

**COUNTY OF CHAUTAUQUA  
INDUSTRIAL DEVELOPMENT AGENCY**

**APPLICATION FOR FINANCIAL ASSISTANCE**

**APPLICATION OF:**

320 Roberts Road Freezer LLC

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**APPLICANT NAME**

Please respond to all questions in this Application for Financial Assistance (the "Application") by, as appropriate:

- filling in blanks;
- checking the applicable term(s);
- attaching additional text (with notation in Application such as "see Schedule H, Item # 1", etc.); or
- writing "N.A.", signifying "not applicable".

All attachments responsive to questions found in this Application should be clearly labeled and attached as Schedule I to the Application. If an estimate is given, enter "EST" after the figure. One signed original and one photocopy of the Application (including all attachments) must be submitted.

The following amounts are payable to the County of Chautauqua Industrial Development Agency (the "Agency") at the time this Application is submitted to the Agency: (i) a \$1,000 non-refundable application fee (the "Application Fee"); and (ii) a \$1,000 expense deposit for the Agency's Transaction/Bond Counsel fees and expenses (the "Counsel Fee Deposit"). The Application Fee will not be credited against any other fees or expenses which are or become payable to the Agency in connection with this Application or the project contemplated herein (the "Project"). In the event that the subject transaction does not close for any reason, the Agency may use all or any part of the Counsel Fee Deposit, to defray the cost of Transaction/Bond Counsel fees and expenses with respect to the Project. In the event that the subject transaction does close, the Counsel Fee Deposit shall be credited against the applicable expenses incurred by the Agency with respect to the Project.

**Every signature page comprising part of this Application must be signed by the Applicant or this Application will not be considered complete or accepted for consideration by the Agency.**

The Agency's acceptance of this Application for consideration does not constitute a commitment on the part of the Agency to undertake the proposed Project, to grant any financial

assistance with respect to the proposed Project or to enter into any negotiations with respect to the proposed Project.

Information provided herein may be subject to disclosure under the New York Freedom of Information Law (New York Public Officers Law § 84 *et seq.*) ("FOIL"). If the Applicant believes that a portion of the material submitted with this Application is protected from disclosure under FOIL, the Applicant should mark the applicable section(s) or page(s) as "confidential" and state the applicable exception to disclosure under FOIL.

1/2/18

**DATE**

**PART I. APPLICANT**

**A. APPLICANT FOR FINANCIAL ASSISTANCE:**

Name: 320 Roberts Road Freezer LLC

Address: 4 Centre Drive, Orchard Park, NY 14127 \_\_\_\_\_

Fax: 716-667-1258 \_\_\_\_\_

NY State Dept. of

Labor Reg #: 52-34763 Federal Employer ID #: 81-0823596 \_\_\_\_\_

NAICS Code #: 236200

Website: www.kroggrp.com

Name of CEO or

Authorized Representative Certifying Application: Peter L. Krog

Title of Officer: CEO \_\_\_\_\_

Phone Number: 716-667-1234 E-Mail: plkrog@kroggrp.com \_\_\_\_\_

**B. BUSINESS TYPE (Check applicable status. Complete blanks as necessary):**

Sole Proprietorship  General Partnership  Limited Partnership

Limited Liability Company  Privately Held Corporation

Publicly Held Corporation  Exchange listed on \_\_\_\_\_

Not-for-Profit Corporation

Income taxed as: Subchapter S  Subchapter C   
501(c)(3) Corporation  Partnership

State and Year of Incorporation/Organization: 1995 – Merged in 2015 \_\_\_\_\_

Qualified to do Business in New York: Yes  No  N/A

C. APPLICANT COUNSEL:

Firm name: Gross Shuman PC

Address: 465 Main Street, Suite 600  
Buffalo, NY 14203

Primary Contact: Jonathan Schechter

Phone: 716-854-4300

Fax: 716-854-2787

E-Mail: jschechter@gross-shuman.com

D. Principal stockholders, members or partners, if any (i.e., owners of 20% or more of equity/voting rights in Applicant): PETER KROG OWNS 100% OF THE KROG GROUP LLC – THE ENTITY TO BE FORMED WILL CONSIST OF THE OWNERS NOTED BELOW.

Name	Percentage owned
Peter L. Krog _____	50 ___ %
Peter Wilson _____	50 ___ %
_____	_____ %

E. List parent corporation, sister corporations and subsidiaries, if any:

N/A – Multiple single purpose LLCs formed to hold real estate \_\_\_\_\_

\_\_\_\_\_

F. Has the Applicant (or any parent company, subsidiary, affiliate or related entity or person) been involved in, applied for or benefited by any prior industrial development financing or incentives in the County of Chautauqua? If YES, describe:

YES  X  NO    

Peter Krog is a member in 31 Sherman Street Investors and the Chautauqua Harbor Hotel entities and both have received IDA benefits in the past.

\_\_\_\_\_

G. Is the Applicant (or any parent company, subsidiary, affiliate or related entity or person) or any principal(s) of the Applicant or its related entities involved in any litigation or

aware of any threatened litigation that would have a material adverse effect on the Applicant's financial condition or the financial condition of said principal(s)? If YES, attach details at Schedule I.

YES \_\_\_ NO X

- H. Has the Applicant (or any parent company, subsidiary, affiliate or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, ever been involved, as debtor, in bankruptcy, creditors rights or receivership proceedings or sought protection from creditors? If YES, attach details at Schedule I.

YES \_\_\_ NO X

- I. Has the Applicant (or any parent company, subsidiary, affiliate or related entity or person) or any principal(s) of the Applicant or its related entities, ever been convicted of any felony or misdemeanor (other than minor traffic offenses), or have any such related persons or principal(s) held positions or ownership interests in any firm or corporation that has been convicted of a felony or misdemeanor (other than minor traffic offenses), or are any of the foregoing the subject of a pending criminal proceeding or investigation? If YES, attach details at Schedule I.

YES \_\_\_ NO X

- J. Has the Applicant (or any parent company, subsidiary, affiliate or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, been cited for (or is there a pending proceeding or investigation with respect to) a civil violation of federal, state or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, taxation, or other operating practices? If YES, attach details at Schedule I.

YES \_\_\_ NO X

- K. Is the Applicant (or any parent company, subsidiary, affiliate or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, delinquent or have any of the foregoing persons or entities been delinquent on any New York State, federal or local tax obligations within the past five (5) years? If YES, attach details at Schedule I.

