



## UEZ Business Certification System

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## UEZ Business Certification System

### Using These Instructions

The best way to use this user guide is to open the PDF file and keep it active on your computer desktop. As you work through the steps to complete and submit your UEZ Certification, Annual Report, or Recertification, you can refer back to these instructions for help. With the document open on your desktop, you can click any of the hyperlinks within the instructions to go to additional resources that will help you complete your UEZ submittal.

You may print these instructions if you prefer. The document is designed to be printed one-sided on letter-size paper.

It might also be helpful to keep the [UEZ website Forms and Information](#) page open while you use in the online UEZ Business Certification System. It's got links to UEZ and other NJ State information that could also be helpful.

**If you're really stuck**, remember that you can contact the UEZ Help Desk at (877) 913-6837 or [HelpDesk@dca.state.nj.us](mailto:HelpDesk@dca.state.nj.us) (be sure to put "UEZ" in the Subject of your email).

### Getting Started

You will need to go through **NJ Premier Business Services (PBS)** to use the UEZ Business Certification System. After you create an account in PBS (only ONCE) you can access the UEZ System. [Step-by-step instructions](#) for creating a PBS account can be found on the DCA UEZ website **Forms & Information** page. If you already have a PBS account, **do not create a new one**; just start with **Login to PBS**, below.

### Premier Business Services

After you have created your PBS account—

#### Login to PBS

On the Internet, go to [Premier Business Services](http://www16.state.nj.us/NJ_PREMIER_EBIZ/jsp/home.jsp) ([https://www16.state.nj.us/NJ\\_PREMIER\\_EBIZ/jsp/home.jsp](https://www16.state.nj.us/NJ_PREMIER_EBIZ/jsp/home.jsp)) and click the "Log on" button.

At the **My New Jersey** login screen, enter your **Log On ID** and **Password** and click the "Log on" button.

## Service Centers

At the **Premier Business Services** screen select [Urban Enterprise Zone](#)

You will be brought to the initial **UEZ Business Certification System** screen. (At this point you have left PBS.)

## How to Use the Online System

### **IMPORTANT – Save Your Work!**

As you use the UEZ Business Certification System, you should **Save** often. The System “times out” after 30 minutes of inactivity. If your computer system has an interruption (such as a power outage or loss of internet connection) or if you leave your workstation for over 30 minutes, the UEZ System will close and unsaved data will be lost. If you begin working on an application or report, you may **Save** it and come back to work on it later.

### **If you’ve made a mistake**

If you have submitted an application or report, and you realize that you need to change some of the information, contact the UEZ office immediately at (877) 913-6837. They can return your form to you electronically so you can modify and resubmit it.

## Consent to Release Tax Information

When you launch the UEZ Business Certification System, the first screen confirms that you give UEZ permission to search for your tax records in the “Clean File” (NJ Division of Taxation records).

Click the checkbox and move on to the next screen.

## Main Menu

To start an application or report in the UEZ Business Certification System (Certification Application, Annual Report, or Recertification Application), click on the **START A NEW APPLICATION** button

To continue working on a Certification Application, Annual Report, or Recertification Application that you started previously, click on the **CONTINUE COMPLETING AN APPLICATION** button

The system “knows” whether you are applying for Certification or whether your Annual Report or Recertification Application is due, and only allows you to complete and submit the appropriate application.

## NJ Tax ID Number

When you established your PBS account, you added at least one business. If your company has several UEZ locations, each of them must be added to PBS. The NJ Tax ID# for each business you added in PBS will be available in the pull-down list in this screen.

Select the desired NJ Tax ID# from the pull-down list

Verify the Zip Code that appears in the field

Then click the button to proceed

If the NJ Tax ID Number for the desired business is not on the list, go back to PBS and add the business.

## Verify Business Address

(will only appear on Certifications)

Make sure that the address displayed is correct

Then click the button to proceed

## GIS Mapping – Pinpoint Exact Location

(will only appear on Certifications)

The address from the previous page will be displayed, along with a map highlighting the Zone. The red dot is where the GIS mapping system has positioned your business location.

If the dot is placed correctly, click the **Verify** button

If the dot is NOT placed correctly, click the **Place Point Manually** button

Click on the *correct* location to move the red dot

Then click the **Verify** button

If you have moved the red dot to accurately pinpoint your business location in the Zone, UEZ staff will get a message that the location has been placed manually.

