BEFORE THE
COMMONWEALTH DEVELOPMENT AUTHORITY

_____

In the Matter of the Application for a Qualifying Certificate	)))	Application No. _____
by	)))	**QUALIFYING CERTIFICATE** **APPLICATION**
_____ ,	))	
Applicant.	)	

In accordance with the Investment Incentive Act of 2000 (4 CMC §3301, *et seq.*), the undersigned applicant hereby requests the issuance of a Qualifying Certificate and submits the following:

Section I - Applicant

A. *Name of Applicant:*

_____

_____

_____.

B. *CNMI Mailing Address:*

_____

_____

_____.

C. *CNMI Principal Office Location Address:*

_____

_____

_____.

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D. *CNMI Telephone, Facsimile Numbers & E-mail Addresses:*

_____
_____
_____.

E. *Location of Project***:**

_____
_____
_____.

F. *Name, Address, and Contact Numbers of Applicant's Attorney or Representative, if any***:**

_____
_____
_____.

Section II - Business and Ownership Information

A. *Business Structure***:** Indicate Applicant's business structure (e.g., corporation, partnership, individual, trust, etc.). If a corporation, indicate if "Subchapter S" corporation.

_____
_____
_____.

B. *Business Activity(ies)***:** Indicate the Applicant's business activity(ies) for which the Qualifying Certificate is being sought:

_____
_____
_____.

C. *Names, Addresses, and Interests:* Indicate all persons or entities with any ownership interest in Applicant. Include each owner's full name and office held, if any; address; social security number and ownership interest or percentage.

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Name and Office Held, if any:	*Address:*	*Social Security Number:*	*Ownership Interest:*
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
_____	_____ _____	_____	_____%
			100%

*** Attach additional page(s), if necessary.

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Section III - Funds to Be Invested in Project

*Amounts by category***:** Provide funds to be invested for each activity. If proposed development involves two or more eligible activities, submit *FUNDS TO BE INVESTED IN PROJECT: Additional Activity Worksheet (CDA QC Form 2)* for each additional activity.

_____ *of* _____ *Activities*

*Activity***:** _____

Categories:	*Amounts:*

Land acquisition costs .... $ _____,

Construction costs .... $ _____,

Furniture and fixtures .... $ _____,

Equipment.. $ _____,

Inventory.. $ _____,

Salaries and miscellaneous personnel costs........................ $ _____,

Supplies .... $ _____,

Working capital .... $ _____,

Other costs (detail):

    _____ .... $ _____,

    _____ .... $ _____,

    _____ .... $ _____,

    _____ .... $ _____,

    _____ .... $ _____,

    Total Estimated Costs .... **$ _____.**

Amount from shareholders .... $ _____,

Amount to be financed .... $ _____.

Section IV - Supplemental Documents

A.   *Balance Sheets***:** If a new business, current balance sheet(s) of principal(s). If an existing business, current balance sheet(s) of Applicant(s). (Attached as Exhibit 1)

B.   *Business Organization Documents***:** Certified copies of Applicant's business organization documents (i.e., articles of incorporation, partnership agreement, trust agreement, etc.)

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indicating: organization is in accordance with the laws of the Commonwealth; current business ownership information, percentages, investments and addresses; and acceptance and certification of the business organization by the appropriate agencies of the CNMI Government. (Attached as Exhibit 2)

C.   *CNMI Business License***:** Copy of Applicant's valid business license for the proposed activity or project. (Attached as Exhibit 3)

D.   *Business Plan***:** A comprehensive business plan covering Applicant's Project, including Market Analysis, Direct/Indirect Impact to Industry and Community, Project Description, Company Portfolio with Goals and Objectives, Number of Employees, Employee Benefits Package, and Multi-Year Financial Plan (Income, Balance, and Cash Flow Statements and Financial Forecast and Assumptions. Plan should cover the years the benefits are to be received. (Attached as Exhibit 4)

E.   *Land Documents***:**   Recorded Maps showing project location and lot description (Attached as Exhibit 5a); Recorded Land Documents that establish the applicant's ownership interest in the land on which the applicant's project is or is to be located, and, if requested, a Current Title Report indicating that such ownership interest has not been transferred or limited in a manner that would prevent the project from proceeding or succeeding (Attached as Exhibit 5b), and a Lease Agreement, if property is being leased. (Attached as Exhibit 5c)

F.   *Certificate of Tax Compliance***:** To be obtained from the CNMI Division of Revenue and Taxation. (Attached as Exhibit 6)

G.   *Economic Impact Study***:** An Economic Impact Study showing the importance of the proposed activity(ies) to the economy of the CNMI and to the official economic policies of the CNMI government. (Attached as Exhibit 7)

H.   *Notarized Affidavit of Qualifying Certificate Applicant* (CDA QC Form 3)

I.   *Release of Information Authorization* (CDA QC Form 4)

Section V - Land for Project

A.   *Project's Area***:** The land for the Project as described in Section IC, *supra*, contains an area of _____ (_____) square meters. *See* Exhibit 5a.

