs including the Minnesota Investment Fund, workforce development and training assistance, other technical or financial assistance, etc. In addition, the administrator must certify that JOBZ assistance is required on this project in lieu of, or in addition to, the additional forms of assistance for the project are needed.

2. The business and subzone administrator jointly complete this JOBZ Program Application and submit it to DEED. In addition to completing the required application, the following attachments must be attached:
 - JOBZ Benefit Calculator (business);
 - Map, plat, survey, etc. showing the location and boundaries of the JOBZ zone, as well as the footprint of the building(s) included in the JOBZ zone (local government); and
 - Other attachments described in Part III of this application.
3. DEED will consider the application based on the factors described in its State Register notice of October 6, 2008, and notify the local government whether it has been approved or denied. DEED will also draft a Business Subsidy Agreement (BSA), to be signed by the local government, the business applicant and DEED
4. If approved by DEED, an approval letter and a partially completed BSA will be sent to the local government. The local government should schedule a public hearing in order to consider the proposed project as described in the application.
5. If a zone modification is required, resolutions from the city, county and school board are also required and these resolutions should be forwarded to DEED.
6. If a JOBZ Relocation Agreement is necessary, the local government should notify DEED of the proposed project. DEED will draft the Relocation Agreement and forward it to the business for their signature. The business must then return it to DEED for signature by DEED's Commissioner.
7. After the BSA is signed by the local government, the business applicant, and DEED, DEED will notify the Department of Revenue as to the existence of the new BSA.
8. The business owner or subzone administrator must deliver a copy of the executed BSA to the local tax assessor, so that the property tax exclusion may be claimed.
9. The subzone administrator continues to provide assistance to the qualified business. This includes continuing reminders of the specific obligations in the Business Subsidy Agreement, particularly wage and job goals and notification that the wage floor requirements are adjusted annually. Both entities are responsible for reporting JOBZ progress and activity to DEED, the Department of Revenue and other officials as required.

JOB OPPORTUNITY BUILDING ZONE (JOBZ) PROGRAM APPLICATION

PART I – TO BE COMPLETED BY THE LOCAL GOVERNMENT

Local Government Name: _____ Date of Application: _____

Name of Contact/Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Parcel Identification Number: _____ Number of Acres: _____

1) This Business is a: new expanding relocating

*Relocating businesses are those that relocate existing employees or business functions from another Minnesota location, in whole or in part, to a JOBZ zone without replacing those employees or functions in the former location.

2) The business will move into: an existing building new construction

3) Is a zone modification required for this business? Yes No

If yes, does the city have sufficient JOBZ acres to swap within the city? Yes No

If no, do you have an agreement with another community to provide acres? Yes No

Provide community name: _____

List the parcel identification numbers being removed if a zone modification is required: _____

List the total number of acres being removed if a zone modification if required: _____

4) Is the Business current on state and local taxes? Yes No

5) Are there any outstanding liens against the business? Yes N

6) Explain the proposed sources and uses of funds for project:

	Private Debt	Equity	City	Other State Funds	Other (Explain)	TOTAL
Land Acquisition						
Building Construction						
Renovation of Existing Building						
Equipment Purchases						
Other						
TOTAL						

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JOBZ Program Application Certifications: Local Government Organization

I hereby certify that I am authorized to provide information regarding this community for this application and that such information is true and correct to the best of my knowledge.

I have assisted this business owner in completing this application and provided information regarding the JOBZ program to the business owner to the best of my ability. The information contained within this application, including attached exhibits, is true and correct under penalty of law.

I certify that other forms of financial assistance common in economic development were considered for this project including at a minimum: tax abatement, tax increment financing, private financial assistance, additional DEED programs including the Minnesota Investment Fund, workforce development and training assistance, other technical or financial assistance, etc

Local Economic Development Official

Date

Printed Name

Title

**JOB OPPORTUNITY BUILDING ZONE (JOBZ)
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PART II – TO BE COMPLETED BY THE BUSINESS APPLICANT

Business Name: _____

Name of Contact/Title: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Street address where JOBZ business will be located: _____

City: _____ State: _____ Zip: _____

NAICS Code: _____ Classification Name: _____

1. What date does the business expect to begin operations within the JOBZ zone? _____
2. What is the current number of employees in Minnesota: _____
3. What is the current number of employees the business has in the local government unit where the JOBZ project will occur: _____
4. If applicable, provide the number of current FTE jobs that will be relocated to the JOBZ zone: _____
5. List construction spending that you anticipate for this project:

Type of Construction	Cost	Projected Construction Dates:

6. List equipment that you anticipate purchasing for this project:

Type of Equipment	Cost	Projected Purchase Date

7. List the public infrastructure costs, if any associated with this project:

Type of Infrastructure	Cost	Projected Construction Dates:

8. List other public incentives or support being provided for this project:

Type of Incentive	Amount	Projected Date Provided:

**JOB OPPORTUNITY BUILDING ZONE (JOBZ)
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I hereby certify that I have been informed of other financing alternatives to the JOBZ program. I have determined that the JOBZ program is necessary to my business start-up, expansion or relocation and that without JOBZ that start-up, expansion or relocation would not happen to this extent.

I hereby certify that I participated directly in completing the JOBZ Benefit Calculator by providing information necessary to do so. The results of the Calculator contain my best estimate that the benefits listed are correct, subject to the performance of the Calculator mechanics. I understand, however, the JOBZ Benefit Calculator is an estimation tool and that the actual amount of benefits received by my company may be different.

I hereby certify that I have been made aware of the ongoing reporting requirements for the JOBZ program and I agree to provide the required information in a timely and complete manner.

I further hereby certify that all information that concerns my business contained within this Application, including attached exhibits, is true and correct, under penalty of law.

Signature Business Owner/Representative

Date

Printed Name

Title

JOB OPPORTUNITY BUILDING ZONE (JOBZ) PROGRAM APPLICATION

PART III – REQUIRED ATTACHMENTS

*Attach additional pages as needed.

ATTACHMENT A - [JOBZ Benefit Calculator](#) (to be completed by business). Attach all pages showing inputs as well as output.

ATTACHMENT B – Map, plat, survey, etc. showing the location and boundaries of the JOBZ zone, as well as the footprint of the building(s) included in the JOBZ zone.

ATTACHMENT C – Business Description – Briefly describe the business, major activities, products or services offered, etc. If available, please attach existing information (brochures, web links, etc.). Also describe the markets served by this business (i.e. local, regional, statewide, national, and global).

ATTACHMENT D – Project Description – Briefly describe the proposed project, including how this project will build on existing regional strengths or diversify the regional economy. Also describe why the project needs JOBZ (i.e. What funding gap would JOBZ fill?)

ATTACHMENT E – Business Competitors – Identify the business’ competitors within the city or county, the immediately adjacent counties, and in the state of Minnesota. Please include in this attachment the names of these competitors, and the city in which they are located. Attach additional pages as needed. ***For each competitor, please indicate how products/services and markets are different from yours.***

	Name of Competitor(s)	Location (City)
Local Community		
Adjacent Counties		
State of Minnesota		

ATTACHMENT F – New Jobs – List the number of new jobs to be created in the JOBZ zone. Include the position titles, the number of each position, their base wage per hour, the value of benefits not mandated by law per hour, their total compensation per hour and their projected date of employment. Please list the nature of the benefits being provided to the employees.

Position Title	Number of Positions	Projected Employment Date	Base Wage Per Hour	Value of Benefits not Mandated per hour	Total Compensation per hour