Back at the **Verify Business Address in the Zone** screen, click the **Start Certification Application** button



## UEZ Business Certification System

### Certification

#### I. Zone Business Information

The first page is essentially the same in a Certification Application, Annual Report, or Recertification Application. Some fields will be pre-populated with information from your NJ Business Registration, PBS, the UEZ database, and previous applications and reports you submitted.

Some of the information cannot be changed. If you have any questions contact the **UEZ Help Desk** at (877) 913-6837.

#### Filling in the form

##### 1. NJ Taxpayer ID#—

The Taxpayer ID is the 12-digit New Jersey taxpayer identification number of the business you are certifying, which will be the same as the Federal Taxpayer ID# plus a three digit suffix (000-000-000/000). The last three digits identify the specific physical location of the business. Sole proprietors without a NJ Taxpayer ID# may provide their Social Security Number with a three digit suffix, as assigned by the Division of Revenue.

Your NJ taxpayer ID may be found on—

- Certificate of Authority issued by the N.J. Division of Revenue
- NJ 500 Income Tax Withholding Form
- Monthly and quarterly reporting forms (ST50, ST51 or UZ-50) for State sales tax

Apply for a Federal Tax ID # at the IRS website—

<http://www.irs.gov/businesses/small/article/0,,id=97860,00.html>.

Register your business with the NJ Division of Revenue at—

<http://www.state.nj.us/treasury/revenue/gettingregistered.shtml>.

##### 2. Legal Company Name—

The name of your business as it is registered with the N.J. Division of Revenue or, if the business is a sole proprietorship or partnership, the name(s) of the owner(s)

##### 3. Name at UEZ Location—

Trade name used at the UEZ address, if different from the Legal Company Name

##### 4. to 9. UEZ Business Location Address—

The *exact physical location* of the business (no PO Boxes), including the Tax Block and Lot

numbers (available on your tax bill or from your landlord's property tax bill)

**NOTE:** Include the **Unit #** if the business is in a location with multiple units, e.g., mall, plaza, office building, etc.

### 10. to 14. Responsible Officer—

The owner, president, managing partner, fiscal officer, etc. of the business. Include the salutation (Mr., Mrs., Ms.); first name; last name; title; telephone number; fax number; and e-mail address of the Responsible Officer.

**IMPORTANT! If the email address is incorrect or blank, enter the correct email address of the Responsible Officer.**

All correspondence – receipt, acceptance, notifications, etc. – will be electronic. If the email address is incorrect, ***you will not get your notifications*** from UEZ.

### 15. to 18. Mailing Address—

The address that UEZ will use for any paper correspondence with the business. Check the **Same as Business Location** box if the mailing address is the same as the physical location address.

### 19. Nature of Business—

A short description of the business activity that is conducted at the **UEZ Business Location Address**. Please be specific (e.g., real estate, construction, property management, manufacturing, distribution, retail).

### 20. NAICS—

To find your North American Industrial Classification System (NAICS) code, go to <http://www.census.gov/epcd/www/naics.html>, or contact the UEZ Help Desk at 877-913-6837.

### 21. SIC Code—

To find your Standard Industrial Classification (SIC) code, go to <http://www.osha.gov/pls/imis/sicsearch.html>, or contact the UEZ Help Desk at 877-913-6837.

### 22. Business at this location established as a/an—

(Note: This section may not appear or be locked for editing in the Annual Report or Recertification.)

Select the term that best describes how your business was started at the UEZ location.

#### Definitions—

**Expansion:** You expanded an existing business from any location within or into the zone (includes chain stores and branch offices).

**Relocation:** You were an existing business that moved operations into the zone from another location.

**New Business:** You are a brand new business that did not previously exist (includes franchises).

**New Ownership:** You purchased an existing business or were required to re-apply into the program as a new business as a result of a change in your business ownership and federal identification number.

**Existing Business:** You have owned and operated this business at this location for at least a year before applying for UEZ Certification.

If you answered **Expansion** or **Relocation**, and your current location is DIFFERENT from the original, provide the city and state of the previous location, original location, or headquarters of the business.

### 23. Is 51% or more of the business owned by a Minority or Woman?

Being a minority or women-owned business is not a requirement for UEZ participation. Answers are used for statistical purposes only. Select one or both choices.

#### Definitions—

A **minority-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens who are members of the following racial groups: African American, Asian American, Hispanic American and Native American.

