PROJECT SUMMARY

GENERAL

Name of Project__________________________________________________________

Location of Project__________________________________________________________

Urban Renewal Area _____ Empire Zone_____ Brownfield_____ Vacant_____ Blighted_____  

PROJECT TYPE

Industrial_____ Not-for-Profit_____ Commercial_____ Office_____ Other_____  

Housing_____ Manufacturing_____ Retail_____ Services_____

KEY DATES

Application Submitted____________________ Proposed Public Hearing______________________

PROJECT SIZE

Acreage_______ Building Sq Ft_______________ New Construction (sq. ft.)___________________  

Add Rehab/Expansion (sq. ft.)______________ Estimated Project Cost______________________

TYPE OF ASSISTANCE REQUESTED

Tax Exempt Bonds_____ Taxable Bonds_____  

Sales Tax_____ Mortgage Recording Tax_____ Real Property Tax Deferment_____  

Standard 485-b___________ Not-for-Profit_________ Double 485B__________  

Affordable Housing________ Downtown Policy________  

Other________ Additional_________

JOBS/PAYROLL (Estimated)

Retained Jobs________ Current Payroll_________________________ Avg. Annual Wage________  

New Jobs________ Projected Payroll___________ New Avg. Annual Wage________  

Construction Jobs____ Avg. Wage________

ASSESSED VALUE/TAXES

Current Assessed Value_________________________ Projected Increase AV________________________  

Current Taxes_________________________ Projected Increase in Taxes_________________________
APPLICATION FOR FINANCIAL ASSISTANCE

Date ________________

APPLICATION OF: ______________________________________________________________

Name of owner/user of Proposed Project

____________________________________________________________

Address

Type of Application: □ Tax-Exempt Bond □ Taxable Bond
□ Straight Lease □ Refinance
□ Not-for-Profit □ Other

Please respond to all items either by filling in blanks, by attachment (by marking space “See Attachment Number 1,” etc.) or by N.A., where not applicable. Unless otherwise directed, this application must be filed in 1 copy and forwarded electronically. A non-refundable application fee is required at the time of submission of this application to the Riverhead Industrial Development Agency (the “Agency”). The non-refundable application fee is $2,000 for applications under $5 million and $4,000 for applications for $5 million or more. This fee will be applied to the Agency’s Administrative Fee at closing.

If applicable and at the time of inducement, Bond Counsel/Transaction Counsel will require a $3,000 deposit which will be applied to actual out-of-pocket disbursements made during the inducement and negotiation processes, and will be reflected on their final statement at closing.

Information provided herein will not be made public by the Agency prior to the passage of an Official Inducement Resolution, but may be subject to disclosure under the New York State Freedom of Information Law.

PLEASE NOTE: Prior to submitting a completed final application, please arrange to meet with the Agency’s staff to review your draft application.

www.riverheadida.org
INDEX

| PART I     | OWNER AND USER DATA         |
| PART II    | OPERATION AT CURRENT LOCATION |
| PART III   | PROJECT DATA                |
| PART IV    | PROJECT COSTS AND FINANCING |
| PART V     | PROJECT BENEFITS            |
| PART VI    | EMPLOYMENT DATA             |
| PART VII   | REPRESENTATIONS, CERTIFICATIONS AND INDEMNIFICATION |
| PART VIII  | SUBMISSION OF MATERIALS     |
| PART IX    | CERTIFICATION               |

EXHIBIT A       | Proposed PILOT Schedule     |
SCHEDULE A      | Agency’s Fee Schedule       |
SCHEDULE B      | Local Labor Policy          |
SCHEDULE C      | Recapture Policy            |
Please answer all questions. Do not leave blanks. Answer N/A where applicable.

Part I: Owner & User Data

1. Owner Data:

   A. Owner of Facility (Applicant for assistance): ______________________________________
      (Company Name)

      Address: __________________________________________
      __________________________________________
      __________________________________________

      Federal Employer ID #: ___________________ Website: ______________________

      NAICS Code: ____________________________

      Owner Officer Certifying Application: ____________________________

      Title of Officer: ____________________________

      Phone Number: ____________________________ E-mail: ____________________________

   B. Business Type:

      Sole Proprietorship ☐ Partnership ☐ Privately Held ☐
      Public Corporation ☐ Listed on ______________

      Date & State of Incorporation/Formation: ____________________________

   C. Nature of Business:
      (e.g., “manufacturer of _____ for ____ industry”; “distributor of _____”; or “real estate holding company”)

      __________________________________________

   D. Owner Counsel:

      Firm Name: ________________________________

      Address: __________________________________
      __________________________________________
      __________________________________________

      Individual Attorney: ________________________

      Phone Number: ____________________________ E-mail: ____________________________
E. Principal Stockholders, Members or Partners, if any, of the Owner (5% or more equity):

<table>
<thead>
<tr>
<th>Name</th>
<th>Percent Owned</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

F. Has the Owner, or any subsidiary or affiliate of the Owner, or any stockholder, partner, member, officer, director or other entity with which any of these individuals is or has been associated with:

i. ever filed for bankruptcy, been adjudicated bankrupt or placed in receivership or otherwise been or presently is the subject of any bankruptcy or similar proceeding? (if yes, please explain)

____________________________________________

ii. been convicted of a felony, or misdemeanor, or criminal offense (other than a motor vehicle violation)? (if yes, please explain)

____________________________________________

G. If any of the above persons (see “E”, above) or a group of them, owns more than 50% interest in the Owner, list all other organizations which are related to the Owner by virtue of such persons having more than a 50% interest in such organizations.

____________________________________________

____________________________________________

H. Is the Owner related to any other organization by reason of more than a 50% ownership? If so, indicate name of related organization and relationship:

____________________________________________

____________________________________________

I. List parent corporation, sister corporations and subsidiaries:

____________________________________________
J. Has the Owner (or any related corporation or person) been involved in or benefited by any prior industrial development financing in the municipality in which this project is located, whether by this agency or another issuer? If so, explain in full:

______________________________________________________________________________

                                                                                                                                                      

K. Has the Owner/Company made a public offering or private placement of stock within the last 3 years? If so, please describe and provide the Offering Statement used.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

L. List major bank references of the Owner:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

2. **User Data**
   **(for co-applicants for assistance or where a landlord/tenant relationship will exist between the owner and the user)**

   A. User (together with the Owner, the “Applicant”): ________________________________

      (Company Name)

      Address: _____________________________________________________________

      _____________________________________________________________

      Federal Employer ID #: _____________   Website: ____________________________

      NAICS Code: __________________

      User Officer Certifying Application: ________________________________________

      Title of Officer: __________________________

      Phone Number: ________________________   E-mail: ________________________
B. Business Type:

Sole Proprietorship □  Partnership □  Privately Held □

Public Corporation □  Listed on ____________

Date and State of Incorporation/Formation: ____________________________

C. Nature of Business:

(e.g., “manufacturer of _____ for ____ industry”; “distributor of ____”; or “real estate holding company”)

________________________________________________________________________

D. Are the User and the Owner Related Entities?  Yes □  No □

i. If yes, the remainder of the questions in this Part I, Section 2 (with the exception of “F” below) need not be answered if answered for the Owner.

ii. If no, please complete all questions below.

