

**Town of Riverhead IDA
Economic Job Development Corp.
Application for Financial Assistance**



PROJECT SUMMARY

(for official use)

GENERAL

Name of Project _____

Location of Project _____

Contact Person _____ Telephone _____

Email _____

KEY DATES

Application Submitted _____ Project Inducement _____

Agenda Closing _____

PROJECT TYPE

Industrial _____ Not-for-Profit _____ Commercial _____ Office _____ Other _____

Housing _____ Manufacturing _____ Retail _____ Services _____

PROJECT SIZE

Acreage _____ New Construction (sq ft) _____

Rehab/Expansion (sq ft) _____ Total Project Cost _____

TYPE OF ASSISTANCE

Tax Exempt Bonds _____ Taxable Bonds _____

JOBS/PAYROLL

Retained Jobs _____ Current Payroll _____ Avg. Annual Wage _____

New Jobs _____ Projected Payroll _____ New Avg. Annual Wage _____



RIVERHEAD IDA ECONOMIC JOB DEVELOPMENT CORPORATION

TOWN OF RIVERHEAD

200 Howell Avenue
Riverhead, New York 11901

P(631) 369-5129
F (631) 369-6925

APPLICATION FOR FINANCIAL ASSISTANCE

Date _____

APPLICATION OF: _____
COMPANY NAME

OWNERSHIP OF PROPOSED PROJECT

Type of Application: ☐ Tax-Exempt Bond ☐ Taxable Bond ☐ Lease
☐ Refunding Bond ☐ 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. This application must be filed in 1 hard copy and 1 electronic copy. A non-refundable application fee of \$4,000 is required at the time of submission of this application to the **Riverhead IDA Economic Job Development Corporation** (the "Agency" or the "LDC"). This fee will be applied to the Agency's Administrative Fee at closing.

At the time of inducement, Bond Counsel may require an initial retainer deposit which will be applied to fees incurred in connection with the Project, 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

I. COMPANY DATA

A. ORGANIZATION OR NOT-FOR-PROFIT (Applicant for Assistance)

NAME _____

ADDRESS _____

CONTACT _____ TITLE _____

PHONE _____ FEDERAL EMPLOYER I.D.# _____

EMAIL _____ FAX _____

ATTORNEY
(contact info) _____

B. FACILITY USER – any entity proposed to be a user of the facility

NAME _____

ADDRESS _____

CONTACT _____ TITLE _____

PHONE _____ FEDERAL EMPLOYER I.D.# _____

BUSINESS TYPE:

SOLE PROPRIETORSHIP ☐

GENERAL PARTNERSHIP ☐ or LIMITED PARTNERSHIP ☐

State and Date of Organization: _____

PRIVATELY HELD CORPORATION ☐ NOT-FOR-PROFIT ☐

PUBLIC CORPORATION ☐ LISTED ON _____ EXCHANGE

State and Date of Incorporation: _____

(Please provide additional names and information, if any, on a separate sheet and attach it to this questionnaire. If tenant is unknown, then enter unknown)

C. Please list any related person (facility user) that is also a user of the Project.

<u>NAME</u>	<u>BUSINESS TYPE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

- D. Please list any principal stockholders or partners of the Company or the Sublessee, if any (i.e., owners of 5% or more equity in the Company or the Sublessee):

<u>NAME</u>	<u>% OWNED</u>	<u>WHICH COMPANY</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- E. Is the Company or the Sublessee related to any other person by reason of more than 50% common ownership? If so, indicate the name of each related person and the Company's or Sublessee's relationship to such person.

- F. Please list parent corporation, sister corporations and subsidiaries, if applicable.

- G. Has the Company or the Sublessee (or any other entity listed in answer to questions C-F above) been involved in or benefitted by any prior industrial development bond financing, LDC financing or JDA financing in the municipality in which this Project is located, whether through the Agency, JDA or another issuer? If so, please explain in full (e.g., name of issuer and beneficiary; original amount of issue; date of issue; current amount outstanding; purpose of issue; etc.).

H. Has the applicant ever filed for bankruptcy?

I. Has the applicant or any of the top executives ever been convicted of a felony? If yes, please explain:

J. Has the Company or the Sublessee (or any related person) applied to any other Economic Development Corporation in regard to this Project? If so, please provide details of any action taken with respect to and the current status of such application.

