### COUNTY OF CHAUTAUQUA INDUSTRIAL DEVELOPMENT AGENCY

## **APPLICATION FOR FINANCIAL ASSISTANCE**

#### APPLICATION OF:

# Cockaigne Development LLC & Cockaigne Resort LLC 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.

\_\_\_\_\_4-24-17\_\_\_\_\_ **DATE** 

## PART I. APPLICANT

# APPLICANT FOR FINANCIAL ASSISTANCE: A. Name: Cockaigne Development LLC and Cockaigne Resort LLC Address: 1493 Thornton Rd Cherry creek NY Fax: \_\_\_\_\_ NY State Dept. of TBD Federal Employer ID #: resort 822698532 Labor Reg #: Development 822650304 NAICS Code #: \_\_\_\_TBD \_\_\_\_ Website:\_\_\_\_www.cockaigne.com\_\_\_\_ Name of CEO or Authorized Representative Certifying Application: \_Adam Pirtz Or Isaac Title of Officer:\_\_\_\_ Phone Number: \_\_\_\_\_3307205115\_\_\_\_\_ E-Mail:\_\_\_\_\_cockaignedevelopment@gmail.com BUSINESS TYPE (Check applicable status. Complete blanks as necessary): B. Sole Proprietorship \_\_\_\_ General Partnership \_\_\_\_ Limited Partnership \_\_\_\_ Limited Liability Company \_X\_\_ 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: Formed in NY in 2017 Qualified to do Business in New York: Yes \_x\_ No \_\_\_ N/A \_\_\_ C. APPLICANT COUNSEL:

Firm name:	Harris Bea	ich PLLC		
Address:				
Primary Contact: Phone: Fax: E-Mail:	Bob Murry and FL C			
Principal stock equity/voting r	cholders, members or partrights in Applicant):			
Name		Percentage owne	ed	
	Isaac Gratto	3_		%
	Adam Pirtz	4_		%
	Aura Consulting LLC	93	3	%
person) been in	ant (or any parent compan volved in, applied for or b centives in the County of C	enefited by any prior	r in	dustrial developn
	YES	NO _x_	-	
or any principal aware of any th	t (or any parent company, l(s) of the Applicant or its reatened litigation that wo	related entities involuld have a material a	vec	d in any litigation erse effect on the
attach details at	ancial condition or the fina Schedule I.	metal condition of sa	iu j	principal(s)? If f

H.	person) or any principal concern with which such involved, as debtor, in b	n entities, persons or princi	elated entiti pal(s) have or receiver	ies, or any other business or been connected, ever been ship proceedings or sought
	YES	-	NO _x_	-
I.	person) or any principal( any felony or misdement persons or principal(s) he that has been convicted of	nor (other than minor traffi eld positions or ownership of a felony or misdemeanor the subject of a pending cr	elated entitic offenses) interests in (other than	ies, ever been convicted of , or have any such related
	YES		NO _x_	
J.	person) or any principal( concern with which such for (or is there a pending federal, state or local law		elated entitioal(s) have n with respect to labor	es, or any other business or been connected, been cited bect to) a civil violation of practices, hazardous
	YES		NO _x	
K.	or any principal(s) of the with which such entities, any of the foregoing pers	persons or principal(s) has sons or entities been deling	tities, or an ve been cor uent on any	y other business or concern nected, delinquent or have
	YES		NO _x	
L.	officers and members of	nformation for principals ( the board of directors and, managers) of the Applican	in the case	in the case of corporations, of limited liability
	Rex Butcher	Title  le Member  CEO	Aura Con	siness Affiliations sulting LLC ion Environmental
Solution	ons LLC			