E. User’s Counsel:

Firm Name: ____________________________  Phone Number: ______________

Address: ______________________________  E-mail: ______________________

Individual Attorney: ______________________

F. Principal Stockholders or Partners, if any (5% or more equity):

<table>
<thead>
<tr>
<th>Name</th>
<th>Percent Owned</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____________________________</td>
<td>______________</td>
</tr>
<tr>
<td>_____________________________</td>
<td>______________</td>
</tr>
<tr>
<td>_____________________________</td>
<td>______________</td>
</tr>
</tbody>
</table>

G. Has the User, or any subsidiary or affiliate of the User, or any stockholder, partner, officer, director or other entity with which any of these individuals is or has been associated with:

i. ever filed for bankruptcy, been adjudicated bankrupt or placed in receivership or otherwise been or presently is the subject of any bankruptcy or similar proceeding? (if yes, please explain)

________________________________________________________________________

________________________________________________________________________
ii. been convicted of a felony or criminal offense (other than a motor vehicle violation)? (if yes, please explain)

________________________________________________________________________

H. If any of the above persons (see “E”, above) or a group of them, owns more than 50% interest in the User, list all other organizations which are related to the User by virtue of such persons having more than a 50% interest in such organizations.

________________________________________________________________________

I. Is the User related to any other organization by reason of more than a 50% ownership? If so, indicate name of related organization and relationship:

________________________________________________________________________

J. List parent corporation, sister corporations and subsidiaries:

________________________________________________________________________

K. Has the User (or any related corporation or person) been involved in or benefited by any prior industrial development financing in the municipality in which this project is located, whether by this agency or another issuer? (Municipality herein means city, town or village, or if the project is not in an incorporated city, town or village, the unincorporated areas of the county in which it is located.) If so, explain in full:

________________________________________________________________________

L. List major bank references of the User:

________________________________________________________________________
Part II – Applicant’s Operation at Current Location

**(This section seeks information related to the current location of the applicant’s business operations. If the Owner and the User are unrelated entities, please answer separately for each.)**

1. Current Location Address: ______________________________________________________

2. Owned or Leased: ______________________________________________________________

3. Describe your present location (acreage, square footage, number buildings, number of floors, etc.):
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

4. Type of operation (manufacturing, wholesale, distribution, retail, etc.) and products and/or services at this location:
   __________________________________________________________
   __________________________________________________________

5. Are other facilities or related companies of the Applicant located within the State?
   Yes ☐ No ☐
   A. If yes, list the Addresses:
   __________________________________________________________

6. Will the completion of the project result in the removal of such facility or facilities from one area of the state to another OR in the abandonment of such facility or facilities of the Applicant located within the State? Yes ☐ No ☐
   A. If no, explain how current facilities will be utilized: ________________________________
   __________________________________________________________
   B. If yes, please indicate whether the project is reasonably necessary for the Applicant to maintain its competitive position in its industry or remain in the State and explain in full:
   __________________________________________________________
   __________________________________________________________

7. Has the Applicant actively considered sites in another state? Yes ☐ No ☐
   A. If yes, please list states considered and explain: ________________________________
   __________________________________________________________
8. Is the requested financial assistance reasonably necessary to prevent the Applicant from moving out of New York State?  Yes □  No □
   A. Please explain: _____________________________________________________________

9. Have you contacted or been contacted by other Local, State and/or Federal Economic Development Agencies? Yes □  No □
   A. Please explain: _____________________________________________________________

10. Number of full-time employees at current location and average salary: ____________________________

11. Current annual payroll: ____________________________

-----------------------------------------------

Part III – Proposed Project Data

1. Project Type:
   A. What type of transaction are you seeking?: (Check one)
      Straight Lease □  Taxable Bonds □  Tax-Exempt Bonds □  
      Equipment Lease Only □
   B. Type of benefit(s) the Applicant is seeking: (Check all that apply)
      Sales Tax Exemption □  Mortgage Recording Tax Exemption □  
      PILOT Agreement: □  Bond Financing: □

2. Location of proposed project:
   A. Street Address: __________________________________________________________
   B. Tax Map: District _____  Section _____  Block _____  Lot(s) _________
3. **Project Components (check all appropriate categories):**

   A. **Acreage:**

   B. **Construction of a new building**
      i. **Square footage:**

   C. **Acquisition of an existing building**
      i. **Square footage of existing building:**

   D. **Construction of addition to an existing building**
      i. **Square footage of addition:**
      ii. **Total square footage upon completion:**

   E. **Renovations of an existing building**
      i. **Square footage:**

   F. **Demolition of an existing building**
      i. **Square footage:**

   G. **Installation of machinery and/or Equipment**
      i. **List principal items or categories of equipment to be acquired:**

   H. **Will any energy saving technology be utilized in the project?**

   I. **Will the project utilize or install renewable energy or apply for LEED Certification?**

4. **Current Use(s) at Proposed Location:**

   A. **Present use of the proposed location:**

   B. **Does the Applicant currently hold fee title to the proposed location?**
      i. **If no, please list the present owner of the site:**
      ii. **If yes, indicate:**
         a) **Date of Purchase**
         b) **Purchase Price**
         c) **Balance of existing mortgage**
         d) **Holder of mortgage**
         e) **Special conditions**

   C. **Is there an option or contract to purchase the site?**
D. Is there an existing or proposed lease for the site?  □ Yes  □ No

E. If yes to C. or D. above, please attach a copy of the option, contract or lease and indicate:
   i. Date signed:________________________________________
   ii. Purchase Price:_____________________________________
   iii. Proposed settlement/closing date:_______________________

F. Is the proposed property subject to an IDA transaction?  □ Yes  □ No
   If yes, please explain:_____________________________________

5. Proposed Use:

A. Describe the specific operations of the Applicant or other users to be conducted at the project site:
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

B. Proposed product lines and market demands:____________________
   _______________________________________________________
   _______________________________________________________

C. If any space is to be leased to third parties, indicate the tenant(s), total square footage of the project to be leased to each tenant, and the proposed use by each tenant (an additional sheet may be used):
   _______________________________________________________
   _______________________________________________________

D. Will any portion of the project be used for the making of retail sales to customers who personally visit the project location?  □ Yes  □ No
   i. If yes, what percentage (sq footage) of the project location will be utilized in connection with the sale of retail goods and/or services to customers who personally visit the project location?
   _______________________________________________________

E. Existing Assessed Land Value from latest tax bill:____________________
   Total Assessed Value from latest tax bill:_____________________
   Current Tax amount on property:____________________________
Retail Questionnaire

To ensure compliance with Section 862 of the New York General Municipal Law, the Agency requires additional information if the proposed Project is one where customers personally visit the Project site to undertake either a retail sale transaction or to purchase services.

Please answer the following:

A. Will any portion of the project consist of facilities or property that are or will be primarily used in making sales of goods or services to customers who personally visit the project site?

☐ Yes or ☐ No. If the answer is yes, please continue. If no, proceed to section V

For purposes of Question A, the term “retail sales” means (i) sales by a registered vendor under Article 28 of the Tax Law of the State of New York (the “Tax Law”) primarily engaged in the retail sale of tangible personal property (as defined in Section 1101(b)(4)(i) of the Tax Law).

B. What percentage of square feet of the Project will be primarily used in making sales of goods or services to customers who personally visit the project? ____________ %.

If the answer is less than 33% do not complete the remainder of the retail determination and proceed to page 11, Adaptive Reuse.

If the answer to A is Yes AND the answer to Question B is greater than 33.33%, indicate which of the following questions below apply to the project:

1. Is the Project location or facility likely to attract a significant number of visitors from outside the economic development region (Long Island) in which the project will be located?

☐ Yes or ☐ No

If yes, please provide a third party market analysis or other documentation supporting your response.

3. Is the predominant purpose of the project to make available goods or services which would not, but for the project, be reasonably accessible to the residents of the municipality within which the proposed project would be located because of a lack of reasonably accessible retail trade facilities offering such goods or services?

☐ Yes or ☐ No

If yes, please provide a third party market analysis or other documentation supporting your response.

4. Will the project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York?

☐ Yes or ☐ No.