YES \_\_\_ NO X

- L. Complete the following information for principals (including, in the case of corporations, officers and members of the board of directors and, in the case of limited liability company, members and managers) of the Applicant:

<u>Name</u>	<u>Title</u>	<u>Other Business Affiliations</u>
Peter Krog_____	CEO_____	The Krog Group LLC_
Peter Wilson__	CEO_____	Sonwil Distribution__
_____	_____	_____
_____	_____	_____

Do any of the foregoing principals hold elected or appointive positions with New York State, any political division of New York State or any other governmental agency? If YES, attach details at Schedule I.

YES \_\_\_ NO X

Are any of the foregoing principals employed by any federal, state or local municipality or any agency, authority, department, board, or commission thereof or any other governmental or quasi-governmental organization?

YES \_\_\_ NO X

M. Current operations at project location (if applicable): NOT APPLICABLE

1. (a) Location: \_\_\_\_\_

(b) Number of Employees: Full-Time: \_\_\_\_\_ Part-Time: \_\_\_\_\_

(c) Annual Payroll, excluding benefits: \_\_\_\_\_

(d) Type of operation (e.g. manufacturing, wholesale, distribution, retail, etc.) and products or services: \_\_\_\_\_

(e) Size of existing facility real property (i.e., acreage of land): \_\_\_\_\_

(f) Buildings (number and square footage of each): \_\_\_\_\_

(g) Applicant's interest in the facility

FEE TITLE: \_\_\_ LEASE: \_\_\_ OTHER (describe below): \_\_\_

N. Will the completion of the proposed Project result in the removal of a plant or facility of the Applicant, or of a proposed user, occupant or tenant of the Project, or a relocation of any employee of the Applicant, or any employee of a proposed user, occupant or tenant of the Project, from one area of the State of New York (but outside of Chautauqua County) to a location in Chautauqua County or in the abandonment of such a plant or facility located in an area of the State of New York outside of Chautauqua County? If YES, complete the attached Anti-Raiding Questionnaire (Schedule D).

YES  NO

EXISTING LANDLORD IS LIKELY TO FIND A REPLACEMENT TENANT

O. Has the Applicant considered moving to another state or another location within New York State? If YES, explain circumstances.

YES  NO

Field Brook Foods, Inc. will be the tenant in the building and it is the Applicant's understanding that they have been considering other locations located in Pennsylvania.

P. Does any one supplier or customer account for over 50% of Applicant's annual purchases or sales, respectively? If YES, attach name and contact information for supplier and/or customer, as applicable: NOT APPLICABLE

YES  NO

Q. Does the Applicant (including any related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, have any contractual or other relationship with the Agency or the County of Chautauqua? If YES, attach details at Schedule I.

YES  NO

R. Nature of Applicant's business (e.g., description of goods to be sold, products manufactured, assembled or processed, services rendered):

The Applicant is a real estate developer that will construct a +/-80,000 SF warehouse/freezer building that will be leased to Field Brook Foods, Inc.

S. ANY RELATED PARTY PROPOSED TO BE A USER OF THE PROJECT:

Name: NOT APPLICABLE

Relationship to Applicant: \_\_\_\_\_

Provide the information requested in Questions A through S above with respect to each such party by attachment at Schedule I.



**PART II. PROPOSED PROJECT**

A. Types of Financial Assistance Requested:

- Tax-Exempt Bonds
- Taxable Bonds
- Refunding Bonds
- Sales/Use Tax Exemption
- Mortgage Recording Tax Exemption
- Real Property Tax Exemption
- Other (specify): \_\_\_\_\_

B. Type of Proposed Project (check all that apply and provide requested information):

- New Construction of a Facility  
Square footage: +/-80,000 SF
- Addition to Existing Facility  
Square footage of existing facility: \_\_\_\_\_  
Square footage of addition: \_\_\_\_\_
- Renovation of Existing Facility  
Square footage of area renovated: \_\_\_\_\_  
Square footage of existing facility: \_\_\_\_\_
- Acquisition of Land/Building  
Acreage/square footage of land: +/- 17.5Acres  
Square footage of building: 167,000 SF building to be demolished
- Acquisition of Furniture/Machinery/Equipment  
List principal items or categories:  
\_\_\_\_\_  
\_\_\_\_\_
- Other (specify): Demolition of existing 167,000 SF building

C. Briefly describe the purpose of the proposed Project, the reasons why the Project is necessary to the Applicant and why the Agency's financial assistance is necessary, and the effect the Project will have on the Applicant's business or operations:

The project will be beneficial to our proposed tenant (Field Brook Foods, Inc) because it will allow them to become more competitive by lowering transportation costs. In addition, the logistics company that will handle their product will be hiring workers to staff the facility. It is anticipated that the new hires will be Chautauqua County residents.

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D. Is there a likelihood that the proposed Project would not be undertaken by the Applicant but for the granting of the financial assistance by the Agency? (If yes, explain; if no, explain why the Agency should grant the financial assistance with respect to the proposed Project)

YES  X  NO

The project is not economically feasible without the assistance from the IDA. The costs associated with the environmental remediation and demolition of the existing structure is cost prohibitive without the incentives that are being requested. If the Applicant's tenant had to the full real property taxes, sales tax and mortgage tax on the project, any savings associated with the reduced transportation costs would be eliminated and the competitive advantage they are seeking would be nullified. The benefits are critical to Field Brook Foods.

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E. If the Applicant is unable to arrange Agency financing or other Agency financial assistance for the Project, what will be the impact on the Applicant and the County of Chautauqua? Would the Applicant proceed with the Project without Agency financing or other Agency financial assistance? Describe.

The applicant will not proceed with the proposed project without receiving the benefits requested.

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F. Location of Project:

Street Address:  320 S. Roberts Rd., Dunkirk, NY 14048

Tax Map Section:  79.16, 79.16 & 79.12  Block:  2, 2, & 4

Lot:  2, 77, & 32 (Property is made up of three tax parcels)

Census Tract Number:  21105

G. Present use of the Project site:  Vacant industrial property/General Industrial (M2).

H. (a) What are the current real estate taxes on the Project site? (If amount of current taxes is not available, provide assessed value for each): The County owns the property and it is not currently on the tax roll

General: \$  0.00   
School: \$  0.00

(b) Are tax certiorari proceedings currently pending with respect to the Project real property? If YES, attach details at Schedule I including copies of pleadings, decisions, etc.

