



Aviation Real Estate Tax Reimbursement - Agreement Applicant Instructions eGrants

Document History

The table below serves as a document history log to track the version number, date, and description of each change/revision applied to this document.

Version	Date	Version / Revision Description
1.0	7/21/2021	Final version delivered
1.1	8/10/2022	Updated screenshots
1.2	10/31/2022	Updated based on the new changes

Table 1. Document History

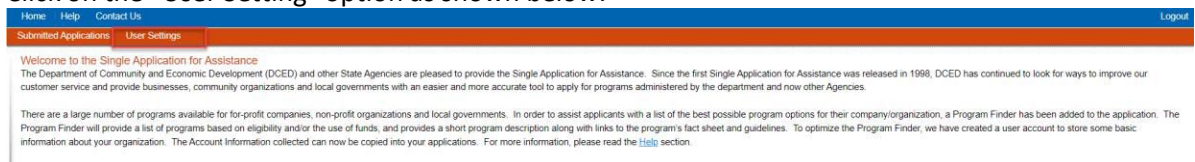
How to Apply for Real Estate Tax Reimbursement – Agreement Grant Funding

Pennsylvania’s Aviation Real Estate Tax Reimbursement program requires all applications to be filed electronically using the eGrants Public Portal Interface at <https://grants.pa.gov/>. Applications are best and applied by using **Edge and Chrome**.

Log in to the Aviation Real Estate Tax Reimbursement Application Site and Complete the Application

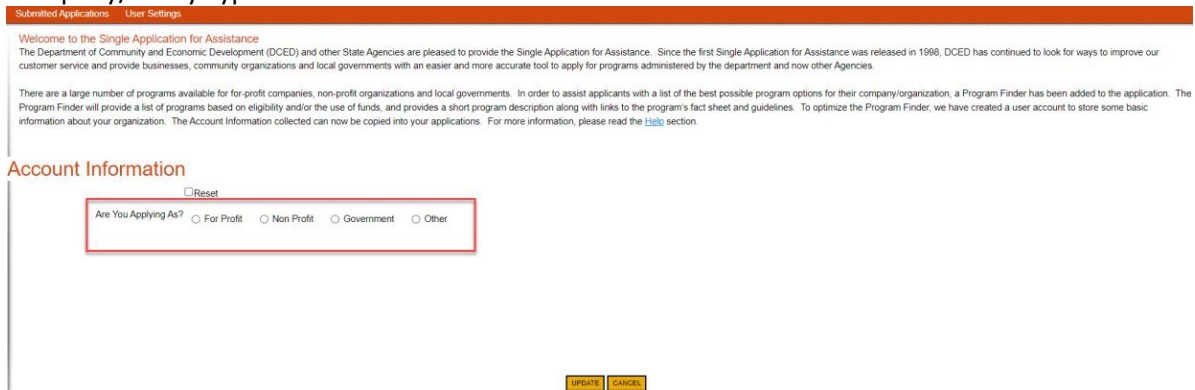
- Log into the eGrants Public Portal Interface at <https://grants.pa.gov/> using the Keystone username and password.
- “User Setting” option is used to collect the user account information and information collected in the user setting can be copied into your applications. Please follow the below steps to enter user account information:

- Click on the “User Setting” option as shown below:



The screenshot shows the top navigation bar with 'Home', 'Help', 'Contact Us', and 'Logout'. Below it, 'Submitted Applications' and 'User Settings' are visible. The main content area contains a welcome message and a 'Program Finder' section.

- Select an option for “Are You Applying As?” Selection will determine the choices available under Company/Entity Type.



The screenshot shows the 'Account Information' section with a 'Reset' link. The 'Are You Applying As?' field has four radio button options: 'For Profit', 'Non Profit', 'Government', and 'Other'. Below the form are 'UPDATE' and 'CANCEL' buttons.

- Enter the Company/Entity Type, Federal Employers Identification Number (FEIN) of the company/organization (do not enter the dash) applying for the application, and another required field. Click Update.

Note: All fields with a red diamond are required and must be completed.