K. List the major bank references of the Company.

II. COMPANY'S OPERATIONS AT CURRENT LOCATION

A. Address _____

B. Acreage of existing facility _____

C. Number of buildings and square feet of each building _____

- _____
- D. Owned or leased _____
- E. Please describe the type of operation and products and services at current location: _____

- F. Employment (current number of full-time equivalent employees)

- F. Annual payroll amount _____
- G. NAICS code: _____

****Please attach the most recent quarterly New York State Department of Labor form 45.**

III. PROPOSED PROJECT DATA

- A. Proposed Location of Project - Please attach a tax map highlighting the location of the project. In addition, please give the real property tax map number and exact street address of the Project, including the village and town where the Project will be located. (If no street address, please include a survey and the most precise description available):

Address: _____

Tax Map Number: _____

B. Project Site - Please **submit 3 copies** of preliminary plans or sketches of the proposed acquisition, rehabilitation, or construction (under separate cover).

1. Acreage: _____

2. Acquisition of existing buildings:

a) Existing buildings to be acquired (number and square feet of each building):

b) Does the Project consist of additions and/or renovations to existing buildings? If so, indicate the nature of the expansion and/or renovation in reasonable detail.

3. New construction:

a) Number and square feet of each new building to be constructed:

b) Builder or contractor contact information:

c) Architect and contact information:

4. Present use of the Project site:

5. Relationship of present user of Project site to the Company:

C. What will the building or buildings to be acquired, constructed or expanded be used for by the Company (include description of products and services to be rendered)?

D. If any space in the Project is to be leased to third parties, indicate the total square footage of the Project to be leased to each tenant, and the proposed use of that space by each tenant. Although the tenants may not yet be known, the purposes for which the Project will be used must still be indicated. Use a separate sheet, if necessary.

E. List principal items or categories of equipment to be acquired as part of the Project.

F. Has construction work on the Project begun? If so, complete the following:

- | | | | | |
|----|----------------|------------------------------|-----------------------------|------------------|
| 1. | Site clearance | <input type="checkbox"/> yes | <input type="checkbox"/> no | _____ % complete |
| 2. | Foundation | <input type="checkbox"/> yes | <input type="checkbox"/> no | _____ % complete |
| 3. | Footings | <input type="checkbox"/> yes | <input type="checkbox"/> no | _____ % complete |

4. Steel ☐ yes ☐ no _____% complete

5. Masonry ☐ yes ☐ no _____% complete

6. Other (describe below):

G. Existing facilities within New York State:

1. Are there other facilities owned, leased or used by the Applicant (or any related person) within the state? If so, tell whether such facilities are owned, leased or otherwise used and describe the terms of the Company's (or any related person's) interest in such facilities.

2. If there are other facilities within the state, is it expected that any of these other facilities will close or be subject to reduced activity as a result of the proposed Project?

☐ yes

☐ no

3. If you answered "Yes" to question 2, above, please explain in detail how current facilities will be utilized and whether the Project is reasonably necessary for the Company to maintain its competitive position in its industry.

4. Has the Applicant thought about moving to another state? If so, please explain.

5. Will the Project meet current zoning requirements at its proposed location?

☐ yes

☐ no

- a) What is the present zoning? _____
- b) What zoning is required? _____
- c) If a change of zoning is required, please provide the details/status of any change of zoning request.

- H. Does the Applicant (or any related person) currently lease the Project site?

☐ yes

☐ no

- I. Does the Applicant (or any related person) now own the Project site?

☐ yes

☐ no

1. If yes, indicate:

- a) Date of purchase _____
- b) Purchase price _____
- c) Balance of existing mortgage _____
- d) Holder of mortgage _____
- e) Special conditions _____

2. If no, does the Company (or any related person) have an option or a contract to purchase the site and/or any buildings on the site?

☐ yes

☐ no

3. If so, please **attach a copy** of the option or contract and indicate:

- a) Date signed _____
- b) Purchase price _____
- c) Proposed settlement/closing date _____

J. Is there a relationship legally or by virtue of common control or ownership between the applicant and the seller of the project (and/or its shareholders)? If yes, please describe this relationship: _____

K. How much equity will the applicant have in this project: _____

IV. PROJECT COSTS

- A. Give an accurate estimate of the cost of each of the following items, specifying in each instance the portion of such costs to be financed with tax-exempt bond proceeds, if applicable:

LAND*	.....	tax exempt only <input type="checkbox"/> (%)
ACQUISITION AND REHABILITATION COSTS:		
Existing Building**	.....	( ) (%)
Cost of Rehabilitation**	.....	( ) (%)
COSTS OF NEW CONSTRUCTION:		
Construction of New Building	.....	( ) (%)
New Additions to or Expansions of Existing Building	.....	( ) (%)
ENGINEERING & ARCHITECTURAL FEES	.....	( ) (%)
EQUIPMENT TO BE INSTALLED AT FACILITY	.....	( ) (%)
LEGAL FEES (Bank, Bond & Company)	.....	( ) (%)
FINANCIAL CHARGES (specify):	.....	( ) (%)
OTHER FEES/CHARGES, etc. (specify):	.....	( ) (%)
	() (%)
	() (%)
TOTAL PROJECT COSTS:		\$ _____ () (%)
AMOUNT OF BOND REQUESTED:		\$ _____ () (%)

* If acquiring land, please note that Federal law prohibits the use of 25% or more of tax-exempt bond proceeds for the purchase of land.

** If acquiring existing buildings, please note that Federal law prohibits the acquisition of existing buildings with tax-exempt bond 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 bond proceeds. Rehabilitation does not include any amount expended on new construction (additions or expansions).

B. Method of financing costs:

	<u>AMOUNT</u>	<u>TERM</u>
1. Tax-exempt LDC financing	\$ _____	_____ years
2. Taxable LDC financing	\$ _____	_____ years
3. JDA or other governmental funding	\$ _____	_____ years
4. Other loans	\$ _____	_____ years
5. Applicant/Owner's equity contribution***	_____	_____ years
TOTAL PROJECT COSTS:	\$ _____	

- C. 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 so, please give particulars on a separate sheet.

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

- E. Will any of the funds to be borrowed through the LDC be used to repay or refinance an existing mortgage or outstanding loan? Give details.

*** If a project financing with bond 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.

- F. Has the Company made any arrangements for the marketing or the purchase of the bond or bonds? If so, indicate with whom.

V. MEASURES OF GROWTH AND BENEFITS

- A. Please complete the chart below by indicating on line #1 the present number of full-time or equivalent employees and the annual payroll for all current facilities of the Company. On line #2, please provide the information with respect to Town of Riverhead facilities only. (If no facilities are currently in the Town of Riverhead, indicate "0.") On lines #3 and #4, provide projections of retained and new employment and payroll at the proposed Project in the Town of Riverhead for the first and second year (cumulative) after the Project's completion:

	Full Time or Equivalent Employees	Annual Payroll \$
1. PRESENT (All Current Facilities)	<hr/>	<hr/>
2. PRESENT (Riverhead Only)	<hr/>	<hr/>
3. FIRST YEAR (Riverhead Only)	<hr/>	<hr/>
4. SECOND YEAR (Riverhead Only)	<hr/>	<hr/>
5. THIRD YEAR (Riverhead Only)	<hr/>	<hr/>
6. FOURTH YEAR (Riverhead Only)	<hr/>	<hr/>

- B. What, if any, will be the expected increase in the annual dollar amount of sales (or rent or income)? \$

- C. Describe, if applicable, other benefits anticipated as a result of this Project. This should include benefits to the municipality. Use an additional sheet if necessary.

VI. PROJECT CONSTRUCTION SCHEDULE

- A. What is the proposed date for commencement of construction or acquisition of the Project?

- B. Give an accurate estimate of the time schedule to complete the Project and when the first use of Project is expected to occur (use additional sheets if necessary).

- C. At what time or times and in what amount or amounts is it estimated that funds will be required? Please provide your most accurate present estimate.

VII. ATTACH THE FOLLOWING FINANCIAL INFORMATION OF THE COMPANY

- A. Financial statements for last two fiscal years (unless included in the applicant's annual report).
- B. Company's annual reports (or Form 10-K's) for the two most recent fiscal years.
- C. Quarterly reports (Form 10-Q's) and current reports (Form 8-K's) since the most recent annual report, if any.
- D. In addition, please attach the financial information described above in items A, B, and C of any expected guarantor of the proposed bond issue other than the Company.
- E. Most recent quarterly filing of NYS Department of Labor form NYS 45. Please remove Social Security numbers and note the full time equivalency for PT jobs.

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CERTIFICATION

_____ (Name of chief executive officer of company submitting application) deposes and says that (s)he is the _____ (title) of _____ (company name), the corporation named in the attached application; that he has read the foregoing application and knows the contents thereof and that the same is true to his knowledge.

Deponent further says that the reason this verification is being made by the deponent and not by _____ (company name) is because said company is a corporation.