YES

NO

I. Describe proposed Project site ownership structure (i.e., Applicant or other entity):

The property will be owned by a single purpose LLC formed by Peter Krog and Peter Wilson.

J. To what purpose will the building or buildings to be acquired, constructed or renovated be used by the Applicant? (Include description of goods to be sold, products to be manufactured, assembled or processed and services to be rendered.)

Proposed development project consists of +/-80,000 SF refrigerated warehouse facility to store frozen products approximately +/- 40 ft high. It is possible that the facility could be used for cold storage or dry storage during off peak seasons.

K. If any space in the Project is to be leased to or occupied by third parties (i.e., parties not related to the Applicant), or is currently leased to or occupied by third parties who will remain as tenants, provide the names and contact information for each such tenant, indicate total square footage of the Project to be leased to each tenant, and describe proposed use by each tenant:

Field Brook Foods, Inc. will be a tenant in the building and will occupy the entire square footage.

L. Provide, to the extent available, the information requested, in Part I, Questions A, B, D and O, with respect to any party described in the preceding response.

M. Does the proposed Project meet zoning/land use requirements at proposed location?

YES  NO

1. Describe present zoning/land use: General Industrial (M2)
2. Describe required zoning/land use, if different: N/A
3. If a change in zoning/land use is required, please provide details/status of any request for change of zoning/land use requirements:

NOT APPLICABLE

N. Does the Applicant, or any related entity or person, currently hold a lease or license on the Project site? If YES, please provide details and a copy of the lease/license.

YES \_\_\_\_\_ NO X

O. Does the Applicant, or any related entity or person, currently hold fee title to (i.e. own) the Project site?

YES \_\_\_\_\_ NO X

If YES, indicate: NOT APPLICABLE

- (a) Date of purchase: \_\_\_\_\_
- (b) Purchase price: \$ \_\_\_\_\_
- (c) Balance of existing mortgage, if any: \$ \_\_\_\_\_
- (d) Name of mortgage holder: \_\_\_\_\_
- (e) Special conditions: \_\_\_\_\_

If NO, indicate name of present owner of Project site: County of Chautauqua

P. Does the Applicant or any related person or entity have an option or a contract to purchase the Project site and/or any buildings on the Project site?

YES \_\_\_\_\_ NO X (negotiating with County)

If YES, attach copy of contract or option at Schedule I and indicate:

- (a) Date signed: \_\_\_\_\_
- (b) Purchase price: \$ \_\_\_\_\_
- (c) Closing date: \_\_\_\_\_

Is there a relationship legally or by virtue of common control or ownership between the Applicant (and/or its principals) and the seller of the Project (and/or its principals)?

If YES, describe:

YES \_\_\_\_\_ NO X

Q. Will customers personally visit the Project site for either of the following economic activities? If YES with respect to either economic activity indicated below, complete the attached Retail Questionnaire (Schedule E).

Sales of Goods: YES \_\_\_ NO X Sales of Services: YES \_\_\_ NO X

R. Describe the social and economic conditions in the community where the Project site is or will be located and the impact of the proposed Project on the community (including impact on infrastructure, transportation, fire and police and other government-provided services):

The local community is considered to be in a depressed census track. The project would have a minimal impact on existing government services and the existing infrastructure.

S. Identify the following Project parties (if applicable):

Architect: N/A  
Engineer: Peter L. Krog  
Contractors: The Krog Group LLC

T. Will the Project be designed and constructed to comply with Green Building Standards? (if YES, describe the LEED green building rating that will be achieved):

YES \_\_\_ NO X

U. Is the proposed Project site located on a Brownfield? (if YES, provide description of contamination and proposed remediation)

YES X NO \_\_\_

See Attached – BCA to be executed by The Krog Group around 12/31/17

V. Will the proposed Project produce a unique service or product or provide a service that is not otherwise available in the community in which the proposed Project site is located?

YES

NO

The development of the proposed refrigerated warehouse facility will allow the local manufacturer to warehouse frozen foods locally in lieu of storing their product in on other communities or states.

W. Is the proposed Project site currently subject to an IDA transaction (whether through the Agency or otherwise)? If yes, explain.

YES

NO

**PART III. CAPITAL COSTS OF THE PROJECT**

A. Provide an estimate of cost of all items listed below:

	<u>Item</u>	<u>Cost</u>
1.	Land and/or Building Acquisition	\$ <u>0.00</u>
2.	Building Demolition	\$ <u>885,000</u>
3.	Construction/Reconstruction/Renovation	\$ <u>11,515,000</u>
4.	Site Work	\$In Construction _____
5.	Infrastructure Work	\$In Construction _____
6.	Architectural/Engineering Fees	\$ <u>200,000</u>
7.	Applicant's Legal Fees	\$ <u>65,000</u>
8.	Financial Fees	\$ <u>550,000</u>
9.	Other Professional Fees	\$ <u>885,000</u>
10.	Furniture, Equipment & Machinery Acquisition (not included in 3. above)	\$ <u>2,150,000</u>
11.	Other Soft Costs (describe)	\$ <u>0.00</u>
12.	Other (describe)	\$ <u>0.00</u>
	Total	\$ <u>16,250,000</u>

B. Estimated Sources of Funds for Project Costs:

a.	Tax-Exempt IDA Bonds:	\$ <u>0.00</u>
b.	Taxable IDA Bonds:	\$ <u>0.00</u>
c.	Conventional Mortgage Loans:	\$ <u>12,000,000</u>
d.	SBA or other Governmental Financing: Identify: _____	\$ <u>0.00</u>
e.	Other Public Sources (e.g., grants, tax credits): Identify: National Grid and BCP Tax Credits _____	\$ <u>2,000,000</u>
f.	Other Public Agency Loans:	\$ <u>0.00</u>
g.	Other Private Loans:	\$ <u>0.00</u>
h.	Equity Investment: (excluding equity attributable to grants/tax credits)	\$ <u>2,250,000</u>
	TOTAL	\$ <u>16,250,000</u>

What percentage of the total project costs are funded/financed from public sector sources: 12 %

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? If YES, describe particulars on a separate sheet. YES – PRELIMINARY LEGAL, ENVIRONMENTAL AND ENGINEERING WORK HAS BEEN COMPLETED.