Account Information

Reset

Are You Applying As? For Profit Non Profit Government Other

Company/Entity Type: Limited Liability Partnership Partnership
 Sole Proprietorship Limited Liability Company
 S Corporation C Corporation
 Individual

FEIN:

SAP Vendor #:

Incorporated in PA? Yes

Registered to do business in PA? Yes

Company/Entity Name:

Top Official/Signing Authority:

Title:

Application Contact Name:

Application Contact Title:

Phone: Ext.
(xxx-xxx-xxxx)

Fax:

E-mail:

Mailing Address:

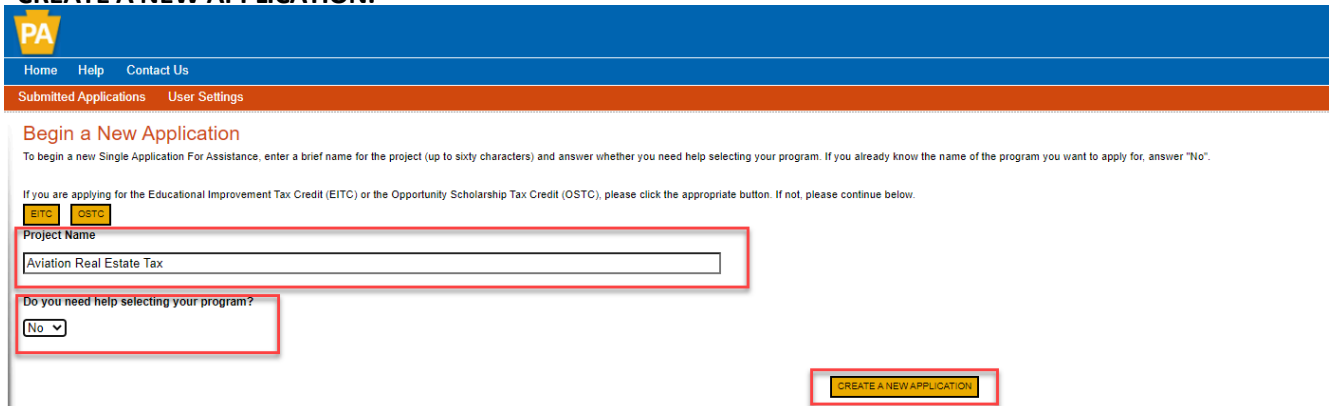
City:

State: PA

Zip Code:



- Enter the Project Name, select No in the “Do you need help selecting your program?” dropdown, and click **“CREATE A NEW APPLICATION.”**



PA

Home Help Contact Us

Submitted Applications User Settings

Begin a New Application

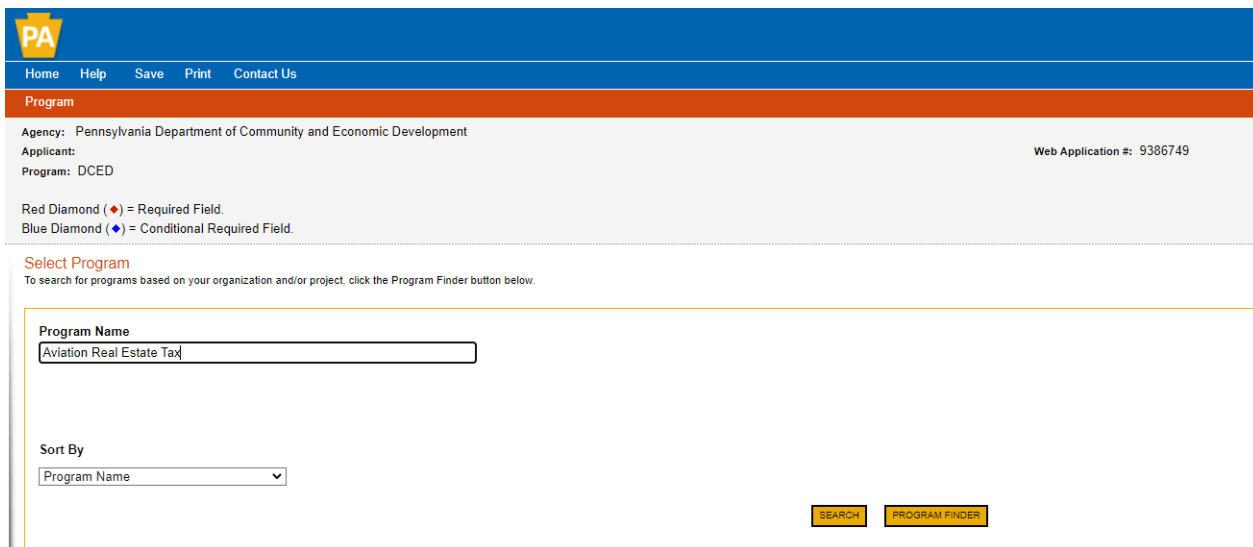
To begin a new Single Application For Assistance, enter a brief name for the project (up to sixty characters) and answer whether you need help selecting your program. If you already know the name of the program you want to apply for, answer "No".