If yes, explain ________________________________

5. Is the project located in a Highly Distressed Area? ☐ Yes or ☐ No
Adaptive Reuse Determination

(Adaptive Reuse is the process of adapting old structures or sites for new purposes)

A) What is the age of the structure (in years) __________________________

B) Has the structure been vacant or underutilized for a minimum of 3 years? (Underutilized is defined as a minimum of 50% of the rentable square footage of the structure not being utilized or being utilized for a use for which the structure was not designed or intended) ☐ Yes or ☐ No. How many years? __________________________

C) Is the structure currently generating insignificant income? (Insignificant income is defined as income that is 50% or less than the market rate income average for that property class) ☐ Yes or ☐ No

If yes, what is the current market rate average income for this type of property: __________________________ and please provide dollar amount of income currently being generated, if any: __________________________

D) Does the site have historical significance? ☐ Yes or ☐ No

E) Are you applying for either State/Federal Historical Tax Credit Programs? ☐ Yes or ☐ No. If yes, provide estimated value of tax credits __________________________

F) Summarize the financial obstacles to development that this project faces without Agency or other public assistance. Please provide the Agency with documentation to support the financial obstacles to development (you may be asked to provide cash flow projections, documenting costs, expenses and revenues with and without IDA and other tax credits included indicating below average return on investment rates compared to regional industry averages): __________________________

G) Briefly summarize the demonstrated support that you intend to receive from local government entities. Please provide the Agency documentation of this support in the form of signed letters from these entities:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

H) Please indicate other factors that you would like the Agency to consider such as: structure or site presents significant public safety hazard and/or environmental remediation costs, site or structure is located in distressed census tract, structure presents significant costs associated with building code compliance, site has historical significance, site or structure is presently delinquent in property tax payments:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
6. Project Work:

A. Builder or contractor information:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

B. Architect Information:
________________________________________________________________________
________________________________________________________________________

C. Has construction work on this project begun? If yes, complete the following:

i. Site Clearance: Yes ☐ No ☐ % COMPLETE
ii. Foundation: Yes ☐ No ☐ % COMPLETE
iii. Footings: Yes ☐ No ☐ % COMPLETE
iv. Steel: Yes ☐ No ☐ % COMPLETE
v. Masonry: Yes ☐ No ☐ % COMPLETE
Other: _________________________________________________________________

D. Will the project meet zoning requirements at the proposed location?

Yes ☐ No ☐

a) What is the present town zoning?_________________________________________

b) What town zoning is required?___________________________________________

c) If a change of zoning is required, please provide the details/status of any
change of zoning request.

_______________________________________________________________

E. Have site plans been submitted to the appropriate planning department? Yes ☐ No ☐

F. Has the project received site plan approval? Yes ☐ No ☐

If yes, please provide the Agency with a copy of the planning department approval along
with the related SEQRA approval.

G. Is the proposed project located on a site where environmental constraints inhibits the
development/use of the property? If yes, explain:

_____________________________________________________________________
_____________________________________________________________________

_____________________________________________________________________
7. **Project Completion Schedule:**

   A. What is the proposed commencement date for the acquisition and the construction/renovation/equipping of the project?
      
   i. Acquisition: ___________________
   
   ii. Construction/Renovation/Equipping: __________

   B. Provide an accurate estimate of the time schedule to complete the project and when the first use of the project is expected to occur: ____________________


---

**Part IV – Project Costs and Financing**

1. **Project Costs:**

   A. Give an accurate estimate of cost necessary for the acquisition, construction, renovation, improvement, and/or equipping of the project location. *This page must be completed* in addition to any attachments of sources and uses and/or detailed budgets. Translate your attached detailed budget to match the line items below. Be sure that the totals equal.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land* (cost or current market value)</td>
<td>$</td>
</tr>
<tr>
<td>Acquisition and Rehabilitation**</td>
<td>$</td>
</tr>
<tr>
<td>New construction</td>
<td>$</td>
</tr>
<tr>
<td>New additions/expansions of existing</td>
<td>$</td>
</tr>
<tr>
<td>Site Work</td>
<td>$</td>
</tr>
<tr>
<td>Machinery and Equipment</td>
<td>$</td>
</tr>
<tr>
<td>Legal Fees</td>
<td>$</td>
</tr>
<tr>
<td>Architectural/Engineering Fees</td>
<td>$</td>
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<tr>
<td>Financial Charges</td>
<td>$</td>
</tr>
<tr>
<td>Other (Specify)</td>
<td>$</td>
</tr>
<tr>
<td>Total</td>
<td>$</td>
</tr>
</tbody>
</table>
* If acquiring land, please note that Federal law prohibits the use of 25% or more of tax-exempt IDB proceeds for the purchase of land.

** If acquiring existing buildings, please note that Federal law prohibits the acquisition of existing buildings with tax-exempt IDB proceeds unless the rehabilitation expenses of the building are equal to or greater than 15% of the portion of the cost of acquiring the building that is financed with tax-exempt IDB proceeds. Rehabilitation does not include any amount expended on new construction (additions or expansions).

2. **Method of Financing:** *(Must equal budget on page 13)* Amount & Term

| A. Tax-exempt bond financing: | $__________  | _____ years |
| B. Taxable bond financing:    | $__________  | _____ years |
| C. Conventional Mortgage:     | $__________  | _____ years |
| D. SBA (504) or other governmental financing: | $__________  | _____ years |
| E. Public Sources (include sum of all State and federal grants and tax credits): | $__________  | _____ years |
| F. Other loans:               | $__________  | _____ years |
| G. Owner/User equity contribution***: | $__________  | _____ years |

**Total Project Costs**  $__________

i. **What percentage of the project costs will be financed from public sector sources?**


*** If a project financing with IDB proceeds is to be owned by a realty company/partnership, but will be subleased for use by another person, at least a 5% owner equity contribution is suggested.

3. **Project Financing:**

A. Have any of the above costs been paid or incurred (including contracts of sale or purchase orders) as of the date of this application?  □ Yes  □ No

If yes, provide detail on a separate sheet.

B. Are costs of working capital, moving expenses, work in progress, or stock in trade included in the proposed uses of bond proceeds?  Give details:

____________________________________________________

____________________________________________________

C. Will any of the funds borrowed through the Agency be used to repay or refinance an existing mortgage or outstanding loan?  Give details:

____________________________________________________

____________________________________________________
D. Has the Applicant made any arrangements for the marketing or the purchase of the bond or bonds? If so, indicate with whom:

__________________________________________________________

E. Has a commitment for financing been received as of this application date Yes ☐ No ☐
If so, please attach a copy of the commitment and provide the institution name and contact:

__________________________________________________________

**Part V – Requested Project Benefits**

1. **Mortgage Recording Tax Benefit:**

   A. Mortgage Amount for exemption (include sum total of construction/permanent/bridge financing):

   $____________________

   B. Estimated Mortgage Recording Tax Exemption (product of Mortgage Amount and .75%):

   $____________________

2. **Sales and Use Tax Benefit:**

   A. Estimated gross amount of COSTS for goods and services that will be subject to State and local Sales and Use Tax (such amount to benefit from the Agency’s exemption):

   $____________________

   B. Estimated State and local Sales and Use Tax exemption (typically a product of 8.625% and figure above):

   $____________________

   C. If your project has a landlord/tenant (owner/user) arrangement, please provide a breakdown of the number in “B” above:

   i. Owner: $____________________

   ii. User: $____________________

What entities will need the sales tax exemption? ____________________________________________

**Please attach a copy of the calculations used to derive the above numbers**
3. **Real Property Tax Benefit:**

A. Identify and describe if the project will utilize a real property tax exemption benefit in addition to the Agency’s PILOT benefit:

____________________________________________________________

B. **Agency PILOT Benefit:**

RIDA provides real property tax abatements in accordance with the Uniform Tax Exemption Policy which is attached hereto. On the increased assessment (value added) as the result of the project. The real property tax abatement is applied uniformly to all eligible taxing jurisdictions. As a general rule the term of the real property tax abatement is 10 years. The basic real property tax abatement provided by RIDA is based upon the equivalent of Section 485(b) of the New York State Real Property Tax Law. This section provides for a 50% real property tax abatement on the increased assessed value in the first year; 45% real property tax abatement in the second year; 40% abatement in the third year; and thereafter declining 5% per year over a 10-year period. A 485(b) real property tax abatement is the standard that RIDA provides. An enhanced or reduced real property tax abatement is considered and/or provided under certain circumstances.

