New Hampshire Division of Economic Development
Economic Revitalization Zone Tax Credits
(Res 2500)

TAX CREDIT CERTIFICATION ~ FORM ERZ-2

Mail to:

Division of Economic Development
Program Administrator
PO Box 1856
Concord, NH 03302-1856

~Office Use Only ~		
Application Fee Received	Date	Ck/ MO #

Application Fee $100

If Check or Money Order, Make Payable to:
Treasurer – State of New Hampshire

Instructions: Follow the specific instruction given in each section and TYPE all information. **Provide** an **original and two (2) copies of completed application**, including all attachments.

SECTION A – INFORMATION

Taxpayer/Business Name: _____ _____ Telephone: _____

Address: Street/PO Box: _____

City/Town/State and Zip Code _____

Contact Person: _____ Email address: _____

Type of Business: _____ Taxpayer's Filing Period _____

ERZ Tax Credit Project eligible for the credit:

1. Previous Location:

2. New Location in an ERZ:

2. Describe the project in detail:

SECTION B – JOB INFORMATION

Instructions:

1. Provide the following information and attach additional sheets if necessary.

POSITIONS CREATED or TO BE CREATED

Position Title	# of Positions.	Hiring Date	Hours Worked Per Wk	Wage	Benefits
Totals:					

2. Duration of the project – Start Date: _____Completion Date:_____

SECTION C – DOCUMENT CHECKLIST

Instructions: Attach copies of the following with your application.

Checklist:

_____Documentation indicating detailed investment in the project – include property tax evaluation information.

_____ERZ Tax Credit Designation Letter of Certification issued to your local governing body.

SECTION D – PROJECT GUARANTEE/SIGNATURES

Instructions: Taxpayer must initial acceptance of the following guarantee.

It shall be the responsibility of the Taxpayer to guarantee that all elements of the project are completed. Failure to complete a project shall result in the Taxpayer's forfeiture of remaining credits (Res 2506.1).

_____(INITIALS)

Signature of Taxpayer: _____ Date _____

Type/Print Name: _____ Title _____

~Office Use Only~

APPROVAL:

_____ _____

Jeffrey J. Rose, Commissioner Date

Dept. of Resources of Economic Development