YES

NO

D. Are items of working capital, moving expenses, work in progress, or stock in trade included in the proposed uses of the bond proceeds (if applicable)? If YES, provide details:

YES

NO

NOT APPLICABLE

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E. Will any of the funds to be borrowed through the Agency's issuance of bonds, if applicable, be used to repay or refinance an existing mortgage, outstanding loan or an outstanding bond issue? If YES, provide details:

YES

NO

NOT APPLICABLE

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F. Has the Applicant made any arrangement for the marketing or the purchase of the bonds or the provision of other third party financing (if applicable)? If YES, indicate with whom (subject to Agency approval) and provide a copy of any term sheet or commitment letter issued with respect to such financing.

YES

NO

NOT APPLICABLE

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G. **Construction Cost Breakdown:**  
Total Cost of Construction: \$ 14,550,000 (sum of 2-5 and 10 in  
Question A above)  
Cost for materials: \$ 9,590,000  
Cost for labor: \$ 4,340,000  
Cost for "other": \$ 620,000

The Applicant acknowledges that the transaction/bond documents may include a covenant by the Applicant to undertake and document the total amount of capital investment as set forth in this Application.

**PART IV. COST/BENEFIT ANALYSIS**

- A. If the Applicant presently operates in Chautauqua County, provide the current annual payroll. Estimate projected payroll at the Project site in First Year, Second Year and Third Year after completion of the Project:

	<u>Present</u>	<u>First Year</u>	<u>Second Year</u>	<u>Third Year</u>
Full-time:	\$ 0.00	\$213,309	\$263,727	\$308,231
Part-time: <sup>1</sup>	0.00	48,185	59,574	69,628

List the average salaries or provide ranges of salaries for the following categories of jobs (on a full-time equivalency basis) projected to be retained/created in Chautauqua County as a result of the proposed Project:

<u>Category of Jobs to be Retained:</u>	<u>Average Salary or Range of Salary:</u>	<u>Average Fringe Benefits or Range of Fringe Benefits</u>
	NOT APPLICABLE	NOT APPLICABLE
Management		
Professional		
Administrative		
Production		
Supervisor		
Laborer		
Independent Contractor <sup>2</sup>		
Other		

<u>Category of Jobs to be Created:</u>	<u>Average Salary or Range of Salary:</u>	<u>Average Fringe Benefits or Range of Fringe Benefits</u>
Management		
Professional		
Administrative	\$27,305	\$5,461
Production	\$10,816 to \$21,632	\$1,216 to \$2,433
Supervisor	\$75,000	\$15,000
Laborer	\$38,344	\$7,667
Independent Contractor <sup>3</sup>		
Other		

<sup>1</sup> NOTE: The Agency converts part-time jobs into FTE's for evaluation and reporting purposes by dividing the number of part-time jobs by two (2).

<sup>2</sup> As used in this chart, this category includes employees of independent contractors.

<sup>3</sup> As used in this chart, this category includes employees of independent contractors.

The Agency may utilize the foregoing employment projections and the projections set forth in Schedule C, among other things, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction/bond documents may include a covenant by the Applicant to retain the number of jobs, types of occupations and amount of payroll with respect to the Project set forth in this Application.

- B. (i) Will the Applicant transfer current employees from existing location(s)? If YES, describe, please describe the number of current employees to be transferred and the location from which such employees would be transferred:

YES

NO

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- (ii) Describe the number of estimated full time equivalent construction jobs to be created as a result of undertaking the project, to the extent any:

150

- C. What, if any, is the anticipated increase in the dollar amount of production, sales or services following completion of the Project?

\$ N/A - IMPACT ON TENANT

What percentage of the foregoing amount is subject to New York sales and use tax?

N/A - IMPACT ON TENANT %

What percentage of the Applicant's total dollar amount of production, sales or services (including production, sales or services rendered following completion of the Project) are made to customers outside the economic development region (i.e., Western New York)?

N/A - IMPACT ON TENANT %

Describe any other municipal revenues that will result from the Project (excluding the above and any PILOT payments):

The Applicant will pay a fee to the local municipality to obtain a building permit.

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D. What is the estimated aggregate annual amount of goods and services to be purchased by the Applicant for each year after completion of the Project and what portion will be sourced from businesses located in Chautauqua County and the State:

	<u>Amount</u>	<u>% Sourced in Chautauqua County</u>	<u>% Sourced in State</u>
Year 1	\$ <u>0.00</u>	<u>                    </u>	<u>                    </u>
Year 2	\$ <u>0.00</u>	<u>                    </u>	<u>                    </u>
Year 3	\$ <u>0.00</u>	<u>                    </u>	<u>                    </u>

E. Describe, if applicable, other benefits to the Chautauqua County anticipated as a result of the Project, including a projected annual estimate of additional sales tax revenue generated, directly and indirectly, as a result of undertaking the project:

The County will now have a property that is not currently contributing to the property tax base making PILOT payments. In addition, workers that are not currently in existence will be hired and earning wages that will be used to purchase goods and service in the community that will generate additional sales tax.

F. Estimated Value of Requested Financial Assistance:

Estimated Value of Sales Tax Benefit: \$ 767,200  
 (i.e., gross amount of cost of goods and services that are subject to state and local sales and use taxes multiplied by [8.0%])

Estimated Value of Mortgage Tax Benefit: \$ 150,000  
 (i.e., principal amount of mortgage loans multiplied by [1.25%])

Estimated Property Tax Benefit:

Will the proposed Project utilize a property tax exemption benefit other than from the Agency: NO  
 (if so, please describe)

Term of PILOT Requested: 20

Existing Property Taxes on Land and Building: \$ 0.00

Estimated Property Taxes on completed Project: \$ 400,000  
 (without Agency financial assistance)

NOTE: Upon acceptance of this Application by the Agency, the Agency's staff will create a PILOT schedule and indicate the estimated amount of PILOT Benefit/Cost utilizing anticipated tax rates and assessed valuation, make an estimate of the allocation of PILOT payments among the affected tax jurisdictions, and attach such information as Exhibit A hereto.