If you are applying for the Educational Improvement Tax Credit (EITC) or the Opportunity Scholarship Tax Credit (OSTC), please click the appropriate button. If not, please continue below.

Project Name

Do you need help selecting your program?

- Enter “Aviation Real Estate Tax” under the Program Name section and click “Search.”



PA

Home Help Save Print Contact Us

Program

Agency: Pennsylvania Department of Community and Economic Development
 Applicant: Web Application #: 9386749
 Program: DCED

Red Diamond (◆) = Required Field.
 Blue Diamond (◆) = Conditional Required Field.


Select Program
 To search for programs based on your organization and/or project, click the Program Finder button below.

Program Name

Sort By

SEARCH PROGRAM FINDER

- Click on the Apply button next to **“Aviation Real Estate Tax Reimbursement Program – Agreement.”**

Aviation Real Estate Tax Reimbursement Program – Agreement 

Pennsylvania Department of Transportation

To participate in the program, the airport owner must agree to continue to maintain the property for which a grant is sought as a public airport, at least equal in size and capacity to its size and capacity as indicated on an initial grant application, for a period of not less than ten years from the date of the most recent grant. This agreement must be completed prior to submitting a reimbursement request for taxes paid.

**NOTE: A new agreement is required for each Sponsor in 2020 to begin or continue participation in the program. The signed agreement will then be used for subsequent program year applications.

Instructions for the program can be found here: [Agreement Application Instructions](#)

- Answer the questions below and click Continue.

REVIEW INFORMATION BELOW

- Before you can apply for Aviation Real Estate Tax Reimbursement Program – Agreement, you must complete the Pre-Application Requirements section below.

Requirements

Are you submitting an application for an airport or heliport listed as a public airport? ◆

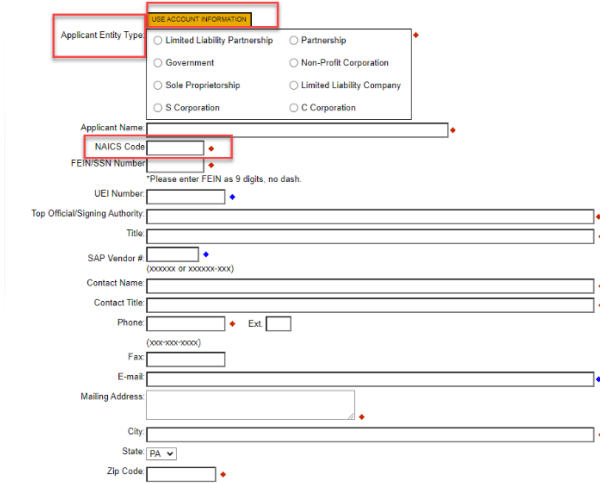
Is the airport publicly owned?

[Continue](#)

- Navigate through the seven (7) application sections using the top row of orange tabs or the **Continue** button at the bottom of each section:
 - Applicant:** select “Sole Proprietorship” in the Applicant Entity Type, enter “8141” in the NAICS code field, complete other required information, and click Continue.

Note: Applicant information should specify the airport name/address.

