
APPLICATION PROCEDURES

The Job Creation Fund (JCF) Program provides job creation awards and capital investment rebates to designated businesses that retain or create high-paying, full-time permanent jobs and invest in real property improvements. The program is available statewide for manufacturing, distribution, warehousing, and other eligible business activities.

Applications are accepted on a year-round basis as funds are available.

To become a designated JCF business and receive benefits, a business must work in conjunction with the local government where the JCF business will be located. A JCF application must be completed and submitted to the Department of Employment and Economic Development (DEED) by the local government. Step-by-step instructions are listed below and applications may be submitted by mail or email to:

Tom Washa
Program Administrator - Principal
332 Minnesota Street, Suite E200
St. Paul, MN 55101
jobcreationfund@state.mn.us

Completing the Job Creation Fund (JCF) Program Application: Step-by-Step Instructions

In consultation with DEED, the local government will make a preliminary determination about whether a business meets the minimum program requirements. Use the Job Creation Fund Eligibility and Application Checklist on the program website for guidance. If a business is potentially eligible, the following steps are completed:

1. The business provides the information to the local government needed to complete JCF Application. A local government resolution in support of the project must be included. Local officials must submit the application to DEED.
2. DEED evaluates the application and notifies the local government and business of approval or denial. If approved, DEED will formally designate the business as a JCF business and determine a job creation award and/or capital investment rebate amount. Awards and/or rebates of \$500,000 or more require DEED to hold a public hearing.
3. Jobs created and/or capital investment expenditures may be counted after the business is formally notified by DEED that it has been designated as a JCF business.
4. DEED will draft a business subsidy agreement specifying the award and/or rebate to be provided after required job creation and capital investment goals are met. The JCF business and the DEED commissioner sign the business subsidy agreement.
5. The local government will assist the business with submitting required annual progress reports, payment request documentation, and other information requested by DEED. The local government will also provide information on annual changes in wage requirements.

JOB CREATION FUND PROGRAM APPLICATION

SECTION 1 - LOCAL GOVERNMENT AND BUSINESS APPLICANT INFORMATION

Local Government Project Sponsor:	Local Government Contact Name and Title:
Email:	Telephone:
Address:	City/State/Zip:
Business Legal Name:	Parent Company Name (if applicable):
Mailing Address:	City/State/Zip:
Street Address for Project Applying for JCF (JCF Project):	City/State/Zip for JCF Project:
Primary Business Contact and Title:	E-mail:
Website:	Telephone:
SWIFT Vendor Number*:	FEIN:
NAICS Code:	Primary Business Activity for Proposed Project:
Is 51% of the business cumulatively owned by minorities, veterans, women, or persons with a disability? Yes No If you answered "Yes" please complete the Targeted Population Designation Characteristic Form attached to this application.	

*If you are intending on submitting an application, you may need to register as a vendor by going to: <https://mn.gov/mmb/accounting/swift/vendor-resources/>
 For new vendors, please note that approval of your registration may take 3 – 4 business days. If you need assistance obtaining a vendor ID or completing the registration process, please call 651-201-8100, Option 1

SECTION 2 - PROJECT OVERVIEW

Project Type: <input type="checkbox"/> New business with no parent company or current operations <input type="checkbox"/> Expansion of existing facility or Minnesota company <input type="checkbox"/> Expansion to Minnesota by a company with existing operations outside Minnesota												
Project will involve: <input type="checkbox"/> Leasing an existing facility where leasehold improvements will be made <input type="checkbox"/> Leasing a facility to be constructed <input type="checkbox"/> Ownership of an existing facility and making improvements <input type="checkbox"/> Construction and ownership of a new facility												
Are there facility or land limitations that do not allow the business to expand at an existing Minnesota facility? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable												
Could this project be located outside of Minnesota and serve the same customers? <input type="checkbox"/> Yes <input type="checkbox"/> No												
Project Timeframe: <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; width: 80%;"> <thead> <tr> <th style="width: 50%;">Task:</th> <th style="width: 50%;">Estimated Completion Date: (mm/yyyy)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Commitment of all funds</td> <td></td> </tr> <tr> <td style="text-align: center;">Start of construction</td> <td></td> </tr> <tr> <td style="text-align: center;">Purchase equipment</td> <td></td> </tr> <tr> <td style="text-align: center;">Complete construction</td> <td></td> </tr> <tr> <td style="text-align: center;">Begin operations</td> <td></td> </tr> </tbody> </table>	Task:	Estimated Completion Date: (mm/yyyy)	Commitment of all funds		Start of construction		Purchase equipment		Complete construction		Begin operations	
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Current number of permanent, full-time employees company-wide:			
Current number of permanent, full-time employees in Minnesota:			
Current number of permanent, full-time employees at proposed JCF site:			
Will any jobs be relocated from another Minnesota site to the proposed JCF site? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which location(s) will the employees be relocated from? *for jobs relocated from another Minnesota location, a letter in support of the move from the city where the job will be moving from must be attached **upon designation, an updated employee count will be requested			
Average wage for retained and/or new permanent, full-time employees:			
Projected number of new full-time permanent jobs at proposed JCF project site:			
	To be created in Year 1	To be created in Year 2	To be created in Year 3
# new FT, permanent jobs:			
*full-time permanent jobs means positions with expected work hours of 2080 annually			