	Re	ex Butcher	Managing Men	mber	B & I Farms
LLC_					
	-				_
	State, any	the foregoing principals h political division of New ch details at Schedule I.			
		YES _X		NO - Issac Gratto, Sh	erman
Counc Rex B		e Valley Central School Bo	oard Member		
	or any age	f the foregoing principals on the foregoing principals on the foregoing principals of the foregoing principal principa	t, board, or com		
		YES		NO _x	
M.	Current op	erations at project location	n (if applicable)	:	
	1. (a)	Location: Cockaigne Re	ecreation Cherry	Creek NY	
*					
	(b)	Number of Employees:	Full-Time:	4_ Part-Time: _1	_
<u>obviou</u>		Annual Payroll, excluding as we grow	g benefits:		45000, will
	(d)	Type of operation (e.g. n and products of		holesale, distribution, Tourism	
	(e)	Size of existing facility re (i.e., acreage of land):			
propert		Buildings (number and so 000 square foot lodge and			uildings on
	(g)	Applicant's interest in th	e facility		
		FEE TITLE:x_	LEASE:	OTHER (describe belo	ow):

	the Applicant, or of a proposed any employee of the Applicant, of the Project, from one area of County) to a location in Chautau facility located in an area of the	seed Project result in the removal of a plant or facility of user, occupant or tenant of the Project, or a relocation of or any employee of a proposed user, occupant or tenant the State of New York (but outside of Chautauqua qua County or in the abandonment of such a plant or State of New York outside of Chautauqua County? If Raiding Questionnaire (Schedule D).
	YES	NO _x
•	Has the Applicant considered me York State? If YES, explain circ	oving to another state or another location within New umstances.
	YES	NO _x
		er account for over 50% of Applicant's annual purchases tach name and contact information for supplier and/or
	YES	NO _x
	Applicant or its related entities, or persons or principal(s) have been	y related entity or person) or any principal(s) of the or any other business or concern with which such entities, connected, have any contractual or other relationship f Chautauqua? If YES, attach details at Schedule I.
	YES	NO _x
	Nature of Applicant's business (or manufactured, assembled or proc	e.g., description of goods to be sold, products essed, services rendered):
	Tourism	
	ANY RELATED PARTY PROF	OSED TO BE A USER OF THE PROJECT:
	Name:	n/a
	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.	Type	s 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):_loansany and all_grants
B.	Type	of Proposed Project (check all that apply and provide requested information):
and 3	□x <u>000 sq</u> ı	New Construction of a Facility Square footage:10000 Lodge uare foot stage
		Addition to Existing Facility Square footage of existing facility: Square footage of addition:
	□х	Renovation of Existing Facility Square footage of area renovated:A-Frame 1000 Square footage of existing facility:
	□Х	Acquisition of Land/Building  Acreage/square footage of land:425  Square footage of building:_?2500
	□х	Acquisition of Furniture/Machinery/Equipment  List principal items or categories: see attached paperalong with a full kitchen in
the Gr	ainery_	see announced puperanoung water a ran knowled in
		Other (specify):
C.	necess	y describe the purpose of the proposed Project, the reasons why the Project is ary to the Applicant and why the Agency's financial assistance is necessary, and ect the Project will have on the Applicant's business or operations:
		We are going to be bringing a Legend back to life. This is going to be an all season recreation will be putting on activities from skiing to summer concerts. See attached MISSION AND STATEMENT)

## PART II. PROPOSED PROJECT

A.	Types	s of Financial Assistance Requested:
		Tax-Exempt Bonds
		Taxable Bonds
		Refunding Bonds
	$\Box \mathbf{X}$	Sales/Use Tax Exemption
	$\Box X$	Mortgage Recording Tax Exemption
	$\Box X$	Real Property Tax Exemption
		Other (specify):any and all
B.	Type	of Proposed Project (check all that apply and provide requested information):  5 PARCELS
	□х	New Construction of a Facility Square footage: 20000 SBL 253.00-1-47
		Addition to Existing Facility
		Square footage of existing facility:
		Square footage of addition:
	□х	Renovation of Existing Facility The granary Restaurant
		Square footage of area renovated: 3000 SBL 253.00 - 1-32.1
		Square footage of existing facility:7000 SBL 253.00-1-8 Capli+ parcel
	$\Box X$	Acquisition of Land/Building SBL 253 01-1-42
		Acreage/square footage of land: 475 Sal 253 Al-1-15
		Square footage of building:_?
	$\Box X$	Acquisition of Furniture/Machinery/Equipment
		List principal items or categories:
.1 .0		see attached paperalong with a full kitchen in
the Gra	anary	
		Other (specify):
C.	Briefly	describe the purpose of the proposed Project, the reasons why the Project is
	necessa	ary to the Applicant and why the Agency's financial assistance is necessary, and
		ect the Project will have on the Applicant's business or operations:
		We are going to be bringing a Legend back to life. This is going to be an all season recreation
		ating 100's even 1000's of jobs in the future. We will be putting on activities from skiing to
	summer	concerts and even opening up the old Granary Restaurant