A **woman-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens that are female.

### 24. Business Type—

Your business may be a corporation, sole proprietorship, partnership, limited partnership, limited liability company, or joint venture. Additional information may be required (see below). This information must be kept in your records and be available for review if requested by UEZ.

**Additional Information:** Documents of Formation, Certificate(s) of Incorporation, Registration of foreign corporations, Partnership and Limited Partnership Agreement(s), Limited Liability Company Certificate(s) of Formation and Filing Receipts, Joint Venture Agreements.

**Save and move on to the next screen**

or, you may **Save** and **Logout** to finish the application later

## II. Employee Data: Job Creation Requirement

You may use the [Certification Employee Workbook](#) to determine the number of full-time and part-time employees. You may use another method of producing this information, such as a payroll system. This information must be kept in your records and be available for review if requested by UEZ.

### 25. Current Number of Employees—

Provide the number of **full-time** and **part-time** employees **working at this location**. Full-time employees work at least 30 hours per week, and must report to the work location in the zone at least 51% of the year. Part-time employees must work a minimum of 15 hours per week. Employees may be employed directly or may be contracted or leased.

### 26. Total number of employees anticipated at the end of the third year in UEZ Program—

Enter the number of full-time and part-time employees you anticipate employing at the end of your third year in the UEZ Program.

The [Program Procedures](#) explain UEZ job creation and local hiring requirements. If you have questions, contact the UEZ Help Desk at 877-913-6837.

## III. Estimated Capital Investment Projections

### 27. Total Dollar Amount of Projected Investment—

Provide the **total dollar amount** of your projected Capital Investments in the UEZ business for the upcoming three-year certification period. You may use the [Capital Investment Workbook](#) to itemize and project the dollar amount(s). You may use another method of recording this information, such as your capital budget. This information must be kept in your records and be available for review if requested by UEZ.

Capital Investment includes the purchase of property that is depreciated over a term of years, for example, building additions and improvements, furniture, computers, motor vehicles, and machinery.

Purchases of land and improvements to land (previously owned or newly purchased), although not depreciated, are considered Capital Investments.

Capital Investments do not include expendable items or property expensed on an annual basis, for example, office supplies, paper products, machine parts with a life of less than one year, etc.

**This is NOT your UZ5 data.** If you have questions concerning Capital Investments, contact the UEZ Help Desk at 877-913-6837.

## IV. Reduced Tax Rate Eligibility

Some business can participate in the UEZ Program, but not collect reduced sales taxes. Answering the following questions will determine whether your business can collect reduce taxes or not.

**28. Do you want to participate in the reduced tax collection program?**

Select either **Yes** or **No**.

**Yes** indicates that you want to apply for the reduced sales tax benefit.

**29. Do you primarily operate a catalog, mail, telephone, fax, or internet order business at your UEZ location?**

Select either **Yes** or **No**.

If you select **Yes**, you *do not qualify* for reduced sales tax collection program.

**30. Do you operate a retail store at your UEZ location where you regularly conduct retail sales of tangible personal property, exhibit such items for sale, and maintain an inventory of such items for sale?**

Select either **Yes** or **No**.

If you select **No**, you *do not qualify* for reduced sales tax collection program.

**SAVE and move on to the next screen**

or, you may **Save** and **Log out** to finish the application later.

## V. Terms and Conditions

To proceed, **you must check  each of the boxes** to consent to the release of your tax information (for UEZ Program use only), certify to the accuracy of the information you provided, and comply with the job creation and local employment requirements. (Refer to the [Program Procedures](#) for the job creation and local employment requirements.)

If you have questions concerning the employment requirements, contact the UEZ Help Desk at 877-913-6837.

**I agree to the Terms and Conditions**

**Submit**

If you are submitting a paper form (hardships only), the Responsible Officer must print his/her name, **sign, and date** the form before sending it to UEZ. Make a copy for your records and mail the application to Urban Enterprise Zone Program, Department of Community Affairs, 101 South Broad Street, PO Box 822, Trenton, NJ 08625-0822.

## Congratulations Your Application Is Complete!

After submitting an application or report, you will receive—

## UEZ Business Certification System

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- an on-screen confirmation that your application is in Pending status. You may **Print** or **Save** a copy to your computer system
- an Email confirmation that your application has been received by UEZ and notification of the status of your application



## UEZ Business Certification System

### Annual Report

#### I. Zone Business Information

The first page is essentially the same in a Certification Application, Annual Report, or Recertification Application. Some fields will be pre-populated with information from your NJ Business Registration, PBS, the UEZ database, and previous applications and reports you submitted.