_____ We are requesting the standard PILOT Abatement

_____ Yes _____ No  Based upon the RIDA Uniform Tax Exempt Policy, I believe this project qualifies for an enhanced real property tax abatement or one that deviates from the standard and request consideration for a variation from the standard abatement in order to make the project viable.

If you check yes above, please provide a brief explanation as to why:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

i. Term of PILOT requested: ____________________________________________

ii. Upon acceptance of this application, the Agency staff will draft a PILOT schedule and attach such information to EXHIBIT A hereto. Applicant hereby requests such PILOT benefit as estimated in EXHIBIT A.

**This application will not be deemed complete and final until Exhibit A hereto has been completed**
Part VI – Measures of Growth and Benefits

1. List the Applicant’s and each user’s present employment, and estimates of (i) employment at the proposed project location at the end of year one and year two following project completion and (ii) the number of residents of the Labor Market Area* (“LMA”) that would fill the full-time and part-time jobs at the end of the second year following completion:
* The Labor Market Area includes Nassau and Suffolk Counties.

<table>
<thead>
<tr>
<th></th>
<th>Present</th>
<th>First Year</th>
<th>Second Year</th>
<th>Residents of LMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part-Time**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please prepare a separate attachment describing in detail the types of employment at the Project site. Such attachment should outline the titles and corresponding pay scale/benefits.

** Agency staff converts Part-Time jobs into (Full Time Equivalents) FTEs for state reporting purposes by dividing the number of Part-Time jobs by two (2).

2. Salary and Fringe Benefits:

<table>
<thead>
<tr>
<th>Category of Jobs to be Retained and Created</th>
<th>Average Salary</th>
<th>Average Fringe Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary Wage Earners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commission Wage Earners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hourly Wage Earners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1099 and Contract Workers</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. INDIRECT/CONSTRUCTION JOBS – please indicate the projected number of indirect construction jobs that will be created as a result of the project: ____________

   Please provide the estimated average wage for the indirect jobs: ____________

4. What, if any, will be the expected increase in the annual gross dollar amount of sales (or rent)?
   $______________________________

5. How many jobs will be retained as a result of this project? _______
6. Describe other public benefits anticipated as a result of this Project.

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

*Note:* The Agency reserves the right to visit the facility to confirm that job creation numbers are being met.
Part VII – Representations, Certifications and Indemnification

**To be completed by both the Applicant and Co Applicant**

1. Is the Applicant in any litigation or does the Applicant anticipate any litigation which would have a material adverse effect on the Applicant’s financial condition? (if yes, furnish details on a separate sheet)

   Yes ☐  No ☐

2. Has the Applicant or any of the management of the Applicant, the anticipated users or any of their affiliates, or any other concern with which such management has been connected, been cited for a violation of federal, state or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or other operating practices? (If yes, furnish details on a separate sheet)

   Yes ☐  No ☐

3. Is there a likelihood that the project would not proceed but for the financial assistance provided by the Agency? (If yes, explain why)

   Yes ☐  No ☐

4. If the Project could be undertaken without the financial assistance of the Agency, then provide a statement in the space below indicating why the Project should be undertaken by the Agency and what would be the impact on the Applicant and on the municipality if the applicant was unable to obtain financial assistance?

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

5. The Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if financial assistance is provided for the proposed project:

   § 862. Restrictions on funds of the agency. (1) No funds of the agency shall be used in respect of any project if the completion thereof would result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of
the project occupant located within the state, provided, however, that neither restriction shall apply if the agency shall determine on the basis of the application before it that the project is reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the state or is reasonably necessary to preserve the competitive position of the project occupant in its respective industry.

Initial ______

6. The Applicant understands and agrees that in accordance with Section 858-b(2) of the General Municipal Law and any amendment thereto, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the project will be listed with the New York State Department of Labor, Community Services Division and with the administrative entity of the service delivery area created pursuant to the Job Training Partnership Act (PL 97-300) in which the project is located (collectively, the “Referral Agencies”).

Initial ______

7. The Applicant confirms and acknowledges that the owner, occupant, or operator receiving financial assistance for the proposed project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations.

Initial ______

8. The Applicant confirms and acknowledges that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of any financial assistance and the reimbursement of an amount equal to all or part of any tax exemption claimed by reason of the Agency’s involvement the Project as well as may lead to other possible enforcement actions.

Initial ______

9. The Applicant confirms and hereby acknowledges that as of the date of this Application, the Applicant is in substantial compliance with all provisions of Article 18-A of the New York General Municipal Law, including, but not limited to, the provision of Section 859-a and Section 862(1) of the New York General Municipal Law.

Initial ______

10. In accordance with Section 862(1) of the New York General Municipal Law the Applicant understands and agrees that projects which result in the removal of an industrial or manufacturing plant of the project occupant from one area of the State to another area of the State or in the abandonment of one or more plants or facilities of the project occupant within the State is ineligible for financial assistance from the Agency, unless otherwise approved by the Agency as reasonably necessary to preserve the competitive position of the project in its respective industry or to discourage the project occupant from removing such other plant or facility to a location outside the State.

Initial ______
11. The Applicant represents and warrants that to the Applicant’s knowledge neither it nor any of its affiliates, nor any of their respective partners, members, shareholders or other equity owners, and none of their respective employees, officers, directors, representatives or agents is, nor will they become a person or entity with who United States persons or entities are restricted from doing business under regulations of the Office of Foreign Asset Control (OFAC) of the Department of the Treasury (including those named on OFAC’s Specially Designated and Blocked Persons List or under any statute, executive order including the September 24, 2001, Executive Order Block Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism, or other governmental action and is not and will not assign or otherwise transfer this Agreement to, contract with or otherwise engage in any dealings or transactions or be otherwise associated with such persons or entities.

Initial _______

12. The Applicant confirms and hereby acknowledges it has received the Agency’s fee schedule attached hereto as Schedule A and agrees to pay such fees, together with any expenses incurred by the Agency, including those of Transaction Counsel or consultants, with respect to the Facility. The Applicant agrees to pay such expenses and further agrees to indemnify the Agency, its members, directors, employees and agents and hold the Agency and such persons harmless against claims for losses, damage or injury or any expenses or damages incurred as a result of action taken by or on behalf of the Agency in good faith with respect to the project.

Initial _______

13. The Applicant confirms and hereby acknowledges it has received the Agency’s Local Labor Policy attached hereto as Schedule B and agrees to comply with the same.

Initial _______

14. The Applicant hereby agrees to comply with Section 875 of the General Municipal Law. The Company further agrees that the financial assistance granted to the project by the Agency is subject to recapture pursuant to Section 875 of the Act and the Agency’s [Recapture and Termination] Policy, attached hereto as Schedule C.

Initial _______

Continued on page 22
Continued from page 21

Date: __________

Applicant Signature

Printed Name

Print Title

Sworn to me before this __________
Day of __________, 20 ______

(seal)

Continued from page 21

Date: __________

Facility User Applicant Signature

Printed Name

Print Title

Sworn to me before this __________
Day of __________, 20 ______

(seal)
Part VIII – Submission of Materials

1. A cover letter providing a narrative of the project and the purpose. (New build, renovations and/or equipment purchases). Identify specific uses occurring within the project. Describe any new tenants and end users. Provide an historical picture of the applicant(s) and overview of the project.