but:	nere a likelihood that the proposed Project would not be undertaken by the Appli for the granting of the financial assistance by the Agency? (If yes, explain; if no lain why the Agency should grant the financial assistance with respect to the pro- lect)	),
	YESx_ NO	
-	we would not have the funds to do the project	
assis Cha	e Applicant is unable to arrange Agency financing or other Agency financial stance for the Project, what will be the impact on the Applicant and the County outauqua? Would the Applicant proceed with the Project without Agency financiar Agency financial assistance? Describe.  If we cannot get financing we will not do the project	of ng or
Loca	ntion of Project:	
Stree	et Address: 1493 thornton rd	
Tax :	Map Section:see attached papers Block: Lot:	
Cens	sus Tract Number:	
Prese	ent use of the Project site:N/A	
(a)	What are the current real estate taxes on the Project site? (If amount of currer taxes is not available, provide assessed value for each):	nt
(b)	General: \$8215.25 School: \$8930.97 Total \$ 17146.22 Are tax certiorari proceedings currently pending with respect to the Project reproperty? If YES, attach details at Schedule I including copies of pleadings, decisions, etc.	al
	YES NO x	

LLC	There are two LLCs one that owns the real estate and buildings (Cockaigne Develor) and another that owns the furnishings and equipment (Cockaigne Resort LLC), both with the safers
be ı	what purpose will the building or buildings to be acquired, constructed or renovatised by the Applicant? (Include description of goods to be sold, products to be aufactured, assembled or processed and services to be rendered.)  Lodge: anything related to a four season resort Stage: Concert Events
rela rem indi	by space in the Project is to be leased to or occupied by third parties (i.e., parties a sted to the Applicant), or is currently leased to or occupied by third parties who was ain as tenants, provide the names and contact information for each such tenant, cate total square footage of the Project to be leased to each tenant, and describe bosed use by each tenant:
	N/a
Prov and	vide, to the extent available, the information requested, in Part I, Questions A, B, O, with respect to any party described in the preceding response.
	n/a
·	
Doe	s the proposed Project meet zoning/land use requirements at proposed location?
	YESx NO
1.	Describe present zoning/land use "commercial
1. 2.	Describe present zoning/land use "commercial  Describe required zoning/land use, if different:

N.			d entity or person, currently hold a lease or license on rovide details and a copy of the lease/license.
		YES	NOx
O.	Does the Ap		d entity or person, currently hold fee title to (i.e. own)
		YES	NO _x
	If YES, indic	cate:	
	(a)	Date of purchase:	DEC 4 2017
	(b)	Purchase price: \$_	800691.84, all in
	(c)	Balance of existing	g mortgage, if any: \$
	(d)	Name of mortgage	holder:
	(e)	Special conditions	:
	If NO, indica	ate name of present o	wner of Project site: Cockaigne Development LLC
P.		1.50	person or entity have an option or a contract to ny buildings on the Project site?
		YES	NOX
	If YES, attac	h copy of contract or	option at Schedule I and indicate:
	(a)	Date signed:	
	(b)	Purchase price:	\$
	(c)	Closing date:	
		nd/or its principals) a	y virtue of common control or ownership between the nd the seller of the Project (and/or its principals)?
		YES	NOx_