Some of the information cannot be changed. If you have any questions contact the **UEZ Help Desk** at (877) 913-6837.

#### Filling in the form

**1. NJ Taxpayer ID#—**

This field is not modifiable on an Annual Reporting Form.

**2. Legal Company Name—**

This field is not modifiable on an Annual Reporting Form.

**3. Name at UEZ Location—**

This field is not modifiable on an Annual Reporting Form.

**4. to 9. UEZ Business Location Address—**

#4 is not modifiable on an Annual Reporting Form.

You may add or modify the **Unit #** (if the business is in a location with multiple units, e.g., mall, plaza, office building, etc.) and/or the **Block #** and **Lot #**.

#7, #8, and #9 are not modifiable on an Annual Reporting Form.

**10. to 14. Responsible Officer—**

The owner, president, managing partner, fiscal officer, etc. of the business. Include the salutation (Mr., Mrs., Ms.); first name; last name; title; telephone number; fax number; and e-mail address of the Responsible Officer.

**IMPORTANT! If the email address is incorrect or blank, enter the correct email address of the Responsible Officer.**

All correspondence – receipt, acceptance, notifications, etc. – will be electronic. If the email address is incorrect, ***you will not get your notifications*** from UEZ.

### 15. to 18. Mailing Address—

The address that UEZ will use for any paper correspondence with the business. Check the **Same as Business Location** box if the mailing address is the same as the physical location address.

### 19. Nature of Business—

A short description of the business activity that is conducted at the **UEZ Business Location Address**. Please be specific (e.g., real estate, construction, property management, manufacturing, distribution, retail).

### 20. NAICS—

To find your North American Industrial Classification System (NAICS) code, go to <http://www.census.gov/epcd/www/naics.html>, or contact the UEZ Help Desk at 877-913-6837.

### 21. SIC Code—

To find your Standard Industrial Classification (SIC) code, go to <http://www.osha.gov/pls/imis/sicsearch.html>, or contact the UEZ Help Desk at 877-913-6837.

### 22. Minority Owned

Select **Yes** or **No**. A **minority-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens who are members of the following racial groups: African American, Asian American, Hispanic American and Native American.

### 23. Woman Owned

Select **Yes** or **No**. A **woman-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens that are female.

Being a minority or women-owned business is not a requirement for UEZ participation. Answers are used for statistical purposes only. Select one or both choices.

### 24. Business Type—

This field is not modifiable on an Annual Reporting Form.

**Save and move on to the next screen**

or, you may **Save** and **Logout** to finish the application later

**II. Employee Data: Job Creation Requirement**

You may use the [Annual Report Employee Workbook](#) to determine the number of full-time and part-time employees. You may use another method of producing this information, such as a payroll system. This information must be kept in your records and be available for review if requested by UEZ.

**25. Number of Employees at Start Date and Original 3-year Employment Projection—**

These fields will be pre-populated based on the information you provided in your Certification Application. The values cannot be changed in an Annual Reporting Form.

**26. Current Number of Employees**

Provide the number of **full-time** and **part-time** employees who are **currently** working at this location of your business.

**27. Total projected employees next Program year—**

Enter the number of full-time and part-time employees you anticipate employing at the end of the next year in the UEZ Program.

<b>Full-time Employees at Certification</b>	<b>Job Creation Requirements</b>
50 or more	one full-time employee
11 - 49	one full-time or two part-time employees
6 - 10	one part-time employee
0 - 5	not required to hire additional employees

The [Program Procedures](#) explain UEZ job creation and local hiring requirements. If you have questions, contact the UEZ Help Desk at 877-913-6837.

**III. Capital Investments**

You may use the [Capital Investment Workbook](#) to itemize and project the dollar amount(s). You may use another method of recording this information, such as your capital budget. This information must be kept in your records and be available for review if requested by UEZ.

Capital Investment includes the purchase of property that is depreciated over a term of years, for example, building additions and improvements, furniture, computers, motor vehicles, and machinery.

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Purchases of land and improvements to land (previously owned or newly purchased), although not depreciated, are considered Capital Investments.