2. Certified financial statements for the last two fiscal years (unless included in the Applicant’s annual report).

3. Applicant’s annual reports (or 10-K’s if publicly held) for the two most recent fiscal years.

4. Quarterly reports (form 10-Q’s) and current reports (form 8-K’s) since the most recent annual report, if any.

5. In addition, please attach the financial information described in items A, B, and C of any expected guarantor of the proposed bond issue.

6. Completed Long Environmental Assessment Form and/or applicable short form.

7. Most recent quarterly filing of NYS Department of Labor Form 45, as well as the most recent fourth quarter filing. Please remove the employee Social Security numbers and note the full-time equivalency for part-time employees.

8. A copy of the most recent real property tax bill for the proposed project location.

9. Attach a map highlighting the location of the project.

10. An electronic copy and 2 paper copies of preliminary plans or sketches of the proposed project.

11. Attach a detailed budget for the project and 5 year proforma

12. A copy of the proposed employment schedule reference on page 17 under Part VI Measures of Growth

13. Socio/Economic Impact Study or Market Study if requested or if you answered yes to questions 2 or 3 within the Retail Questionnaire on page 10, then you must also submit a third party market study.

14. Attach an explanation of how you calculated the requested sales tax exemption.

15. THE APPLICATION MUST BE PROVIDED IN ELECTRONIC FORM along with a separate electronic redacted version to be used by the Agency in the event of a FOIL request. Signatures, ID Numbers, personal contact phone numbers and other confidential information should be redacted. If you have any questions, please contact the Agency personnel.

Pursuant to Title 19 of the New York Codes, Rules, and Regulations Part 250.1(c), the Agency must post the completed application to its website. At the request of the Applicant, the Agency may delete or redact from copy posted to the website portions of its records that are specifically exempted from disclosure pursuant to Article 6 of the Public Officers Law. The Applicant shall be responsible for requesting any such redaction, and the Agency shall not be responsible to redact or delete any information not requested by the Applicant.
Part IX – Certification

________________________ (name of representative of company submitting application) deposes and says that he or she is the ________________ (title) of _________________________, the (company) named in the attached application; that he or she has read the foregoing application and knows the contents thereof; and that the same is true to his or her knowledge.

Deponent further says that s/he is duly authorized to make this certification on behalf of the entity named in the attached Application (the “Applicant”) and to bind the Applicant. The grounds of deponent’s belief relative to all matters in said Application which are not stated upon his/her personal knowledge are investigations which deponent has caused to be made concerning the subject matter this Application, as well as in formation acquired by deponent in the course of his/her duties in connection with said Applicant and from the books and papers of the Applicant.

As representative of the Applicant, deponent acknowledges and agrees that Applicant shall be and is responsible for all costs incurred by the Riverhead Industrial Development Agency (hereinafter referred to as the “Agency”) in connection with this Application, the attendant negotiations and all matters relating to the provision of financial assistance to which this Application relates, whether or not ever carried to successful conclusion. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails to act within a reasonable or specified period of time to take reasonable, proper, or requested action or withdraws, abandons, cancels or neglects the application or if the Applicant is unable to find buyers willing to purchase the total bond issue required, then upon presentation of invoice, Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred with respect to the application, up to that date and time, including fees to bond or transaction counsel for the Agency and fees of general counsel for the Agency. Upon successful conclusion of the transaction contemplated herein, the Applicant shall pay to the Agency an administrative fee set by the Agency in accordance with its fee schedule in effect on the date of the foregoing application, and all other appropriate fees, which amounts are payable at closing.

_____________________________  
Applicant Signature

Sworn to me before this __________
Day of ______________, 20 _______

_____________________________  
(seal)
EXHIBIT A

Proposed PILOT Schedule

Upon acceptance of the Application and completion of the Cost Benefit Analysis, the Agency will attach the proposed PILOT Schedule, together with the estimates of net exemptions based on estimated tax rates and assessment values to this Exhibit.
**Application Fee**

A non-refundable application fee of $2,000 for applications for project costs under $5 million and $4,000 for applications for project costs over $5 million is required at the time of application. This fee will be credited to the Agency’s Administrative Fee, payable at closing.

**Administrative Fee**

The Administrative Fee charged by the Agency at closing is based on the project costs as determined by the Agency (and as depicted in Section IV of the application for financial assistance) and is as follows:

\[
\frac{3}{4} \times 1\% \times (0.0075) \times \text{total project costs for financial assistance on the first $10 million} +
\frac{1}{4} \times 1\% \times (0.0025) \times \text{amount of the total project costs for financial assistance over $10,000,000} +
1\% \times \text{increase of the total project over the original cost projections for amended applications post initial financial approval.}
\]

**Reporting/Compliance Fee:**

State law requires that the Town of Riverhead Industrial Development Agency file certain financial and compliance reports with the State of New York. Much of the information within these reports is required to be furnished by your company and the IDA is obligated to meet a state submission deadline. All compliance fees apply to each phase of a project which necessitates a separate NYS filing for reporting.

<table>
<thead>
<tr>
<th>Annual Compliance Reporting Fee</th>
<th>2022</th>
<th>2023</th>
<th>2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Entity Occupancy</td>
<td>$400</td>
<td>$600</td>
<td>$750</td>
</tr>
<tr>
<td>Multi Corp Entity/Multi Residential Units/or Accommodations thereof (21 or more residential tenants and/or 3 or more commercial tenants/ multiple tenant or corporate entity)</td>
<td>$1000</td>
<td>$1250</td>
<td>$1500</td>
</tr>
<tr>
<td>Bond Projects</td>
<td>$1000</td>
<td>$1000</td>
<td>$1000</td>
</tr>
</tbody>
</table>

**Late Reporting/Compliance Fee:**

Late reporting compliance fees become due on the day following a report due date. State law requires that the Town of Riverhead Industrial Development Agency file an Annual Financial and Compliance Report with the State of New York. Much of the information within this report is required to be furnished by your company and the IDA is obligated to meet a state submission deadline. In order to meet this deadline, the Agency will impose a $500 penalty for late or incomplete filings (applied the day immediately following the due date) with an additional $250 fee for every 30 days thereafter (pro rata) until the submission of the report or the benefit recapture provision is implemented. For timely incomplete submissions, the $250 pro-ratable fee will commence from the date of notification by the Agency of the deficiencies.
**Processing Fee:**
During the course of IDA ownership/involvement, the Agency may occasionally be required, by the company, to consent to a variety of items, i.e. simple organizational changes, sales tax extension without increase, etc. The Agency will charge a $500 processing fee for each request.

**Assignments & Assumptions:**
Occasionally, the IDA is asked to transfer benefits that were assigned to the original company, i.e. PILOT or mortgage recording tax benefits, to a different company, typically upon the sale of the IDA property. The new company often wishes to continue IDA involvement to maintain the viability of the project and needs to retain the incentives. The Agency will charge a $4000 fee for each of these transactions if requests are made prior to any transfer, otherwise the assignment/assumption will require a full administrative fee based on guidelines set out above.

**Reprocessing/Refinance Fee:**
During the course of IDA ownership/involvement, the Agency may be required, by the company, to consent to a variety of simple refinancing mechanisms i.e. second mortgages, additional secured financing, refinancing, etc. The Agency will charge a $2500 processing fee for each request and reserves the right to increase the fee to reflect the complexity of each transaction, but not to exceed the basic administrative application fee.