Q.		ct site for either of the following economic economic activity indicated below, complete the E).
	Sales of Goods: YES _x_ NO	Sales of Services: YES _x NO
R.	or will be located and the impact of the p	ons in the community where the Project site is roposed Project on the community (including ire and police and other government-provided
	This project is going to bring be surrounding communities. Also will significantly	ack jobs, tourism, and much needed cash flow for the values surrounding the resort.
S.	Identify the following Project parties (if a	applicable):
Safford	Architect:tbd	ting LLC, Jamestown Heating and Cooling,
Т.	Will the Project be designed and construction (if YES, describe the LEED green building)	eted to comply with Green Building Standards?  ag rating that will be achieved):
	YES	NO _X_
U.	Is the proposed Project site located on a Econtamination and proposed remediation)	Brownfield? (if YES, provide description of
	YES	NOx_

V.		unique service or product or provide a service that is unity in which the proposed Project site is located?
	YESx	NO
	Skiing, concerts, mountain bike, tub	ving
W.	Is the proposed Project site currently Agency or otherwise)? If yes, explain	subject to an IDA transaction (whether through the
	YES	NO _x

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 \_X\_\_\_ NO \_\_\_\_

	<u>Item</u>	Cost
1.	Land and/or Building Acquisition	\$475,900
9		Paid 475,900
2.	Building Demolition	\$
3.	Construction/Reconstruction/Renovation	\$ <u>1,548,955</u>
	or we t	Paid 33,000
4.	Site Work	\$ <u>10,000</u>
-		Paid 10,000
5.	Infrastructure Work	\$ <u>318,000</u>
		Paid 0
6.	Architectural/Engineering Fees	\$75,000
_		Paid 1500
7.	Applicant's Legal Fees	\$ <u>20,000</u>
0	D' LID	Paid 20,000
8.	Financial Fees	\$ <u>5,000</u>
0	0.1 - D - 0 - 1 - 1 - 1	Paid 2500
9.	Other Professional Fees	\$ <u>50,000</u>
1.0	De la Dela Control de la Contr	Paid 31,000
10.	Furniture, Equipment & Machinery	\$160,000
	Acquisition (not included in 3. above)	Paid 6,000
	Total	\$ <u>2,662,855</u>

# PART III. CAPITAL COSTS OF THE PROJECT

A. Provide an estimate of cost of all items listed below: Please see attached packet for more information

		<u>ltem</u>	Cost			
		<ol> <li>Land and/or Building Acquisition</li> </ol>	\$475,900			
		2. Building Demolition	\$			
		3. Construction/Reconstruction/Renovation	\$ <u>1,548,955</u>			
		4. Site Work	\$ <u>10,000</u>			
		5. Infrastructure Work	\$318,000			
		6. Architectural/Engineering Fees	\$75,000			
		7. Applicant's Legal Fees	\$ <u>20,</u> 000			
		8. Financial Fees	\$ <u>5,000</u>			
		9. Other Professional Fees	\$ <u>50,000</u>			
		10. Furniture, Equipment & Machinery	\$160,000			
		Acquisition (not included in 3. above)	<u> </u>			
		11. Other Soft Costs (describe)	\$			
		12. Other (describe)	\$			
			<i>T</i>			
		Total	\$ <u>2,662,855</u>			
	ъ.					
В.	Estim	ated Sources of Funds for Project Costs:				
		T- F				
	a. b.	Tax-Exempt IDA Bonds:	\$			
		Taxable IDA Bonds:	\$			
	c.	Conventional Mortgage Loans:	\$			
	d.	SBA or other Governmental Financing:	\$			
		Identify: IDA OCR				
	e.	Other Public Sources (e.g., grants, tax credits):	\$700,000			
		Identify OCD C				
	f.	Identify: OCR Grant	\$200,000			
		Other Public Agency Loans:	\$			
	g. h.	Other Private Loans:	\$810,000			
	11.	Equity Investment:	\$1,000,000			
		(excluding equity attributable to grants/tax credits)				
		TOTAL	<b>00 2</b> 40 000			
		TOTAL	\$2,710,000			
	What i	percentage of the total project costs are				
	funded	/financed from public sector sources:33.219/				
	7 west sector sections					