Capital Investments do not include expendable items or property expensed on an annual basis, for example, office supplies, paper products, machine parts with a life of less than one year, etc.

**This is NOT your UZ5 data. If you have questions concerning Capital Investments, contact the UEZ Help Desk at 877-913-6837.**

## **28. Total actual capital investments made during the past Program year**

Provide the **total dollar amount** of your capital investments in the UEZ business for the past Program year.

## **29. Total projected capital investments for the next Program year**

Provide the **total dollar amount** of your anticipated capital investments in the UEZ business for the upcoming Program year.

## **30. UZ-4 Total tax exempt purchases made during the past program year**

Enter the **dollar amount** of the tax exempt **purchases** made upon presentation of your Contractor's Exempt Purchase Certificate (UZ4). The System will calculate your savings automatically. You may use the [Exempt Sales Tax Tracking Workbook](#) to record this information. You may use another method of tracking this information, such as a computer program. This information must be kept in your records and be available for review if requested by UEZ. If you did not make any tax-exempt purchases, leave the field at zero (0).

## **31. UZ-5 Total tax exempt purchases made during the past program year**

Enter the **dollar amount** of the tax exempt **purchases** you made upon presentation of your Urban Enterprise Exempt Certificate (UZ-5). The System will calculate your savings automatically. You may use the [Exempt Sales Tax Tracking Workbook](#) to record this information. You may use another method of tracking this information, such as a computer program. This information must be kept in your records and be available for review if requested by UEZ. If you did not make any tax-exempt purchases, leave the field at zero (0).

## **IV. Reduced Rate Tax Eligibility**

Some business can participate in the UEZ Program, but not collect reduced sales taxes. Answering the following questions will determine whether your business can collect reduce taxes or not.

### **32. Do you want to participate or continue to participate in the reduced tax collection program?**

Select either **Yes** or **No**.

**Yes** indicates that you want to apply for or continue to use the reduced sales tax benefit.

**33. Do you primarily operate a catalog, mail, telephone, fax, or internet order business at your UEZ location?**

Select either **Yes** or **No**.

If you select **Yes**, you *do not qualify* for reduced sales tax collection program.

**34. Do you operate a retail store at your UEZ location where you regularly conduct retail sales of tangible personal property, exhibit such items for sale, and maintain an inventory of such items for sale?**

Select either **Yes** or **No**.

If you select **No**, you *do not qualify* for reduced sales tax collection program..

**SAVE and move on to the next screen**

or, you may **Save** and **Log out** to finish the application later.

To proceed, **you must check  each of the boxes** to consent to the release of your tax information (for UEZ Program use only), certify to the accuracy of the information you provided, and comply with the job creation and local employment requirements. (Refer to the [Program Procedures](#) for the job creation and local employment requirements.)

If you have questions concerning the employment requirements, contact the UEZ Help Desk at 877-913-6837.

**I agree to the Terms and Conditions**

**Submit**

If you are submitting a paper form (hardships only), the Responsible Officer must print his/her name, **sign, and date** the form before sending it to UEZ. Make a copy for your records and mail the application to Urban Enterprise Zone Program, Department of Community Affairs, 101 South Broad Street, PO Box 822, Trenton, NJ 08625-0822.

### **Congratulations Your Application Is Complete!**

After submitting an application or report, you will receive—

- an on-screen confirmation that your application is in Pending status. You may **Print** or **Save** a copy to your computer system
- an Email confirmation that your application has been received by UEZ and notification of the status of your application



## UEZ Business Certification System

### Recertification

The first page is essentially the same in a Certification Application, Annual Report, or Recertification Application. Some fields will be pre-populated with information from your NJ Business Registration, PBS, the UEZ database, and previous applications and reports you submitted.

Some of the information cannot be changed. If you have any questions contact the **UEZ Help Desk** at (877) 913-6837.

### Filling in the form

**1. NJ Taxpayer ID#—**

This field is not modifiable on an Recertification Application.

**2. Legal Company Name—**

This field is not modifiable on an Recertification Application.

**3. Name at UEZ Location—**

This field is not modifiable on an Recertification Application.

**4. to 9. UEZ Business Location Address—**

#4 is not modifiable on an Recertification Application.

You may add or modify the **Unit #** (if the business is in a location with multiple units, e.g., mall, plaza, office building, etc.) and/or the **Block #** and **Lot #**.

#7, #8, and #9 are not modifiable on an Recertification Application.