Sources & Uses:
**since JCF funds are pay-for-performance, they should not be included as a source or use of funds*

	Bank(s)	Equity	State	Local Gov't	Other ()	Total
Property Acquisition						
Site Improvement						
New Construction						
Renovation of an Existing Building						
Purchase of Machinery & Equipment						
Infrastructure						
Other:						
Other:						
Total Project Cost						

Has the business received state or local financial assistance in the last year? Yes No

Does the property or the business have any outstanding local, state or federal tax liabilities? Yes No
If yes, describe:

Have state environmental review requirements been met for the project, if applicable? Yes No

Are there current or unsatisfied judgments or injunctions against the business or owners? Yes No
If Yes, describe:

Is there current or pending litigation involving the business? Yes No
If yes, attach summary and disposition.

Within the past five years, has there been any violation(s), citation(s), or complaint(s) of discrimination filed against the company in a state or federal court or before any state, federal or local government agency?
 Yes No If Yes, attach a copy of the violation(s), citation(s), or complaint(s) and the disposition of each.

SECTION 3 - REQUIRED INFORMATION

**Information from the items listed below will be used to evaluate potential awards and rebates for a business requesting JCF designation. Please be thorough in addressing the requested information and clearly identify responses to each item separately by number.*

PART A – Business Description. Describe the business and its major activities. Please include the following information:

1. Business overview and company history and ownership - include organizational structure, parent company and any affiliates
2. Product or industry outlook for the JCF project
3. Total projected sales for the JCF project both inside and outside of Minnesota
4. Estimated sales to Minnesota customers that replace purchases from outside Minnesota
5. Markets (local, statewide, national, international) along with their respective percentage to total sales and the customers served
6. Philanthropic or other ways in which the business contributes or will contribute to Minnesota
7. Attach two years of historical financials (Profit & Loss/Balance Sheets/Income Statement/Cash Flow Statement) and financial projections

PART B – Project Description. Describe the project for which JCF funds are being requested. Please include the following information:

8. Provide details for the project for which JCF funds are being requested. Discuss topics such as square footage increase, lease vs ownership, new construction vs renovation or leasehold improvements, etc.
9. If this is a lease scenario, explain how the JCF applicant will pay for tenant improvements, including amount, timing, and upfront expenses vs. lease payments. For more information see Job Creation Fund Benefits Explained.
10. Describe how the JCF project will strengthen and/or diversify the local or Minnesota economy
11. Describe any local government assistance for the JCF project (e.g., city loan, abatement, TIF, etc.) and comment on dollar amounts and/or general information on any city projects related to this project.
12. Attach line-item construction cost estimates for real property improvements for the JCF project
13. If available, attach a commitment letter from each financing source (ie Financial Institutions), including a letter of commitment for any business equity

PART C – Business Competitors. Identify the competitors of the business within local community (city and county), the adjacent counties, and in the state of Minnesota. Include:

14. The name of each major competitor and the location of each competitor by city
15. How the products or services are different than the JCF business'
16. How the markets are different from the JCF business'

PART D – Detailed job & wage information.

17. If applicable, provide quarterly payroll reports from the last year for current permanent full-time employees who will be located at the JCF project site
18. For new full-time permanent employees, complete the form on Page 5 of this application or attach a listing of jobs that includes the information from the form on Page 5.

SECTION 4 - BUSINESS ACKNOWLEDGMENT AND CERTIFICATION

DATA PRIVACY ACKNOWLEDGMENT:

Tennessen Warning Notice: per MN Statutes 13.04, Subd.2, this data is being requested from you to determine if you are eligible for an award under the Job Creation Fund program. You are not required to provide the requested information, but failure to do so may result in the department’s inability to determine your eligibility for an award pursuant to the criteria developed under the program’s enabling legislation and rules. The data you provide is classified as private or non-public and cannot be shared without your permission except as specified in statute.

Data Privacy Notice: per MN Statutes 13.591, Subdivision 1, certain data provided in this application is private or non-public data; this includes financial information about the business, including credit reports, financial statements, net worth calculations, business plans; income and expense projections; balance sheets; customer lists; income tax returns; and design, market, and feasibility studies not paid for with public funds. Per MN Statutes 116J.401, Subd. 3., certain data provided in this application is private data; this includes data collected on individuals pursuant to the operation of the Job Creation Fund Program.

BUSINESS CERTIFICATION:

Financial Assistance Certification: I hereby certify that the Job Creation Fund program is necessary to my business start-up or expansion and that without the Job Creation Fund my business start-up or expansion project would not happen to the extent outlined in the Job Creation Fund Application. I certify that I will not count any existing positions or employees moved or relocated from another of Minnesota facility where my business conducts operations as new permanent full-time employees for the purposes of fulfilling requirements of the Job Creation Fund Program. I certify I will not terminate, lay-off, or reduce the working hours of an employee for the purpose of hiring an individual to fulfill the requirements of the Job Creation Fund Program. I certify that I will pay prevailing wages as required under the laws of the State of Minnesota if applicable. I certify I will enlist the services of the Workforce Center Business Services and will sign a Job Listing Agreement as a condition to receiving funds in excess of \$200,000 from the MN Department of Employment and Economic Development.