<b>.</b>	Have any of the above costs purchase orders) as of the da separate sheet.	any of the above costs been paid or incurred (including contracts of sale or ase orders) as of the date of this application? If YES, describe particulars on a te sheet.		
	YES _X		NO	
).	Are items of working capital included in the proposed use details:	, moving expenses, wo	ork in progress, or stock in trade s (if applicable)? If YES, provide	
	YES	NO	NOT APPLICABLE _x	
	Will any of the funds to be be applicable, be used to repay outstanding bond issue? If Y	or refinance an existing	agency's issuance of bonds, if g mortgage, outstanding loan or an	
	YES	NO	NOT APPLICABLE _x	
	or the provision of other third	l party financing (if approval) and provide a c	arketing or the purchase of the bonds plicable)? If YES, indicate with copy of any term sheet or commitment	
	YES	NO	NOT APPLICABLEx	
		-		

G. Construction Cost Breakdown:

Total Cost of Construction:

\$1,548,955

(Lodge and stage)

Cost for materials:

\$1,248,955

Cost for labor:

\$300,000

Cost for "other":

\$

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>	First Year	Second Year	Third Year
Full-time:	160,000	\$ <u>163,100</u>	\$215,300	\$245,500
Part-time: 1	20,000	25,000	27,500	30,000

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:

Category of Jobs	Average Salary or Range	Average Fringe Benefits or
to be Retained:	of Salary:	Range of Fringe Benefits
Management	55000	
Professional	31200	
Administrative	31200	
Production		
Supervisor	31200	
Laborer	21000	
Independent		
Contractor <sup>2</sup>		
Other		

Category of Jobs	Average Salary or Range	Average Fringe Benefits or
to be Created:	of Salary:	Range of Fringe Benefits
Management	55000	
Professional	31200	
Administrative	31200	
Production		
Supervisor	31200	
Laborer	21000	
Independent	50000	
Contractor <sup>3</sup>		
Other		

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

 $<sup>\</sup>frac{3}{2}$  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.

В.	(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 _x		
outsou	(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:  urced jobs 20 for duration of construction		
C.	What, if any, is the anticipated increase in the dollar amount of production, sales or services following completion of the Project?		
	\$year one gross sales		
	What percentage of the foregoing amount is subject to New York sales and use tax?		
	8%		
	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)?		
	10%		
	Describe any other municipal revenues that will result from the Project (excluding the above and any PILOT payments):		

D.	D. What is the estimated aggregate annual amount of goods and services to be purcha 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:			what portion will be	
		<u>Amount</u>	% Sourced in	% Sourced in State	
	**		Chautauqua County	70 Sourced in State	
	Year 1	\$10000	100	<u></u>	
	Year 2	\$15000	100		
	Year 3	\$20000	100		
E.	generated,	directly and indirectl	enefits to the Chautauqua Count ed annual estimate of additional y, as a result of undertaking the	sales tax revenue project:	
	come from or	utside our county this is	faces from outside the county an esti all money that has not been here since	imated ¾ of our revenue will	
			, and the second more sinter	the me	
F.	Estimated \	Value of Requested F	inancial Assistance:		
	(i.e., gross ar	Value of Sales Tax Benount of cost of goods a ct to state and local sale [8.0%])	nd services	00	
	(i.e., principa	Value of Mortgage Ta I amount of mortgage lo ied by [1.25%])	ax Benefit: \$9000 pans	<u>)</u>	
	Estimated Property Tax Benefit:				
	exem	the proposed Project uti ption benefit other than , please describe)	lize a property tax from the Agency:no	,	
	Term	of PILOT Requested: _	15 year		
	Exist	ing Property Taxes on L	and and Building: \$17146.22		
	Estim (with	ated Property Taxes on out Agency financial ass	completed Project: \$35704 sistance)		
	rates and asses	ssed valuation, make an	his Application by the Agency, the Anated amount of PILOT Benefit/Cosestimate of the allocation of PILOT ach information as Exhibit A hereto.	t utilizing anticipated tax	