**10. to 14. Responsible Officer—**

The owner, president, managing partner, fiscal officer, etc. of the business. Include the salutation (Mr., Mrs., Ms.); first name; last name; title; telephone number; fax number; and e-mail address of the Responsible Officer.

**IMPORTANT! If the email address is incorrect or blank, enter the correct email address of the Responsible Officer.**

All correspondence – receipt, acceptance, notifications, etc. – will be electronic. If the email address is incorrect, ***you will not get your notifications*** from UEZ.

**15. to 18. Mailing Address—**

The address that UEZ will use for any paper correspondence with the business. Check the

**Same as Business Location** box if the mailing address is the same as the physical location address.

## 19. Nature of Business—

A short description of the business activity that is conducted at the **UEZ Business Location Address**. Please be specific (e.g., real estate, construction, property management, manufacturing, distribution, retail).

## 20. NAICS—

To find your North American Industrial Classification System (NAICS) code, go to <http://www.census.gov/epcd/www/naics.html>, or contact the UEZ Help Desk at 877-913-6837.

## 21. SIC Code—

To find your Standard Industrial Classification (SIC) code, go to <http://www.osha.gov/pls/imis/sicsearch.html>, or contact the UEZ Help Desk at 877-913-6837.

## 22. Minority Owned

Select **Yes** or **No**. A **minority-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens who are members of the following racial groups: African American, Asian American, Hispanic American and Native American.

## 23. Woman Owned

Select **Yes** or **No**. A **woman-owned** business is a proprietorship, partnership, corporation or joint-venture that is 51% owned, operated and controlled by United States citizens that are female.

Being a minority or women-owned business is not a requirement for UEZ participation. Answers are used for statistical purposes only. Select one or both choices.

## 24. Business Type—

This field is not modifiable on an Recertification Application.

**Save and move on to the next screen**

or, you may **Save** and **Logout** to finish the application later

## II. Employee Data: Job Creation Requirement

You may use the [Recertification Employee Workbook](#) to determine the number of full-time and part-time employees. You may use another method of producing this information, such as a payroll system. This information must be kept in your records and be available for review if requested by UEZ.

## 25. Number of Employees at Start Date and Original 3-year Employment Projection—

These fields will be pre-populated based on the information you provided in your Certification Application. The values cannot be changed in an Recertification Application.

## 26. Current Number of Employees

Provide the number of **full-time** and **part-time** employees who are **currently** working at this location of your business.

## 27. Total projected employees next Program year—

Enter the number of full-time and part-time employees you anticipate employing at the end of the next year in the UEZ Program. If the fields already have numbers in them, you may correct the numbers, if necessary.

Full-time Employees at Certification	Job Creation Requirements
50 or more	one full-time employee
11 - 49	one full-time or two part-time employees
6 - 10	one part-time employee
0 - 5	not required to hire additional employees

The [Program Procedures](#) explain UEZ job creation and local hiring requirements. If you have questions, contact the UEZ Help Desk at 877-913-6837.

## Employee Data: Local Hiring Requirement (25% Factor)

If this is your first Recertification and if you are required to fulfill the UEZ job creation requirements (see table above), your application will include the following question—

### 28. Number of new hires (since Certification) who are:

- Residents of a zone or a zone’s municipality  
OR
- NJ residents unemployed for at least six months prior to being hired  
OR
- Recipients of New Jersey public assistance programs for at least six months prior to being hired  
OR
- Determined to be low-income individuals pursuant to the Workforce Investment Act of 1998

Enter the number of employees (if any) that you have hired since your Certification in the UEZ Program who fulfill **any ONE** of the criteria listed above. Refer to the [Program Procedures](#) for more complete information.

If you did *not* meet the increased employment or local hiring requirements or if you don't understand your requirements, contact the UEZ Help Desk at 877-913-6837 for assistance.

### III. Capital Investments

You may use the [Capital Investment Workbook](#) to itemize and project the dollar amount(s). You may use another method of recording this information, such as your capital budget. This information must be kept in your records and be available for review if requested by UEZ.

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Purchases of land and improvements to land (previously owned or newly purchased), although not depreciated, are considered Capital Investments.

Capital Investments do not include expendable items or property expensed on an annual basis, for example, office supplies, paper products, machine parts with a life of less than one year, etc.