- G. Describe and estimate any other one-time municipal revenues (not including fees payable to the Agency) that the Project will create:

Building Permit fee of approximately \$15,0000

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**PART V. PROJECT SCHEDULE**

- A. If applicable, has construction/reconstruction/renovation work on the Project begun? If YES, indicate the percentage of completion:

- |    |                               |                              |  |                  |
|----|-------------------------------|------------------------------|--|------------------|
| 1. | (a) Site clearance            | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (b) Environmental Remediation | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (c) Foundation                | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (d) Footings                  | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (e) Steel                     | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (f) Masonry                   | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (g) Interior                  | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |
|    | (h) Other (describe below):   | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> | _____ % complete |

2. If NO to all of the above categories, what is the proposed date of commencement of construction, reconstruction, renovation, installation or equipping of the Project?

Commence abatement/demolition of the existing building in mid- January 2018.

Commence new construction in April 2018

- B. Provide an estimate of time schedule to complete the Project and when the first use of the Project is expected to occur:

Complete development of refrigerated facility in Quarter 4 2018

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**PART VI. ENVIRONMENTAL IMPACT**

A. What is the expected environmental impact of the Project? (Complete the attached Environmental Assessment Form (Schedule G)).

SEE ATTACHED

B. Is an environmental impact statement required by Article 8 of the N.Y. Environmental Conservation Law (i.e., the New York State Environmental Quality Review Act)?

YES     

NO   X  

C. Please be advised that the Agency may require at the sole cost and expense of the Applicant the preparation and delivery to the Agency of an environmental report in form and scope satisfactory to the Agency, depending on the responses set forth in the Environmental Assessment Form. If an environmental report has been or is being prepared in connection with the Project, please provide a copy.

D. The Applicant authorizes the Agency to make inquiry of the United States Environmental Protection Agency, the New York State Department of Environmental Conservation or any other appropriate federal, state or local governmental agency or authority as to whether the Project site or any property adjacent to or within the immediate vicinity of the Project site is or has been identified as a site at which hazardous substances are being or have been used, stored, treated, generated, transported, processed, handled, produced, released or disposed of. The Applicant will be required to secure the written consent of the owner of the Project site to such inquiries (if the Applicant is not the owner), upon request of the Agency.

THE UNDERSIGNED HEREBY CERTIFIES, under penalties of perjury, that the answers and information provided above and in any schedule, exhibit or statement attached hereto are true, accurate and complete, to the best of the knowledge of the undersigned.

Name of Applicant: 320 Roberts Road Freezer, LLC

Signature: 

Name: Peter L. Krog Peter G. Wilson

Title: Member

Date: 1-18-18

Sworn to before me this 18<sup>th</sup>  
day of January, 2018

Colette Ann Gorcica

Notary Public

COLETTE ANN GORCICA  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01GO6032325  
Qualified in Erie County  
My Commission Expires October 25, 2021

**CERTIFICATIONS AND ACKNOWLEDGMENTS  
OF THE APPLICANT**

**FIRST:**

The Applicant hereby certifies that, if financial assistance is provided by the Agency for the proposed project, no funds of the Agency (i) shall be used in connection with the Project for the purpose of preventing the establishment of an industrial or manufacturing plant or for the purpose of advertising or promotional materials which depict elected or appointed government officials in either print or electronic media, (ii) be given to any group or organization which is attempting to prevent the establishment of an industrial or manufacturing plant within the State

**SECOND:**

The Applicant hereby certifies that no member, manager, principal, officer or director of the Applicant or any affiliate thereof has any blood, marital or business relationship with any member of the Agency (or any member of the family of any member of the Agency).

**THIRD:**

The Applicant hereby certifies that neither the Applicant nor any of its affiliates, nor any of their respective partners, members, shareholders or other equity owners (other than equity owners of publicly-traded companies), nor any of their respective employees, officers, directors, or representatives (i) is a person or entity with whom 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 or other governmental action, or (ii) has engaged in any dealings or transactions or is otherwise associated with such persons or entities.

**FOURTH:**

The Applicant hereby acknowledges that the Agency shall obtain and hereby authorizes the Agency to obtain credit reports and other financial background information and perform other due diligence on the Applicant and/or any other entity or individual related thereto, as the Agency may deem necessary to provide the requested financial assistance.

**FIFTH:**

The Applicant hereby certifies, under penalty of perjury, that each owner, occupant or operator that would receive financial assistance with respect to the proposed Project is in substantial compliance with applicable federal, state and local tax, worker protection and environmental laws, rules and regulations.

**SIXTH:**


The Applicant hereby acknowledges that the submission to the Agency of any knowingly false or knowingly misleading information may lead to the immediate termination of any financial assistance and the recapture from the Applicant of an amount equal to all or any part of any tax exemption claimed by reason of the Agency's involvement in the Project.



**SEVENTH:**

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

Name of Applicant: 320 Roberts Road Freezer, LLC

By:   
Name: Peter L. Krog Blair G. Wilson  
Title: member

**CERTIFICATION AND AGREEMENT  
WITH RESPECT TO FEES AND COSTS**

Capitalized terms used but not otherwise defined in this Certification and Agreement shall have the meanings assigned to such terms in the Application.

The undersigned, being duly sworn, deposes and says, under penalties of perjury, as follows: that I am the chief executive officer or other representative authorized to bind the Applicant named in the attached application for financial assistance ("Application") and that I hold the office specified below my signature at the end of this Certification and Agreement, that I am authorized and empowered to deliver this Certification and Agreement and the Application for and on behalf of the Applicant, that I am familiar with the contents of said Application (including all schedules, exhibits and attachments thereto), and that said contents are true, accurate and complete to the best of my knowledge and belief.

The grounds of my belief relative to all matters in the Application that are not based upon my own personal knowledge are based upon investigations I have made or have caused to be made concerning the subject matter of this Application, as well as upon information acquired in the course of my duties and from the books and records of the Applicant.