**Late PILOT Payment:**
In addition to requirements of GML 874(5), the Agency shall impose its own 5% penalty, plus $1000 administrative fee for delinquent PILOT payments that are 5 days late, commencing on the sixth day.

**Re-Notification Fee**
Occasionally, an applicant will cause an adjournment of a public hearing. The IDA will charge a fee of $100 per requested adjournment to re-notify and repost public notice and payment by the applicant of any necessary stenography or incidental costs associated with the reprocessing.

**Termination Fee**
A termination fee is applied to all projects at the time inducement ends and the fee amount is at the discretion of the Agency between $750-2,000.

**Recapture Fee**
Ten percent 10% of the recapture amount will be assessed on the amount determined to be recaptured.

**Counsel**
All costs of issuance of bonds, including local counsel and bond counsel, shall be borne separately by the applicant.

- All Agency fees are non-refundable and are as amended from time to time.

Adopted as amended
5/9/2022
SCHEDULE B
Agency’s Local Labor Policy

Purpose

The purpose of this part is to request companies benefitting from the Riverhead Industrial Development Agency (the “Agency) programs to engage local residents from the Town of Riverhead and the County of Suffolk during the construction phase of projects through the addition of an amendment to the Agency project application. All Agency projects are subject to monitoring by the Riverhead IDA.

Construction Jobs

Construction jobs, although limited in duration, are vital to the overall employment opportunities within the region since construction wages earned by local residents are reinvested in the local economy. It is hereby established to be the policy of the Agency that companies to which it has provided inducement use best efforts to employ local residents during the construction phase of projects. This will ensure that maximum public benefit is realized from Agency assistance.

Requirements of the Applicant

As a condition of receiving inducement and/or financial assistance from the Agency, the Company will agree to satisfy the following requirements, in form and substance satisfactory to the Agency.

The Company hereby represents and warrants that it will use commercially reasonable efforts to advertise, hire and cause any agent of the Company, general contractor, subcontractor, or subcontractor to a subcontractor working on the Project, to hire employees who live within Suffolk County, prioritizing Riverhead Residents. The Agency understands and acknowledges that at certain times local labor may not be available.

Submit to the Agency a “Construction Completion Report” listing the names and business locations of prime contractors, subcontractors and vendors who have been engaged for the construction phase of the project by companies benefitting from the Agency programs. Said report shall identify the name, title, mailing address, phone/fax/email of the project contact person who will be responsible and accountable for providing information about the award of construction contracts relative to the project.

3. The Agency, may at any time during the benefit period, enhance the monitoring and reporting requirements relative to tracking and encouraging the use of local labor.

___________________Initial
Pursuant to Sections 874(10) and (11) of Title 1 of Article 18-A of the New York State General Municipal Law (the “Act”), the Riverhead Industrial Development Agency (the “Agency”) is required to adopt policies (i) for the discontinuance or suspension of any financial assistance provided by the Agency to a project or the modification of any payment in lieu of tax agreement and (ii) for the return of all or part of the financial assistance provided by the Agency to a project.

**Termination or Suspension of Financial Assistance**

The Agency, in its sole discretion and on a case-by-case basis, may determine (but shall not be required to do so) to terminate or suspend the Financial Assistance (defined below) provided to a project upon the occurrence of an Event of Default, as such term is defined and described in the Lease Agreement entered into by the Agency and a project applicant (the “Applicant”) or any other document entered into by such parties in connection with a project (the “Project Documents”). Such Events of Default may include, but shall not be limited to, the following:

1) Sale or closure of the Facility (as such term is defined in the Project Documents);
2) Failure by the Applicant to pay or cause to be paid amounts specified to be paid pursuant to the Project Documents on the dates specified therein;
3) Failure by the Applicant to create and/or maintain the FTEs as provided in the Project Documents;
4) A material violation of the terms and conditions of the Project Documents; and
5) A material misrepresentation contained in the application for Financial Assistance, any Project Documents or any other materials delivered pursuant to the Project Documents.

The decision of whether to terminate or suspend Financial Assistance and the timing of such termination or suspension of Financial Assistance shall be determined by the Agency, in its sole discretion, on a case-by-case basis, and shall be subject to the notice and cure periods provided for in the Project Documents.

For the purposes of this policy, the term “Financial Assistance” shall mean all direct monetary benefits, tax exemptions and abatements and other financial assistance, if any, derived solely from the Agency’s participation in the transaction contemplated by the Project Documents including, but not limited to:

(i) any exemption from any applicable mortgage recording tax with respect to the Facility on mortgages granted by the Agency on the Facility at the request of the Applicant;
(ii) sales tax exemption savings realized by or for the benefit of the Applicant, including the savings realized by any agent of the Applicant pursuant to the Project Documents in connection with the Facility; and
(iii) real property tax abatements granted under the Project Documents.

I. Recapture of Financial Assistance

The Agency, in its sole discretion and on a case-by-case basis, may determine (but shall not be required to do so) to recapture all or part of the Financial Assistance provided to a project upon the occurrence of a Recapture Event, as such term is defined and described in the Project Documents at least as stringent as stated in the attached Exhibit A and Exhibit B. Such Recapture Events may include, but shall not be limited to the following:

1) Sale or closure of the Facility (as such term is defined in the Project Documents);
2) Failure by the Applicant to pay or cause to be paid amounts specified to be paid pursuant to the Project Documents on the dates specified therein;
3) Failure by the Applicant to create and/or maintain the FTEs as provided in the Project Documents;
4) A material violation of the terms and conditions of the Project Documents; and
5) A material misrepresentation contained in the application for Financial Assistance, any Project Documents or any other materials delivered pursuant to the Project Documents.

The timing of the recapture of the Financial Assistance shall be determined by the Agency, in its sole discretion, on a case-by-case basis, and is subject to the notice and cure periods provided for in the Project Documents. The percentage of such Financial Assistance to be recaptured shall be determined by the provisions of the Project Documents along with statutory interest as provided by law.

All fees and costs including reasonable attorney fees shall be paid by the Applicant.

All recaptured amounts of Financial Assistance shall be redistributed to the appropriate affected taxing jurisdiction, unless agreed to otherwise by any local taxing jurisdiction.

The Agency may determine to terminate, suspend and/or recapture Financial Assistance in its sole discretion. Such actions may be exercised simultaneously or separately and are not mutually exclusive of one another.

II. Modification of Payment In Lieu of Tax Agreement

In the case of any Event of Default or Recapture Event, in lieu of terminating, suspending or recapturing the Financial Assistance, the Agency may, in its sole discretion, adjust the payments in lieu of taxes due under the Project Documents, so that the payments in lieu of taxes payable under the Project Documents are adjusted upward retroactively and/or prospectively for each tax year until such time as the Applicant has complied with the provisions of the Project Documents. The amount of such adjustments shall be determined by the provisions of the Project Documents.
RIVERHEAD INDUSTRIAL DEVELOPMENT AGENCY
Background, Credit and Litigation Review Authorization Form

I give, consent and authorize to the Riverhead Industrial Development Agency, including its officers, directors, affiliates, agents and representatives (the “Agency”) the right to contact and obtain information from all references, credit reporting companies, financial institutions, governmental agencies or departments, and other agencies regarding my creditworthiness and background and to otherwise verify the accuracy of the information that I have provided in my application or other information which I have provided to the Agency for the purpose of applying for financial assistance.

In connection with my application for financial assistance with the Agency, I understand that investigative background inquiries may be requested and obtained, including credit and criminal background history information. I hereby release from liability the Agency and its agents, employees and representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

I shall cooperate with the reasonable requests made by the Agency in connection with obtaining and completing the background, credit and litigation review process referenced herein. I agree to be responsible for the cost of such background, credit and litigation review and agree to reimburse the Agency for such expenses. This authorization shall be perpetual and shall remain in full force and effect unless revoked by me in writing to the Agency. My revocation shall not affect in any way or manner any activities of the Agency in accordance with this authorization that occur or in process on or before the date that the Agency receives my written notice of revocation of this authorization.