I have read the above statements and I agree to supply the information requested to the MN Department of Employment and Economic Development, Office of Business Finance with full knowledge of the information provided herein. I certify that all information provided herein is true and accurate and that the official signing this form has authorization to do so.

Name/Title of Business Official: _____

Signature of Business Official: _____ Date: _____

LOCAL GOVERNMENT CERTIFICATION:

I hereby certify that as the local government contact for the proposed Job Creation Fund project, I have reviewed the application and business information. I agree to work with the Job Creation Fund Program business applicant to supply information requested by the MN Department of Employment and Economic Development, Economic Development Division.

Name/Title of Local Government Contact: _____

Signature of Local Government Contact: _____ Date _____

**Consent to Release Private Business Employment and Wage Data
Collected and Maintained by the Unemployment Insurance Program
Minnesota Department of Employment and Economic Development (DEED)**

Your business is requesting financial assistance from a DEED business finance program that requires a commitment to create and/or retain jobs at selected wage levels. To help verify your current and future employment and wage levels during your participation in the program, DEED's Business Finance Office staff needs to review the monthly and quarterly employment and wage data that you submit to DEED's Unemployment Insurance Program (UIP).

Because your UIP employment and wage data is private, it cannot be provided to Business Finance staff without your permission. The data that will be provided with your permission includes aggregate Minnesota employment levels for your company and at the project site, as well as specific wages and hours worked by your individual employees in Minnesota. **It is important to note that data or information on specific individuals will be identify-protected so information such as social security numbers or names will not be provided.**

Once you provide permission for UIP to share the data, UIP can provide the data to the Office of Business Finance. You have the right to not provide consent by refusing to sign this consent form, however refusal may limit business finance program eligibility. The Office of Business Finance may not release the data to any parties other than to your business representatives and will only receive the data until all job creation and wage level commitments have been met.

To view the data or if you have questions, please contact Bob Isaacson, Executive Director, Office of Business Finance at 651-259-7458 or bob.isaacson@state.mn.us.

I give my permission for the Unemployment Insurance Program to release monthly and quarterly employment and wage data to DEED's Office of Business Finance; and

I understand that this data will be used by the Office of Business Finance to verify job and wage goal attainment associated with financial assistance it provides.

Signature of Business Representative	Company	Date
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Printed Name of Business Representative	Position
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E-mail	Phone
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Targeted Population Designation Characteristics

In order to qualify for Targeted Population Designation, the business must be majority (at least 51%) owned and operated by persons who meet certain qualifying characteristics. One or more individuals may be included when determining eligibility. Please provide information regarding qualifying characteristics of the owner(s)/operator(s). Check all that apply:

Minority

Minority group members are citizens (or lawfully admitted permanent residents) of the United States who belong to one or more of the following groups:

- (i) "Black Americans," which includes persons having origins in any of the Black racial groups of Africa;
- (ii) "Hispanic Americans," which includes persons of Mexican, Puerto Rican, Cuban, Dominican, Central or South American, or other Spanish or Portuguese culture or origin, regardless of race;
- (iii) "Native Americans," which includes persons who are American Indians, Eskimos, Aleuts, or Native Hawaiians;
- (iv) "Asian-Pacific Americans," which includes persons whose origins are from Japan, China, Taiwan, Korea, Burma (Myanmar), Vietnam, Laos, Cambodia (Kampuchea), Thailand, Malaysia, Indonesia, the Philippines, Brunei, Samoa, Guam, the U.S. Trust Territories of the Pacific Islands (Republic of Palau), the Commonwealth of the Northern Marianas Islands, Macao, Fiji, Tonga, Kiribati, Juvalu, Nauru, Federated States of Micronesia, or Hong Kong;
- (v) "Subcontinent Asian Americans," which includes persons whose origins are from India, Pakistan, Bangladesh, Bhutan, the Maldives Islands, Nepal or Sri Lanka;

Woman

Veteran

Veteran means a citizen of the United States or a resident alien who has been separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty, or who has met the minimum active duty requirement as defined by Code of Federal Regulations, title 38, section 3.12a, or who has active military service certified under section 401, Public Law 95-202. The active military service must be certified by the United States secretary of defense as active military service and a discharge under honorable conditions must be issued by the secretary.

Person(s) with disabilities

The term “disability” is defined under the Americans with Disabilities Act and means, with respect to an individual:

- (A) a physical or mental impairment that substantially limits one or more major life activities of such individual;
- (B) a record of such an impairment; or
- (C) being regarded as having such an impairment.

I certify that the business is at least 51% owned and operated by person(s) who are representative of one or more of the qualifying groups.

Name/Title of Authorized Business Representative

Signature of Authorized Business Representative

Date: _____