B. *Approximate Value Excluding Improvements:* _____
Dollars ($_____), based on a unit value of _____
Dollars ($_____) per square meter. *See* Section III, *supra*.

C. **Tenure:** Applicant holds or will hold the land in: ☐fee simple ☐leasehold.
If leasehold, term of lease and expiration: _____.

D. *Annual Rental, if any:* _____ Dollars ($_____).

Section VI - Buildings

A. *Number and types of buildings and improvements to be used in the Project, with approximate floor spaces, if known:*

_____
_____
_____.

B. *Cost:* Approximately _____ Dollars ($_____).
See Section III, *supra.*

C. *Annual Rental, if any*: _____ Dollars ($_____).

Section VII - Goods/Services and Public Contributions

A. *Description of Goods/Services to be offered to the public upon project completion:*

_____
_____
_____.

B. *Public Contributions:* The Beneficiary's investment in or creation of public
improvements separate from its proposed activities, establishment of in-house training programs, or
contribution to an independent training program or scholarship fund to be considered in the
recommendation of specific tax benefits.

_____
_____
_____.

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Section VIII - Employees

A.   *Anticipated Total Number of Employees:* _____ (_____)
full-time employees; _____ (_____) part-time employees.

B.   *Classification, Number and Annual Gross Payroll of Proposed Number of
Employees for the first (1st) year of operation:*

Classification:	*Number:*	*Annual Gross Payroll:*
Managerial	_____	$ _____
Non-managerial	_____	$ _____
Total:	_____	**$ _____**

C.   *Residency Composition of Proposed Total Number of Employees after first (1st)
year of operation:*

Managerial Class:	*Number:*
Residents of the CNMI:	_____
Non-residents of the CNMI:	_____

Non-managerial Class:	*Number:*
Residents of the CNMI:	_____
Non-residents of the CNMI:	_____

Section IX - Business References

Name: *Address:*

A. _____   _____

                                                                      _____

B. _____   _____

                                                                      _____

C. _____   _____

                                                                      _____

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Section X - Conclusion

A. *Statement of Entitlement***:** Attach as Exhibit 8 a brief statement of why Applicant believes the Project should receive a favorable recommendation from CDA and a Qualifying Certificate from the Governor.

B. *Statement of Benefits to the CNMI***:** Attach as Exhibit 9 a brief statement of how the CNMI stands to benefit from such project.

C. *Request for Qualifying Certificate***:** On the basis of the information presented in this application and the accompanying exhibits, Applicant hereby requests for the issuance of a Qualifying Certificate by the Governor of the CNMI, upon the recommendation of CDA, granting to Applicant the tax relief provided by 4 CMC §3301, *et seq.*, as follows:

Nature of Tax:
(specify if rebate or abatement):   *Percentage Requested:*   *Period Requested:*

_____   _____%   _____ years,

_____   _____%   _____ years,

_____   _____%   _____ years,

_____   _____%   _____ years.

D. *Execution***:**

I HEREBY CERTIFY THAT: All information contained above and in exhibits attached hereto are true and complete to the best knowledge and belief of the applicant(s) and are submitted for the purpose of inducing CDA to recommend to the Governor of the CNMI issuance of a Qualifying Certificate to the applicant(s).

EXECUTED this _____ day of _____, 20_____.

APPLICANT

By: _____

Its: _____

COMMONWEALTH OF THE   )
NORTHERN MARIANA ISLANDS,   )
) ss:
)
_____.   )

       On this _____ day of _____, 20____, before me, a notary public in and for the Commonwealth of the Northern Mariana Islands, personally appeared _____, known to me to be the duly authorized representative of _____, who executed the foregoing application, and he acknowledged to me that such applicant and entity executed the same.

       WITNESS my hand and official seal.

_____   )SEAL(

                                  CDA QC Form 1 (02/02)