As an authorized representative of the Applicant, I acknowledge and agree on behalf of the Applicant that the Applicant hereby releases the County of Chautauqua Industrial Development Agency, its members, officers, servants, attorneys, agents and employees (collectively, the "Agency") from, agrees that the Agency shall not be liable for and agrees to indemnify, defend (with counsel selected by the Agency) and hold the Agency harmless from and against any and all liability, damages, causes of actions, losses, costs or expenses incurred by the Agency in connection with: (A) examination and processing of, and action pursuant to or upon, the Application, regardless of whether or not the Application or the financial assistance requested therein are favorably acted upon by the Agency, (B) the acquisition, construction, reconstruction, renovation, installation and/or equipping of the Project by the Agency, and (C) any further action taken by the Agency with respect to the Project; including, without limiting the generality of the foregoing, (i) all fees and expenses of the Agency's general counsel, bond counsel, economic development consultant, real property tax valuation consultant and other experts and consultants (if deemed necessary or advisable by the Agency), and (ii) all other expenses incurred by the Agency in defending any suits, actions or proceedings that may arise as a result of any of the foregoing. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails 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 or is unable to secure other third party financing or otherwise fails to conclude the Project, then upon presentation of an invoice by the Agency, its agents, attorneys or assigns, the Applicant shall pay to the Agency, its agents, attorneys or assigns, as the case may be, all fees and expenses reflected in any such invoice.

As an authorized representative of the Applicant, I acknowledge and agree on behalf of the Applicant that each of the Agency's general counsel, bond counsel, economic development consultant, real property tax valuation consultant and other experts and consultants is an intended third-party beneficiary of this Certification and Agreement, and that each of them may (but shall not be obligated to) enforce the provisions of the immediately preceding paragraph, whether by lawsuit or otherwise, to collect the fees and expenses of such party or person incurred by the Agency (whether or not first paid by the Agency) with respect to the Application.

Upon successful closing of the required bond issue or other form of financing or Agency assistance, the Applicant shall pay to the Agency an administrative fee set by the Agency (which amount is payable at closing) in accordance with the following schedule:

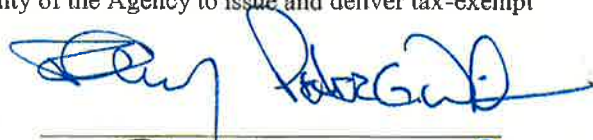
- (A) All Initial Transactions - One-Hundred basis points (1.00%) of total project costs
  - a. This fee applies to all Initial Transactions except for certain small solar or wind energy systems or farm waste energy systems under RPTL §487, for which the Agency collects no fee (other than Counsel fees).
- (B) Refundings – The Agency fee shall be determined on a case-by-case basis.
- (C) Assumptions – The Agency fee shall be determined on a case-by-case basis.
- (D) Modifications – The Agency fee shall be determined on a case-by-case basis.

The Agency's bond counsel fees and expenses are payable at closing and are based on the work performed in connection with the Project.

The Agency's bond counsel's fees, general counsel fee and the administrative fees may be considered as a cost of the Project and included as part of any resultant financing, subject to compliance with applicable law.

Upon the termination of the financing of the Project, Applicant agrees to pay all costs in connection with any conveyance by the Agency to the Applicant of the Agency's interest in the Project and the termination of all related Project documents, including the fees and expenses of the Agency's general counsel, bond counsel, and all applicable recording, filing or other related fees, taxes and charges.

I further acknowledge and agree on behalf of the Applicant that, in the event the Agency shall have used all of its available tax-exempt bond financing allocation from the State of New York, if applicable, and shall accordingly be unable to obtain an additional allocation for the benefit of the Applicant, the Agency shall have no liability or responsibility as a result of the inability of the Agency to issue and deliver tax-exempt bonds for the benefit of the Applicant.



Name: Peter L. Krog  
 Title: member

Subscribed and affirmed to me this 18<sup>th</sup>  
 day of January, 2018

Colette Ann Gorcica  
 Notary Public

**COLETTE ANN GORCICA**  
**NOTARY PUBLIC-STATE OF NEW YORK**  
 No. 01606032325  
 Qualified in Erie County  
 My Commission Expires October 26, 2021

TABLE OF SCHEDULES:

<u>Schedule</u>	<u>Title</u>	<u>Complete as Indicated Below</u>
A.	Tax-Exempt Bond Manufacturing Questionnaire	If Applicant checked "YES" in Part I, Question F of Application, if applicable
B.	New York State Financial and Employment Requirements for Industrial Development Agencies	All applicants
C.	Guidelines for Access to Employment Opportunities	All applicants
D.	Anti-Raiding Questionnaire	If Applicant checked "YES" in Part I, Question N of Application
E.	Retail Questionnaire	If Applicant checked "YES" in Part II, Question Q of Application
F.	Applicant's Financial Attachments, consisting of:	All applicants
	1. Applicant's financial statements for the last two fiscal years (unless included in Applicant's annual reports).	
	2. Applicant's annual reports (or Form 10-K's) for the two most recent fiscal years.	
	3. Applicant's quarterly reports (Form 10-Q's) and current reports (Form 8-K's) since the most recent Annual Report, if any.	
	4. In addition, attach the financial information described above in items F1, F2, and F3 of any anticipated Guarantor of the proposed transaction, if different than the Applicant, including the personal financial statement of any anticipated Guarantor that is a natural person.	
G.	Environmental Assessment Form	All applicants
H.	Form NYS-45-MN	All applicants
I.	Other Attachments	As required

**TAX-EXEMPT BOND MANUFACTURING QUESTIONNAIRE**

(To be completed by the Applicant if the Applicant checked "YES" in Part I, Question F of the Application for Financial Assistance, if applicable). **NOT APPLICABLE**

Please complete the following questions for each facility to be financed. Use additional pages as necessary.

1. Describe the production process which occurs at the facility to be financed.

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2. Allocate the facility to be financed by function (expressed in square footage) (e.g., production line, employee lunchroom, offices, restrooms, storage, warehouse, loading dock, repair shop, parking, research, sales, etc.) and location in relation to production (e.g., same building, adjacent land or building, off-site, etc.). Please attach blueprints of the facility to be financed.

<u>FUNCTION</u>	<u>LOCATION</u>	<u>SQ. FOOTAGE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL

3. Of the space allocated to offices above, identify by function (e.g., executive offices, payroll, production, etc.) and location in relation to production (e.g., same building, adjacent land or building, off-site, etc.).

<u>FUNCTION</u>	<u>LOCATION</u>	<u>SQ. FOOTAGE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL

4. Of the space allocated to storage or warehousing above, identify the square footage and location of the areas devoted to storage of the following:

<u>SQ. FOOTAGE</u>	<u>LOCATION</u>
Raw Materials used for production of manufactured goods	_____
Finished product storage	_____
Component parts of goods manufactured at the facility	_____
Purchased component parts	_____
Other (specify)	_____
TOTAL	

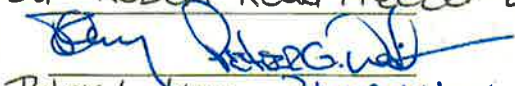
5. List raw materials used at the facility to be financed in the processing of the finished product(s).