The grounds of deponent's belief relative to all matters in said application which are not stated upon his own personal knowledge, are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as an officer of said corporation and from the books and papers of said corporation.

As an officer of said corporation (hereinafter referred to as the "Applicant"), deponent acknowledges and agrees that Applicant shall be and is responsible for all costs incurred by the Riverhead IDA Economic Job Development Corporation (herein referred to as "Agency") acting on behalf of Applicant in connection with this application and all matters relating to the issuance of bonds. If, for any reason whatsoever, 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 Applicant is unable to find buyers willing to purchase the total bond issue, then upon presentation of an 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 counsel for the Agency and fees of general counsel for the Agency. Upon the successful conclusion and sale of the bond issue, the Applicant shall pay to the Agency an administrative fee set by the Agency not to exceed an amount equal 1% one percent of the face amount of the project cost financed by the bond issue, which amount is payable at closing. The Applicant understands that the Agency's bond counsel's fees, general counsel's fees and administrative fee are considered issuance expenses and, therefore, can only be paid for or reimbursed out of the proceeds of any resultant tax-exempt bond issue up to an aggregate amount not exceeding 2% of the face amount of such tax-exempt issue.

Authorized Signatory of Applicant

Sworn to before me this _____
day of _____, 20__

(Seal)

**RIVERHEAD INDUSTRIAL DEVELOPMENT AGENCY
ECONOMIC JOB DEVELOPMENT CORPORATION
(A Local Development Corporation (LDC))
FEE SCHEDULE**

A non-refundable application fee of \$4,000. This fee will be credited to the LDC's Administrative Fee, payable at closing.

The **Administrative Fee** charged by the LDC at closing is as follows:

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

¾ of 1% (0.0075) of the total project costs for financial assistance on the first \$10 million plus

¼ of 1% (0.0025) on the amount of the total project costs for financial assistance over \$10,000,000

1% of the increase of the total project over the original cost projections for amended applications post initial financial approval.

Annual Reporting/Compliance Fee:

State law requires that the Riverhead IDA Economic Job Development Corporation 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.

All compliance fees apply to each phase of a project which necessitates a separate NYS filing for reporting.

	2023	2024
Annual Compliance Reporting Fee Single Entity Occupancy	\$600	\$750
Annual Compliance Reporting Fee 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)	\$1250	\$1500
Annual Compliance Reporting Fee Bond Projects	\$1000	\$1000

Late Reporting/Compliance Fee: commencing the day following report due date

State law requires that the Riverhead IDA Economic Job Development Corporation 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 the benefiting company and the LDC is obligated to meet a state submission deadline. In order to meet this deadline, the LDC will impose a \$500 penalty for incomplete filings (applied the day immediately following the due date) with an additional two hundred and a \$250 pro-ratable fee for every 30 days thereafter (pro ratable) until the submission of the report or benefit recapture provision is implemented. Timely submissions that are deemed incomplete, the \$250 pro-ratable fee will commence from the date of notification by the Agency of the deficiencies.

Processing Fee:

During the course of LDC ownership/involvement, the LDC 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 LDC is asked to transfer benefits that were assigned to the original company, i.e. Sales tax, mortgage recording tax benefits, to a different company, typically upon the sale of the LDC property or a related entity. The new company often wishes to continue LDC involvement to maintain the viability of the project and needs to retain the incentives. The Corporation will charge a \$4000 application fee and a \$5000 assignment/assumption fee for each of these transactions if requests are made prior to any transfer for related entities. Otherwise the assignment/assumption will require a full administrative fee based on guidelines set out above on a case by case basis.

Reprocessing/Refinance Fee:

During the course of LDC involvement, the LDC 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 LDC may 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.

Re-Notification Fee:

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

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 corporation fees are non-refundable and are amended from time to time.

SIGNATURE

As Amended 9-20-23

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information				
Name of Action or Project:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:			Telephone:	
			E-Mail:	
Address:				
City/PO:		State:	Zip Code:	
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			<input type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO	YES
If Yes, list agency(s) name and permit or approval:			<input type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres b. Total acreage to be physically disturbed? _____ acres c. Total acreage (project site and any contiguous properties) owned _____ acres or controlled by the applicant or project sponsor?				
4. Check all land uses that occur on, are adjoining or near the proposed action: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify): </div> <div style="margin-top: 5px;"><input type="checkbox"/> Parkland</div>				

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest Agricultural/grasslands Early mid-successional Wetland <input type="checkbox"/> Urban Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>
49. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: _____ Date: _____ Signature: _____ Title: _____		