**This is NOT your UZ5 data. If you have questions concerning Capital Investments, contact the UEZ Help Desk at 877-913-6837.**

#### **29. Total actual capital investments made during the past Program year**

Provide the **total dollar amount** of your capital investments in the UEZ business for the past Program year.

#### **30. Total projected capital investments for the next Program year**

Provide the **total dollar amount** of your anticipated capital investments in the UEZ business for the upcoming Program year.

#### **31. UZ-4 Total tax exempt purchases made during the past program year**

Enter the **dollar amount** of the tax exempt **purchases** made upon presentation of your Contractor's Exempt Purchase Certificate (UZ4). The System will calculate your savings automatically. You may use the [Exempt Sales Tax Tracking Workbook](#) to record this information. You may use another method of tracking this information, such as a computer program. This information must be kept in your records and be available for review if requested by UEZ. If you did not make any tax-exempt purchases, leave the field at zero (0).

### 32. UZ-5 Total tax exempt purchases made during the past program year

Enter the **dollar amount** of the tax exempt **purchases** you made upon presentation of your Urban Enterprise Exempt Certificate (UZ-5). The System will calculate your savings automatically. You may use the [Exempt Sales Tax Tracking Workbook](#) to record this information. You may use another method of tracking this information, such as a computer program. This information must be kept in your records and be available for review if requested by UEZ. If you did not make any tax-exempt purchases, leave the field at zero (0).

## IV. Reduced Rate Tax Eligibility

Some business can participate in the UEZ Program, but not collect reduced sales taxes. Answering the following questions will determine whether your business can collect reduce taxes or not.

### 33. Do you want to participate or continue to participate in the reduced tax collection program?

Select either **Yes** or **No**.

**Yes** indicates that you want to apply for or continue to use the reduced sales tax benefit.

### 34. Do you primarily operate a catalog, mail, telephone, fax, or internet order business at your UEZ location?

Select either **Yes** or **No**.

If you select **Yes**, you *do not qualify* for reduced sales tax collection program.

### 35. Do you operate a retail store at your UEZ location where you regularly conduct retail sales of tangible personal property, exhibit such items for sale, and maintain an inventory of such items for sale?

Select either **Yes** or **No**.

If you select **No**, you *do not qualify* for reduced sales tax collection program..

**SAVE and move on to the next screen**

or, you may **Save** and **Log out** to finish the application later.

## ATTENTION – Program Requirements not met

If you have **not** fulfilled either the job creation or local hiring (25% factor) UEZ Program requirements, the Terms and Conditions screen will display one or both of the following notifications:

**Based on the current number of employees (that you entered in question 26), your business was unable to meet the Program's Increased Employment requirement.**

**Based on the number of new hires that meet 25% factor eligibility (that you entered in question 28), your business was unable to meet the Program's 25% Factor requirement.**

# UEZ Business Certification System

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Select one of the options—

- I am requesting an extension of my Certification period to allow me to meet the UEZ Program requirements. Please have a UEZ representative contact me and explain the available options that might allow my business to continue participating in the UEZ Program.
- I am waiving my option to explore the available options that might allow my business to continue participating in the UEZ Program. I understand that my UEZ eligibility will be inactivated and I will no longer qualify for UEZ Program benefits.

*These messages and options will not appear if you have fulfilled the employment and 25% factor Program requirements.*

## IV. Terms and Conditions

To proceed, **you must check  each of the boxes** to consent to the release of your tax information (for UEZ Program use only), certify to the accuracy of the information you provided, and comply with the job creation and local employment requirements. (Refer to the [Program Procedures](#) for the job creation and local employment requirements.)

If you have questions concerning the employment requirements, contact the UEZ Help Desk at 877-913-6837.

**I agree to the Terms and Conditions**

**Submit**

If you are submitting a paper form (hardships only), the Responsible Officer must print his/her name, **sign, and date** the form before sending it to UEZ. Make a copy for your records and mail the application to Urban Enterprise Zone Program, Department of Community Affairs, 101 South Broad Street, PO Box 822, Trenton, NJ 08625-0822.

## Congratulations Your Application Is Complete!

After submitting an application or report, you will receive—

- an on-screen confirmation that your application is in Pending status. You may **Print** or **Save** a copy to your computer system
- an Email confirmation that your application has been received by UEZ and notification of the status of your application

**SAVE and move on to the next screen**

or, you may **Save** and **Log out** to finish the application later.