Applicant Information
To copy your Registration information into the application, click the "Use Account Information" button below:



The screenshot shows a web form titled "Applicant Information". At the top, there is a button labeled "USE ACCOUNT INFORMATION" in a yellow box. Below it is a dropdown menu for "Applicant Entity Type" with a red box around it, showing options: Limited Liability Partnership, Partnership, Government, Non-Profit Corporation, Sole Proprietorship, Limited Liability Company, S Corporation, and C Corporation. Below the dropdown is a text field for "Applicant Name". Underneath is a "NAICS Code" field with a red box around it, containing the value "8141". Below that is a "FEIN/SSN Number" field with a red box around it, containing a redacted value. A note says "Please enter FEIN as 9 digits, no dash:". Below this are fields for "UEI Number", "Top Official/Signing Authority" (with "Title" sub-field), "SAP Vendor #", "Contact Name", "Contact Title", "Phone" (with "Ext." sub-field), "Fax", "E-mail", "Mailing Address", "City", "State" (with a dropdown menu showing "PA"), and "Zip Code".

Continue

2. Company:

- If the company name/address is different from the airport, please fill out this section as shown below.

Notes:

1. Select "Sole Proprietorship" in the Applicant Entity Type, enter "8141" in the NAICS code field, choose others in Enterprise Type, complete other required information, and click Continue.
2. If the company name/address is different from the airport, to ensure your subsequent requests for reimbursement process properly, please update the details on the Commonwealth vendor system (also known as SAP Vendor account) to reflect both company and airport information. If you need to change a payment address or create a new payment address, information and forms to complete the change can be found at: <https://www.budget.pa.gov/Services/ForVendors/Pages/Non-Procurement-Help.aspx>. Discrepancies between your tax documents, reimbursement request, and/or vendor account details will result in delays and possible denial of your reimbursement.
3. If the company name/address is the same as the airport, click on the "Copy from Applicant" option as shown below. Click Continue.

Company Information

COPY FROM APPLICANT

Company Entity Type: Limited Liability Partnership Partnership
 Government Non-Profit Corporation
 Sole Proprietorship Limited Liability Company
 S Corporation C Corporation

Company Name: _____

NAICS Code: _____

FEIN: _____
*Please enter FEIN as 9 digits, no dash.

UEI Number: _____

Top Official/Signing Authority: _____
 Title: _____

SAP Vendor #: _____
(xxxxxx or xxxxxx-xxxx)

Contact Name: _____
 Contact Title: _____

Phone: _____ Ext. _____
(xxx-xxx-xxxx)

Fax: _____

E-mail: _____

Mailing Address: _____
 City: _____

State: PA

Zip Code: _____

Business Specifics

Current # of Full-time Employees:
(in PA) _____
(total state) _____

Minority Owned: No Yes - (Ethnicity is optional) N/A
 Subject: _____

Woman Owned: No Yes N/A

Total Sales \$: _____

Total Export Sales \$: _____

R&D Investment: _____ % of Budget

Employee Training Investment: _____ % of Budget

Enterprise Type

Indicate the types of enterprises that describe the organization listed above. You may select more than one type.

<input type="checkbox"/> Admitted Technology	<input type="checkbox"/> Agri-Processor	<input type="checkbox"/> Agri-Processor	<input type="checkbox"/> Authority	<input type="checkbox"/> Biotechnology / Life Sciences
<input type="checkbox"/> Business Financial Services	<input type="checkbox"/> Call Center	<input type="checkbox"/> Child Care Center	<input type="checkbox"/> Commercial	<input type="checkbox"/> Community Dev. Provider
<input type="checkbox"/> Computer & Control Operators	<input type="checkbox"/> Defense Related	<input type="checkbox"/> Economic Dev. Provider	<input type="checkbox"/> Educational Facility	<input type="checkbox"/> Emergency Responder
<input type="checkbox"/> Environment and Conservation	<input type="checkbox"/> Event Facility	<input type="checkbox"/> Export Manufacturing	<input type="checkbox"/> Export Service	<input type="checkbox"/> Food Processing
<input type="checkbox"/> Government	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Industrial	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Mining	<input type="checkbox"/> Other	<input type="checkbox"/> Professional Services	<input type="checkbox"/> Recycling	<input type="checkbox"/> Regional & National Headquarters
<input type="checkbox"/> Research & Development	<input type="checkbox"/> Retail	<input type="checkbox"/> Social Services Provider	<input type="checkbox"/> Tourism Promotion	<input type="checkbox"/> Warehouse & Terminal

Continue

3. **Project Site:** enter Address, City, and Zip Code and select County and Municipality. Click Continue.
Note: Address, City, and Zip Code are not required fields.