______________________________  _________________________
Signature  Date

______________________________
Print Name
NEW YORK STATE FINANCIAL REPORTING
REQUIREMENTS FOR INDUSTRIAL DEVELOPMENT AGENCIES

Section 859 of the General Municipal Law requires additional financial reporting requirements by all IDA’s in New York State and is of particular importance to IDA applicants. (copy attached). This section requires the Agency to transmit financial statements within 90 days following each December end of the Agency’s fiscal year., prepared by an independent, certified public accountant, to the New York State Comptroller, the Commissioner of the New York State Department of Economic Development, and the governing body of the municipality for whose benefit the Agency was created (Town of Riverhead). These audited financial statements shall include supplemental schedules listing the following information:
All bonds and notes issued, outstanding or retired during the period and whether or not they are obligations of the Agency.

All new bond issues shall be listed and for each new bond issue, the following information is required:

- Name of the project financed with the bond proceeds.
- Name and address of each owner of the project.
- The amount of tax exemptions granted for each project.
- Purpose for which the bond was issued.
- Bond interest rate at issuance and, if variable, the range of interest rates applicable.
- Bond maturity date.
- Federal tax status of the bond issue.

The Public Authorities Reform Act of 2009, Section 2800 requires annual reports of operations and accomplishments which includes projects undertaken by the Agency. The Annual Compliance Reports shall include company provided information relative to individual projects including but not limited; to capital investment made, salaries, employee classifications, employee count, NYSDOL Form 45, exemptions received, and pilot payments made. Your company must submit this information no later than February 10th of each year.

Please sign below to indicate that you have read and understood the above.

_____________________________  ________________________
Chief Executive Officer of Applicant          Date
# PART I - PROJECT INFORMATION

(To be completed by Applicant or Project Sponsor)

<table>
<thead>
<tr>
<th>1. APPLICANT/SPONSOR</th>
<th>2. PROJECT NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 3. PROJECT LOCATION:         |                  |
| Municipality                 | County          |

| 4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) | |

| 5. IS PROPOSED ACTION:      |                  |
| New                         | Expansion        | Modification/alteration |

| 6. DESCRIBE PROJECT BRIEFLY:|                  |

| 7. AMOUNT OF LAND AFFECTED:|                  |
| Initially _____________________ acres | Ultimately ____________________ acres |

| 8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? | |
| Yes | No |

| 9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? | |
| Residential | Industrial | Commercial | Agriculture | Park/Forest/Open Space | Other |
| Describe: | |

| 10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OF LOCAL)? | |
| Yes | No |

| 11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? | |
| Yes | No |

| 12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? | |
| Yes | No |

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: ___________________________ Date: ___________________________

Signature: ___________________________

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment.

OVER 1
PART II - ENVIRONMENTAL ASSESSMENT (To be completed by Agency)

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.12? If YES, coordinate the review process and use the FULL EAF.

- YES  [ ]
- NO  [ ]

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If NO, a negative declaration may be superseded by another involved agency.

- YES  [ ]
- NO  [ ]

C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)

<table>
<thead>
<tr>
<th>C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic patterns, solid waste production or disposal potential for erosion, drainage or flooding problems? Explain briefly:</th>
</tr>
</thead>
<tbody>
<tr>
<td>C2. Aesthetic, agricultural, archaeological, historic or other natural or cultural resources: or community or neighborhood character? Explain briefly:</td>
</tr>
<tr>
<td>C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly.</td>
</tr>
<tr>
<td>C4. A community’s existing plans or goals as officially adopted, or a change in use of intensity of use of land or other natural resources? Explain briefly:</td>
</tr>
<tr>
<td>C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:</td>
</tr>
<tr>
<td>C6. Long term, short term cumulative, or other effects not identified in C1-C5? Explain briefly:</td>
</tr>
<tr>
<td>C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:</td>
</tr>
</tbody>
</table>

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CEA?

- YES  [ ]
- NO  [ ]

E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?

- YES  [ ]
- NO  [ ] If Yes, explain briefly

PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed.

- Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the Full EAF and/or prepare a positive declaration.
- Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action WILL NOT result in any significant adverse environmental impacts AND provide on attachments as necessary, the reasons supporting this determination:

Name of Lead Agency

Print or Type Name of Responsible Officer in Lead Agency  
Title of Responsible Officer

Signature of Responsible Officer in Lead Agency  
Signature of Preparer (if different from Responsible Officer)
NOTICE: This document is designed to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form, including Parts A through E. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Please provide any additional information you believe will be needed to complete Parts 2 and 3.

It is expected that completion of the EAF will be dependent on information currently available and will not involve new studies, research or investigation. If information requiring such additional work is unavailable, so indicate and specify each instance.

<table>
<thead>
<tr>
<th>Name of Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location of Action (Include Street Address, Municipality and County)</td>
</tr>
<tr>
<td>Name of Applicant/Sponsor (and contact person) Business Telephone</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>City/PO State Zip Code</td>
</tr>
<tr>
<td>Name of Owner (if different) Business Telephone</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>City/PO State Zip Code</td>
</tr>
<tr>
<td>Description of Action:</td>
</tr>
</tbody>
</table>

Please Complete Each Question—Indicate N/A if Not Applicable

A. SITE DESCRIPTION

1. Present land use:  
   - ☐ Urban  ☐ Industrial  ☐ Commercial  ☐ Residential (suburban)  
   - ☐ Rural (non farm)  ☐ Agricultural  ☐ Other ________

2. Total Acreage of project area: _______________ acres.

<table>
<thead>
<tr>
<th>APPROXIMATE ACREAGE</th>
<th>CURRENTLY</th>
<th>AFTER COMPLETION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meadow or Brushland (Non-agricultural)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Forested</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Agricultural (includes orchards. cropland, pasture, etc.)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Wetland (Freshwater or Tidal as per Articles 24, 25, or ECL)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Water Surface Area</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Unvegetated (rock, earth or fill)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Roads, and other paved surfaces</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Buildings (ground floor coverage)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
<tr>
<td>Other (indicate type)</td>
<td>____________ acres</td>
<td>____________ acres</td>
</tr>
</tbody>
</table>

Error! Unknown document property name.
3. What is predominant soil type(s) on the project site?

   a. Soil drainage:  □ Well drained (___% of site); □ Moderately well drained (___% of site); □ Poorly drained (___% of site).

   b. If any agricultural land is involved, how many acres of soil are classified within soil group 1 through 4 of the NYS Land Classification System? ___ acres. (See NYCRR 370).

4. Are there bedrock outcroppings on project site? □ Yes □ No

   a. What is depth to bedrock? ___________ (in feet).

5. Approximate percentage of proposed site with slopes: 0-10% _______; 10-15% _______; 15% or greater _______

6. Is project substantially contiguous to, or contain a building, site, or district, listed on the State or the National Registers of Historic Places? □ Yes □ No.

