STATE OF CONNECTICUT

Department of Economic and Community Development

Preliminary Questionnaire to Determine Eligibility for

Enterprise Zone Program Incentives

Municipal Officer: Please check the applicable zone for the pre-app:

|  |  |  |
| --- | --- | --- |
| \_Airport Development Zone | \_ Enterprise Zone | \_ Manufacturing Plant Zone |
| \_ Bioscience Enterprise Corridor Zone | \_ Enterprise Corridor Zone | \_ Qualified Manufacturing Plant |
| \_ Contiguous Municipality Zone | \_ Entertainment District | \_ Railroad Depot Zone |
| \_ Defense Plant Zone | \_ Knowledge Center EZ | \_ Urban Jobs Program |

The responses to the following items are intended to provide the State with basic information concerning your business and the proposed activity to confirm if you may qualify for tax incentives as provided under Sections 12-81(59), 12-81(60) and 12-217(e) of the Connecticut General Statutes. Upon receipt and review of a completed questionnaire, a staff member will contact you to discuss the program further.

Please be advised that the completion of this form does not constitute a formal application for a CERTIFICATE OF ELIGIBILITY, which requires more detailed information. This “pre-app” is intended only to allow the State DECD to make an initial determination concerning your proposal at the least cost in time and effort to you.

PLEASE RETURN THE COMPLETED QUESTIONNAIRE TO:

Mr. Edward Bona, Enterprise Zone Coordinator (Edward.Bona@ct.gov)

Connecticut Department of Economic and Community Development (CT DECD)

450 Columbus Blvd., Suite 5; Hartford, CT 06103-1843

If you have any questions, or need assistance in completing this questionnaire, please contact

Ed Bona at 860-500-2352, or via email: [edward.bona@ct.gov](mailto:edward.bona@ct.gov) with a copy to [susan.chen@ct.gov](mailto:susan.chen@ct.gov).

Thank you for your cooperation.

[1] LEGAL NAME AND MAILING ADDRESS OF THE BUSINESS:

(as exactly recorded with the Secretary of the State’s Business Recording Division)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FEDERAL EMPLOYER I.D. #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIC/NAICS#\_\_\_\_\_\_\_\_\_\_\_\_

[2] NAME, TITLE AND TELEPHONE NUMBER OF CONTACT PERSON:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[3] ADDRESS AND SIZE (ft², sq. ft., sqft., SF) OF THE FACILITY, OR PORTION THEREOF, TO BE OCCUPIED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[4] ACTUAL OR ANTICIPATED DATE OF OCCUPANCY OF THE FACILITY LISTED ABOVE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[5] NAME, MAILING ADDRESS AND TELEPHONE NUMBER OF THE OWNER OF THE FACILITY:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(See Notes 1 & 2 Below)

[6] THE FACILITY WILL BE (please check all applicable):

□ Construction (new) □ Expansion □ purchase\*\*

□ Construction (renovation)\* (see also NOTE 1 below) □ leasing\*\*

\* For substantial renovations, please provide: (1) the estimated cost of renovation ($\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), and (2) the current assessed valuation of the facility prior to renovation ($\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_).

\*\* If new purchase or leasing, additional DECD requirements include:

□ If the facility has been idle/abandoned/vacant for at least one year, check here. DECD requires notarized proof of idleness by the Municipality (see Attachment A).

□ Current assessed value of the space to be acquired: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The facility will be used for the following purpose(s)—check all that apply:

□ The manufacturing, processing, or assembly of raw materials, parts or manufactured products;

□ the significant servicing, overhauling or rebuilding of machinery and equipment for industrial use;

□ the distribution in bulk quantities of manufactured products on other than a retail basis;

□ research and development activities directly related to a manufacturing process; and/or

□ other eligible business services – please describe in the next box provided:

|  |
| --- |
|  |

[7] Briefly describe the activity or activities in which the firm noted in this questionnaire will be engaged at the location to be occupied.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[8] Current pre-project employment (full time positions): \_\_\_\_\_\_\_\_\_

Estimated number and type of new, permanent full-time employment positions to be created at the facility over the next 24 months:

Projected new full-time positions in the 1st year \_\_\_\_\_\_\_\_\_ 2nd year \_\_\_\_\_\_\_\_\_

□ If you would like additional information on State assistance with financing, wage and or training subsidies, or other business services, please check the box to the left. A representative from the Connecticut Department of Economic and Community Development would contact you.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Handwritten signature of Applicant or Preparer |  | Date |
|  | | |
| Type or print name of Applicant or Preparer, Title | | |

NOTES

1. Renovation should be a of a nature requiring the issuance of a building permit, and involve capital expenditures of at least 50% of the assessed value of the facility, or a portion thereof, prior to its renovation.