Project Site Location(s)

Site 1

Address:

City:

State: PA

Zip Code:

County:

Municipality:

PA House:

PA Senate:

Designated Areas:

Act 47 Distressed Community Brownfield

Enterprise Zone Greenfield

Keystone Innovation Zone Keystone Opportunity Zone

Prime Agricultural Area Uses PA Port

[Continue](#)

4. **Narrative:** click Continue.

Project Narrative

Adequate answers to the Project Narrative questions below are required. Uploaded attachments or mailed documents are no longer permitted in this section of the application. If a more detailed narrative is required for the Program selected, instructions will either be provided in the Addenda section or the Program Guidelines.

Project Description

Description of Proposed Project.

Character Count: 117/2000 characters

Requesting to participate in the Real Estate Tax Reimbursement Program and agreeing to meet all program requirements.

[Continue](#)

5. **Signing Authority:** enter the authorized official user(s) information. Click Continue.

Signing Authority

Signing Authority

Title <input type="text"/>	First Name <input type="text"/>	Last Name <input type="text"/>	Email <input type="text"/>	Add	Cancel
No data has been entered.					

[Continue](#)

6. **Certification:** Click the Electronic Signature Agreement checkbox and select the applicable option. Click the Notice checkbox and then click "Submit Application."

Application Certification

All of the required sections of the web application have been completed. If you have reviewed the application, you may submit it for processing. After submitting, you will no longer be able to make changes.

Electronic Signature Agreement:

By checking this box and typing your name in the below textbox, I hereby certify that all information contained in the single application and supporting materials submitted via the internet and its attachments are true and correct and accurately represent the status and economic condition of the Applicant, and I also certify that, if applying on behalf of the applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand that if I knowingly make a false statement or overvalue a security to obtain a grant and/or loan from the Commonwealth of Pennsylvania, I may be subject to criminal prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

I am the applicant.

I am an authorized representative of the company, organization or local government.

Type Name Here:

Electronic Attachment Agreement:

NOTICE

By submitting an application for this grant program, Applicant expressly acknowledges and confirms that the signatures affixed to any document submitted to the Pennsylvania Department of Transportation (PennDOT) through eGrants comply with all legal requirements applicable to the Applicant organization and are legally binding. PennDOT will rely on the signatures as originating from persons possessing requisite legal authority to contractually bind the Applicant, and if awarded a grant, the Grantee.

You will be given an opportunity to print the signature page along with a copy of the application immediately after you submit.

[SUBMIT APPLICATION](#)

Note: After application submission, the system generates a Single Application Id # and a Web Application Id # as shown in the below screenshot. Please keep the web application Id # for future reference.

Application Certification

Single Application ID #: 202210314199

I have certified that all information contained in the single application and supporting materials submitted via the Internet, Single Application # 202210314199 and its attachments are true and correct and accurately represent the status and economic condition of the Applicant, and I also certified that, if applying on behalf of the applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand that if I knowingly make a false statement or overvalue a security to obtain a grant and/or loan from the Commonwealth of Pennsylvania, I may be subject to criminal prosecution in accordance with 18 Pa C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

NOTICE
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You will be given an opportunity to print the signature page along with a copy of the application immediately after you submit.

[Print Signature Page only](#)
[Print Entire Application with Signature Page](#)

The signature page or full application may also be printed/saved from the links above. You may also print/save previously submitted applications from the Home page. Click the link labeled "Submitted Applications" in the top toolbar.

Questions

All questions regarding the program should be directed to:

Justin Palmer - PennDOT
(717) 705-1237 | jupalmer@pa.gov

Tony McCloskey - PennDOT
(717) 705-1200 | amccloskey@pa.gov

All questions regarding the application submission process should be directed to:

Heather Graham – PennDOT
(717) 705-1191 | HEGRAHAM@pa.gov