7. Is project substantially contiguous to a site listed on the Register of National Natural Landmarks? □ Yes □ No.

8. What is the depth of the water table? ___ (in feet)

9. Is site located over a primary, principal, or sole source aquifer? □ Yes □ No.

10. Do hunting, fishing, or shell fishing opportunities currently exist in the project area? □ Yes □ No.

11. Does project site contain any species of plant or animal life that is identified as threatened or endangered? □ Yes □ No. According to: ___________

    Identify each species: ___________

12. Are there any unique or unusual land forms on the project site (i.e., cliffs, dunes, other geological formations) □ Yes □ No. If yes, describe: ___________

13. Is the project site presently used by the community or neighborhood as an open space or recreation area? □ Yes □ No. If yes, describe: ___________

14. Does the project site include scenic views known to be important to the community? □ Yes □ No.

15. Streams within or contiguous to project area:

   a. Name of stream and name of river to which it is tributary: ___________

16. Lakes, ponds, wetland areas within or contiguous to project area? □ Yes □ No.

   a. Name ___________  b. Size (in acres) ___________

17. Is site served by existing public utilities? □ Yes □ No.

   a. If Yes, does sufficient capacity exist to allow connection? □ Yes □ No.

   b. If Yes, will improvements be necessary to allow connections? □ Yes □ No.

18. Is the site located in an agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA Sections 303 and 304? □ Yes □ No. If yes, describe: ___________

19. Is the site located in or substantially contiguous to a Critical Environmental Area designated pursuant to Article 8 of the ECL and 6 NYCRR 617? □ Yes □ No.

20. Has the site ever been used for storage or disposal of solid or hazardous waste? □ Yes □ No.
B. PROJECT DESCRIPTION

1. Physical dimensions and scale of project (fill in dimensions as appropriate)
   a. Total contiguous acreage owned or controlled by project sponsor: ____ acres.
   b. Project acreage to be developed: ____ acres initially; ____ acres ultimately.
   c. Project acreage to remain undeveloped: ____ acres.
   d. Length of project, in miles _________ (if appropriate)
   e. If the project is an expansion, indicate percent of expansion proposed ____%
   f. The number of off-street parking spaces existing: ____ proposed: ____
   g. Maximum vehicular trips generated per hour ________ (upon completion of project)?
   h. If residential, number and type of housing units:

   Initially
   One-Family  Two-Family  Multiple-Family  Condominium
   ________  ________  ________  ________

   Ultimately
   ________  ________  ________  ________

   i. Dimension (in feet) of largest proposed structure____’ height;____ width____ length
   j. Linear feet of frontage along a public thoroughfare project will occupy is? __ ft.

2. How much natural material (i.e., rock, earth, etc.) will be removed from the site? ____ tons/cubic yards.

3. Will disturbed areas be reclaimed?  □ Yes  □ No  □ N/A.
   a. If yes, for what intended purpose is the site being reclaimed?________________
   b. Will topsoil be stockpiled for reclamation?  □ Yes  □ No.
   c. Will upper subsoil be stockpiled for reclamation?  □ Yes  □ No.

4. How many acres of vegetation (trees, shrubs, ground cover) will be removed from site? ____ acres.

5. Will any mature forest (over 100 years old) or other locally-important vegetation be removed by this project?  □ Yes  □ No.

6. The anticipated period of construction (including demolition): ________ months (including demolition)

7. If multi-phased:
   a. Total number of phases anticipated ______
   b. Anticipated date of commencement Phase I: ___ month ________ year (including demolition)
   c. Approximate completion date of final phase: ___ month ________ year
   d. Is Phase I functionally necessary to subsequent phases?  □ Yes  □ No.

8. Will blasting occur during construction?  □ Yes  □ No.

9. Number of jobs generated: during construction____; after project is complete____.

10. Number of jobs eliminated by this project: ___.

11. Will project require relocation of any people, businesses, or facilities?  □ Yes  □ No.
    If yes, explain: __________________________________________

12. Is surface liquid waste disposal involved?  □ Yes  □ No
    a. If yes, indicate type of waste (sewage, industrial, etc.) and amount ________________
    b. Name of water body into which effluent will be discharged ____________________
13. Is subsurface liquid waste disposal involved? □ Yes □ No Type ____________________________

14. Will surface area of an existing water body increase or decrease by proposal? □ Yes □ No Explain ____________________________________________________________________________

15. Is project or any portion of project located in a 100 year flood plain? □ Yes □ No

16. Will the project generate solid waste? □ Yes □ No.
   a. If yes, what is the amount generated per month? _____ tons.
   b. If yes, will an existing solid waste facility be used? □ Yes □ No
   c. If yes, give name ________________________________
   d. Will any wastes not go into a sewage disposal system or into a sanitary landfill?
      □ Yes □ No.
   e. If yes, explain: ____________________________

17. Will the project involve disposal of solid waste? □ Yes □ No.
   a. If yes, what is the anticipated rate of disposal? ___ tons/month.
   b. If yes, what is the anticipated site life? ___ years.

18. Will project use herbicides or pesticides? □ Yes □ No. If yes, identify: ______

19. Will project routinely produce odors (more than one hour per day)? □ Yes □ No.

20. Will project produce operating noise exceeding the local ambient noise levels? □ Yes □ No.

21. Will project result in an increase in energy use? □ Yes □ No.
   If yes, indicate type(s) ____________________________

22. If water supply is from wells, indicate pumping capacity _____ gallons/minute.

23. Total anticipated water usage per day: _____________ gallons/day.

24. Does project involve any local, state or federal funding? □ Yes □ No
   If yes, explain: ____________________________

Approvals/Permits Required.

<table>
<thead>
<tr>
<th>Approval Type</th>
<th>Type</th>
<th>Submittal Date</th>
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</thead>
<tbody>
<tr>
<td>City, Town, Village Board</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>City, Town, Village Planning Board</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>City, Town Zoning Board</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>City, County Health Department</td>
<td>□ Yes □ No</td>
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<tr>
<td>Other Local Agencies</td>
<td>□ Yes □ No</td>
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<tr>
<td>Other Regional Agencies</td>
<td>□ Yes □ No</td>
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<tr>
<td>State Agencies</td>
<td>□ Yes □ No</td>
<td></td>
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<tr>
<td>Federal Agencies</td>
<td>□ Yes □ No</td>
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</tbody>
</table>
C. ZONING AND PLANNING INFORMATION

1. Does proposed action involve a planning or zoning decision? □ Yes □ No.
   If yes, indicate specific decision required:
   □ zoning amendment; □ zoning variance; □ special use permit; □ subdivision; □ site plan;
   □ new/revision of master plan; □ resource management plan; □ other _______________________

2. What is the present zoning classification(s) of the site?

3. What is the maximum potential development of the site if developed as permitted by the present zoning?

4. What is the proposed zoning of the site? _________________________________

5. What is the maximum potential development of the site if developed as permitted by the proposed zoning?

6. Is the proposed action consistent with the recommended uses in adopted local land use plans?
   □ Yes □ No.

7. What are the predominant land use(s) and zoning classifications within a ¼-mile radius of proposed action?

8. Is the proposed action compatible with adjoining, surrounding land uses within a ¼-mile radius? □ Yes □ No.

9. If the proposed action requires the subdivision of land, how many lots are proposed? _____
   a. What is the minimum lot size proposed? _________________________________

10. Will proposed action require any authorization(s) for the formation or extension of sewer or water districts? □ Yes □ No.

11. Will the proposed action create an increased demand for any community provided services (recreation, education, police, fire protection)? □ Yes □ No
    a. If yes, is existing capacity sufficient to handle projected demand? □ Yes □ No.

12. Will the proposed action result in the generation of traffic significantly above present levels? □ Yes □ No.
    a. If yes, is the existing road network adequate to handle the additional traffic? □ Yes □ No.

D. INFORMATIONAL DETAILS

Attach any additional information as needed to clarify your project. If there are or may be any adverse impacts associated with your proposal, please discuss such impacts and the measures which you propose to mitigate or avoid them.

E. VERIFICATION

I certify that the information provided above is true to the best of my knowledge.

Applicant/Project Sponsor Name ___________________________ Date ______________

Signature ___________________________ Title ___________________________

If the action is in the Coastal Area, and you are a state agency, complete a Coastal Assessment Form before proceeding with its assessment.