

OPPORTUNITY ZONE CERTIFICATION

Please note that the business should complete Part One of this form and then forward to the local Opportunity Zone (OZ) coordinator. The OZ coordinator will have the information certified in Part Two and forward it to DCA. DCA will acknowledge the Certification and provide copies back to the business and the local OZ coordinator. It is the business' responsibility to attach the correspondence received with the acknowledged Certification to any tax return in which the Job Tax Credit is being claimed.

The information provided below is intended to validate the location of a business in a currently designated Opportunity Zone. Please complete all detail requested.

Part One:

Name of Business: _____

Address Location within OZ: _____

Mailing Address, if different from above: _____

By signing below, I hereby certify that the business location above is within the eligible boundaries of a designated Opportunity Zone as defined in O.C.G.A. 48-7-40.1(c)(4) and the business intends to claim a Job Tax Credit for this location on it's Georgia Income Tax Return.

Signature of Officer for above-named Business

Date

Printed Name and Title of Officer

Contact Phone Number

Contact Person

Contact Email Address

Part Two:

Local Opportunity Zone Jurisdiction

Census Block Group of OZ Location (12-digit number): _____

For filers requiring County Code and Census Tract Numbers - GA State Code – 1st 2 digits = 13, County Code – next 3 digits, Census Tract – next 6 digits (4 digit, dot, 2 digit decimal point – e.g. 0104.02), Block Group Number – last digit

Jurisdiction and Name of Opportunity Zone Area _____

Expiration of Opportunity Zone December 31, _____

Parcel Number of OZ location: _____

By signing below, I certify that I am an authorized representative of a valid Opportunity Zone jurisdiction and that the business location detailed above is within the currently designated boundaries of the Opportunity Zone.

Signature of Local Jurisdiction Representative

Date

Printed Name of Representative

Title

Department Use Only

Mailing Address:
Job Tax Credit Program Coordinator
Georgia Department of Community Affairs
60 Executive Park South, N.E.
Atlanta, GA 30329

Accepted:

Date

By

***** A COPY OF THIS COMPLETED CERTIFICATION FORM MUST BE ATTACHED TO THE TAX RETURN FILED WITH THE DEPARTMENT OF REVENUE WHEN CLAIMING THE CREDIT*****