\_\_\_\_\_  
 \_\_\_\_\_

6. List finished product(s) which are produced at the facility to be financed.

\_\_\_\_\_  
 \_\_\_\_\_

The UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above and in any statement attached hereto are true and correct.

Name of Applicant: 320 Robert Road Freezer LLC  
 Signature:   
 Name: Peter L. Krog Peter G. Wilson  
 Title: Member  
 Date: 1-18-18

**NEW YORK STATE FINANCIAL AND EMPLOYMENT REPORTING  
REQUIREMENTS FOR INDUSTRIAL DEVELOPMENT AGENCIES**

- A. Pursuant to applicable law, the Agency requires the completion of an Initial Employment Plan (see Schedule C) and a year-end employment plan status report, both of which shall be filed by the County of Chautauqua Industrial Development Agency (the "Agency") with the New York State Department of Economic Development. The Project documents will require the Applicant to provide such report to the Agency on or before March 1 of the succeeding year, together with such employment verification information as the Agency may require.

Except as otherwise provided by collective bargaining agreements, the Applicant agrees to list any new employment opportunities with the New York Department of Labor Community Services Division and the administrative entity of the service delivery area created by the Federal Job Training Partnership Act (P.L. 97-300), or any successor statute thereto (the "JTPA Entities"). In addition, except as otherwise provided by collective bargaining agreements, the Applicant, where practicable, will first consider persons eligible to participate in JTPA programs who shall be referred by the JTPA Entities for such new employment opportunities.

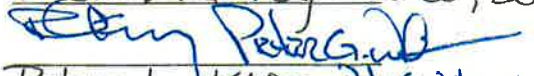
- B. The Applicant will be required to file annually a statement with the New York State Department of Taxation and Finance and the Agency of the value of all sales or use tax exemptions claimed in connection with the Project by reason of the involvement of the Agency.
- C. The following information must be provided for all bonds issued, outstanding or retired during the year:

Name, address and owner of the project; total amount of tax exemptions granted (broken out by state and local sales tax, property taxes, and mortgage recording tax); payments in lieu of taxes made; total real estate taxes on the Project prior to exemption; number of jobs created and retained, and other economic benefits realized.

Date of issue; interest rate at end of year; bonds outstanding at beginning of year; bonds issued during year; principal payments made during year; bonds outstanding at end of year; federal tax status; and maturity date(s).

**Failure to provide any of the aforesaid information will be constitute a DEFAULT under the Project documents to be entered into by the Agency and the Applicant in connection with the proposed Project.**

Please sign below to indicate that the Applicant has read and understood the above and agrees to provide the described information on a timely basis.

Name of Applicant: 320 Roberts Road Freezer, LLC  
 Signature:   
 Name: Peter L. Knog Peter G. Wilson  
 Title: member  
 Date: 1-18-18

**GUIDELINES FOR ACCESS TO EMPLOYMENT OPPORTUNITIES****INITIAL EMPLOYMENT PLAN**

Prior to the expenditure of bond proceeds or the granting of other financial assistance, the Applicant shall complete the following initial employment plan:

Applicant Name: The Krog Group LLC (On Behalf of an Entity to be Formed)  
 Address: 4 Centre Drive, Orchard Park, NY 14127  
 Type of Business: Real Estate Developer/General Contractor  
 Contact Person: Scott Fairbrother Tel. No.: 716-667-1234

Please complete the following table describing the projected full-time equivalent employment plan for the proposed Project following receipt of financial assistance:

<u>Current and Planned Occupations</u>	<u>Present Jobs Per Occupation</u>	<u>Estimated Number of Full Time Equivalent Jobs After Completion of the Project:<sup>4</sup></u>			<u>Estimate of Number of Residents of the Chautauqua County that would fill such jobs by the third year</u>
		<u>1 year</u>	<u>2 years</u>	<u>3 years</u>	
<u>Management</u>	<u>0</u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
<u>Professional</u>	<u>0</u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
<u>Administrative</u>	<u>0</u>	<u>1</u>	<u>1</u>	<u>2</u>	<u>2</u>
<u>Production</u>	<u>0</u>	<u>3</u>	<u>3</u>	<u>4</u>	<u>4</u>
<u>Supervisor</u>	<u>0</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
<u>Laborer</u>	<u>0</u>	<u>1</u>	<u>3</u>	<u>3</u>	<u>3</u>
<u>Independent Contractor</u>	<u>0</u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
<u>Other (describe)</u>	<u>0</u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>

<sup>4</sup> NOTE: Convert part-time jobs into FTE's for evaluation and reporting purposes by dividing the number of part-time jobs by two (2).



Please indicate the number of temporary construction jobs anticipated to be created in connection with the acquisition, construction and/or renovation of the Project: +/- 150

Please indicate the estimated hiring dates for the new jobs shown above and any special recruitment or training that will be required:

Construction hiring will begin during the 1<sup>st</sup> quarter of 2018. The permanent jobs will likely take place during Quarter 3 of 2018.

Are the Applicant's employees currently covered by a collective bargaining agreement?

YES       

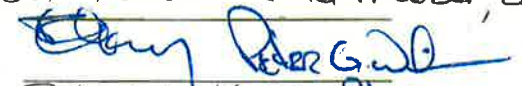
NO   X  

IF YES, Union Name and Local:       N/A      

Please note that the Agency may utilize the foregoing employment projections, among other things, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction/bond documents may include a covenant by the Applicant to retain the above number of jobs, types of occupations and amount of payroll with respect to the proposed project.

Attached hereto as Schedule H is a true, correct and complete copy of the Applicant's most recent Quarterly Combined Withholding, Wage Reporting, and Unemployment Insurance Return (Form NYS-45-MN). Upon request of the Agency, the Applicant shall provide such other or additional information or documentation as the Agency may require with respect to the Applicant's current employment levels in the State of New York.

The UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above and in any statement attached hereto are true, correct and complete.