2. A leasing agreement must be for a minimum term of five (5) years, and include an option to renew for an additional five (5) years, an option to purchase the facility at any time after the initial five-year term, or both. The term of the lease as well as the idleness as well as the idle requirement may vary for facilities that are located in an enterprise zone.

Page left intentionally blank.

**Attachment A**

From: Enterprise Zone Municipality (CGS. Sec. 32-70 et seq.)

To: Connecticut Department of Economic and Community Development

|  |  |
| --- | --- |
| Date: |  |

Re: **Idleness Waiver (Abandoned, Underutilized, or Vacant)**

for preliminary questionnaire (“pre-app”)

|  |  |
| --- | --- |
| I certify that the location listed below in |  |
|  | (Municipality) |

has been abandoned, underutilized, or vacant for one year (type full address):

|  |  |  |
| --- | --- | --- |
|  | | |
|  | CT |  |

Authorized individual attesting to the truthfulness of the statement above, check one:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Assessor |  | Chief Elected Official |  | EconDevpt/EZ Coordinator |

|  |  |
| --- | --- |
| Handwritten signature: |  |
| Type/print name, title: |  |

JURAT

State of Connecticut

|  |  |
| --- | --- |
| County of |  |

|  |  |
| --- | --- |
| Subscribed and sworn to before me (print name) |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| on this |  | day of |  | , 20 |  |

|  |  |  |
| --- | --- | --- |
|  | | (Notarial seal) |
| Signature of notary public/Commissioner of the Court | |
| My commission expires: |  |

**NOTE to preliminary application “Attachment A” (Idleness Waiver Memorandum)**

In the Connecticut General Statutes, “abandoned,” “underutilized,” and “vacant” appear as follows:

“**Sec. 32-70. Enterprise zones. Designation. Expansion.** ...include in such zone any property …that is or was formerly used for manufacturing purposes but is underutilized or vacant at the time the property is included in such zone….”

🡺 Applies to EZ: Bridgeport, Bristol, East Hartford, Groton, Hamden, Hartford, Meriden, Middletown, New Britain, New Haven, New London, Norwalk, Norwich, Southington, Stamford, Thomaston, Waterbury, Windham.

“**Sec. 32-75a. Railroad depot zones. Regulations.** A municipality which has an enterprise zone designated under section 32-70 and an abandoned or underutilized railroad depot which is located outside of the enterprise zone may,…”

🡺 Applies to RDZ: East Hartford, Hamden, and Norwich.

“**Sec. 32-75c. Designation of properties as manufacturing plants. Qualified manufacturing plants. Regulations.** …(3) includes at least one hundred acres of land that is vacant and zoned for commercial, industrial or other economic base activity….”

🡺 Applies to DPZ, MPZ, QMP: Bristol, New Britain.

The Attachment A “idleness waiver” for abandoned, underutilized, or vacant properties is optional and does not apply to the following preliminary applications (pre-apps):

ADZ (Bradley, Groton-New London, Waterbury-Oxford), BCZ, CMZ, ECZ, ED, UJ.

**Current DECD-approved zones and DECD abbreviations**

|  |  |
| --- | --- |
| \_ Airport Development Zone | (ADZ) |
| \_ Bioscience Enterprise Corridor Zone | (BCZ) |
| \_ Contiguous Municipality Zone | (CMZ) |
| \_ Defense Plant Zone | ((DPZ) |
| \_ Enterprise Zones | (EZ) |
| \_ Enterprise Corridor Zones | (ECZ) |
| \_ Entertainment Districts | (ED) |
| \_ Manufacturing Plant Zone | (MPZ) |
| \_ Qualified Manufacturing Plant | (QMP) |
| \_ Railroad Depot Zone | (RDZ) |
| \_ Urban Jobs Program | (UJ) |

(DECD Rev. 02/15/2019)