Name of Applicant: 320 Roberts Road Freezer, LLC  
Signature:   
Name: Peter L. Krog  
Title: member  
Date: 1-18-18

**ANTI-RAIDING QUESTIONNAIRE**

(To be completed by Applicant if Applicant checked "YES" in Part I, Question N of the Application for Financial Assistance)

A. Will the completion of the Project result in the removal of a plant or facility of the Applicant, or of a proposed user, occupant or tenant of the Project, or a relocation of any employee of the Applicant or of a proposed user, occupant or tenant of the Project, from an area in New York State (but outside of Chautauqua County) to an area within Chautauqua County?

YES   X   NO       

If the answer to Question A is YES, please provide the following information:

Address of the to-be-removed plant or facility or the plants or facilities from which employees are relocated:           The warehouse facility that is currently being utilized by the proposed tenant is in Central New York and Pennsylvania.

Names of all current users, occupants or tenants of the to-be-removed plant or facility:           Field Brook Foods, Inc.

B. Will the completion of the Project result in the abandonment of one or more plants or facilities of the Applicant, or of a proposed user, occupant or tenant of the Project, located in an area of the State of New York other than in Chautauqua County?

YES        NO   X  

If the answer to Question B is YES, please provide the following information:

Addresses of the to-be-abandoned plants or facilities:           The existing landlord is likely to find a replacement tenant due to the nature of the structure being vacated by Field Brook.

Names of all current occupants of the to-be-abandoned plants or facilities:

C. Has the Applicant contacted the local industrial development agency at which its current plants or facilities in New York State are located with respect to the Applicant's intention to move or abandon such plants or facilities?

YES \_\_\_ NO X

If the answer to Question C is YES, please provide details in a separate attachment.

IF THE ANSWER TO EITHER QUESTION A OR B IS "YES", ANSWER QUESTIONS D AND E.

D. Is the Project reasonably necessary to preserve the competitive position of the Applicant, or of a proposed user, occupant or tenant of the Project, in its industry?

YES X NO \_\_\_

E. Is the Project reasonably necessary to discourage the Applicant, or a proposed user, occupant or tenant of the Project, from removing such plant or facility to a location outside of the State of New York?

YES X NO \_\_\_

IF THE ANSWER TO EITHER QUESTION D OR E IS "YES", PLEASE PROVIDE DETAILS IN A SEPARATE ATTACHMENT.

Accordingly, the Applicant certifies that the provisions of Section 862(1) of the General Municipal Law will not be violated if financial assistance is provided by the Agency for the proposed Project.

NOTE: If the proposed Project involves the removal or abandonment of a plant or facility of the Applicant, or a proposed user, occupant or tenant of the Project, within the State of New York, notification will be made by the Agency to the chief executive officer(s) of the municipality or municipalities in which such plant or facility was located.

THE UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above and in any statement attached hereto are true, correct and complete.

Name of Applicant: 320 Roberts Road Freezer LLC

Signature: *[Signature]*

Name: Peter L. Krog Et G. Wilson

Title: Member

Date: 1-18-18

If the answer to any of the subdivisions 1 through 3 of Question C is YES, attach details.

D. If the answer to any of the subdivisions 2 through 3 of Question C is YES, will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York? If YES, attach details. **NOT APPLICABLE**

YES \_\_\_\_\_ NO \_\_\_\_\_

E. State percentage of the Applicant's annual gross revenues comprised of each of the following: **N/A**

Retail Sales: \_\_\_\_\_% Services: \_\_\_\_\_%

F. State percentage of Project premises utilized for same: **NOT APPLICABLE**

Retail Sales: \_\_\_\_\_% Services: \_\_\_\_\_%

The **UNDERSIGNED** **HEREBY CERTIFIES** that the answers and information provided above and in any statement attached hereto are true, correct and complete.

Name of Applicant:

320 Roberts Road Freezer LLC

Signature:



Name:

Peter L. Krog Peter G. Wilson

Title:

Member

Date:

1-18-18

**RETAIL QUESTIONNAIRE**

(To be completed by Applicant if Applicant checked either "YES" in Part II, Question Q of the Application for Financial Assistance)

- A. Will any portion of the Project (including that portion of the cost to be financed from equity or sources other than Agency financing) consist of facilities or property that are or will be primarily used in making retail sales to customers who personally visit the Project?

YES \_\_\_\_\_ NO   X  

For purposes of Question A, the term "retail sales" means (i) sales by a registered vendor under Article 28 of 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), or (ii) sales of a service to customers who personally visit the Project.

- B. If the answer to Question A is YES, what percentage of the cost of the Project (including that portion of the cost to be financed from equity or sources other than Agency financing) will be expended on such facilities or property primarily used in making retail sales of goods or services to customers who personally visit the Project?

\_\_\_\_\_ N/A \_\_\_\_\_ %

- C. If the answer to Question A is YES, and the amount entered for Question B is greater than 33.33%, indicate whether any of the following apply to the Project: **NOT APPLICABLE**

- 1. Is the Project likely to attract a significant number of visitors from outside the economic development region (i.e., Western New York) in which the Project is or will be located?

YES \_\_\_\_\_ NO \_\_\_\_\_

- 2. 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 city, town or village within which the Project will be located, because of a lack of reasonably accessible retail trade facilities offering such goods or services?

YES \_\_\_\_\_ NO \_\_\_\_\_

- 3. Will the Project be located in one of the following: (a) an area designated as an empire zone pursuant to Article 18-B of the General Municipal Law; or (b) a census tract or block numbering area (or census tract or block numbering area contiguous thereto) which, according to the most recent census data, has (i) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of the households receiving public assistance, and (ii) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates?

YES \_\_\_\_\_ NO \_\_\_\_\_

**APPLICANT'S FINANCIAL ATTACHMENTS**

NOT APPLICABLE -- NEW COMPANY

**ENVIRONMENTAL ASSESSMENT FORM**

SEE ATTACHED

**FORM NYS-45-MN**

Attach most recent quarterly filing of Form NYS-45-MN, as well as the most recent fourth quarter filing. Please remove the employee social security numbers and note which employees are part-time.

NOT APPLICABLE – NEW COMPANY



**OTHER ATTACHMENTS**

SEE ATTACHED

Exhibit A

Upon acceptance of the Application by the Agency and completion of the Cost/Benefit Analysis, the Agency will attach the proposed PILOT Schedule hereto, together with an estimate of the net tax benefit/cost of the proposed PILOT Schedule.