	<u>PART V. P</u>	ROJECT SC	<b>HEDULE</b>	
If ap YES	oplicable, has construction/recos, indicate the percentage of cor	nstruction/ren mpletion:	ovation work o	on the Project begu
1.	(a) Site clearance	YES _X	NO	60_% com
	(b) Environmental Remediation	YES	NOx	% comp
	(c) Foundation	YES	NOx	% compl
	(d) Footings	YES	NOx	% compl
	(e) Steel	YES	NOx	% compl
	(f) Masonry	YES	NOx	% compl
	(g) Interior	YES	NOx	% compl
	(h) Other (describe below):	YES	NOx	% compl
2.	If NO to all of the above cate of construction, reconstruction Project?	egories, what i	is the proposed , installation or	date of commence r equipping of the
	March	1, 2018		

# PART VI. ENVIRONMENTAL IMPACT

A.	What is the expected environmental impact of the Project? (Complete the attached Environmental Assessment Form (Schedule G)).		
	yes		
В.	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)?		
	YESx	NO	
C.	Please be advised that the Agency may requ Applicant the preparation and delivery to the and scope satisfactory to the Agency, depen- Environmental Assessment Form. If an envi prepared in connection with the Project, please	e Agency of an environmental report in form ding on the responses set forth in the ronmental report has been or is being	
D.	The Applicant authorizes the Agency to make inquiry of the United States Environmenta 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.		
miom	UNDERSIGNED HEREBY CERTIFIES, undermation provided above and in any schedule, extrate and complete, to the best of the knowledge	Tibit or statement attached hereto are true	
		Name of Applicant: Active Management	
	]	Signature: Name: Pocar Pirtz  Title: Owner  Date: 6-20-17	
Sworn day of	n to before me this <u>20th</u> . f <u><b>Tune</b>, 2017</u>	Daic	
	Notary Public		

# 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

By:\_\_\_\_\_Name:

Title: Owner

# 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).
- (C) Refundings The Agency fee shall be determined on a case-by-case basis.
- (D) Assumptions The Agency fee shall be determined on a case-by-case basis.
- (E) 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

Subscribed and affirmed to me this 2014. day of June, 2017

Notary Public

CAROL A. RASMUSSEN, #01RA4901681 Notery Public, State of New York Qualified in Chaubaugus County My Commission Expires July 20, 20, 21

# TABLE OF SCHEDULES:

Schedule	<u>Title</u>	Complete as Indicated Below
A.	Tax-Exempt Bond Manufacturing Questionnaire	If Applicant checked "YES" in Part I, Question F of Application, if applicable
В.	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
	Applicant's financial statements for the in Applicant's annual reports).	last two fiscal years (unless included
	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) most recent Annual Report, if any.	
	any anticipated Guarantor of the propos	ation described above in items F1, F2, and F3 of ed transaction, if different than the Applicant, nt of any anticipated Guarantor that is a natural
G.	Environmental Assessment Form	All applicants
Н.	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).

as necessary.	Please complete the following questions for each facility to be financed. Use additional pages		
1.	Describe the production	process which occurs at the facility	ty to be financed.
	tourism		
2.	parking, research, sales,	m, offices, restrooms, storage, war etc.) and location in relation to pro	in square footage) (e.g., production rehouse, loading dock, repair shop, oduction (e.g., same building, prints of the facility to be financed.
<b>FUNC</b>	ΓΙΟΝ	<b>LOCATION</b>	SQ. FOOTAGE
	lodge	·	10000
	Stage		3000
		TOTAL	
3.	Of the space allocated to production, etc.) and loca building, off-site, etc.).	offices above, identify by function ation in relation to production (e.g.	n (e.g., executive offices, payroll, , same building, adjacent land or
<u>FUNCT</u>	TION	<u>LOCATION</u>	SQ. FOOTAGE
		TOTAL	

NA

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:

	SQ. FOOTAGE	<b>LOCATION</b>	
	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:	Adam Pirtz
		Signature:	1/10
		Name: Title:	Comme

Date:

Schedule B

# 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:	Jun John
Signature: Name:	
Title:	Owne
Date:	L ) (3-1)

Λ

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### **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: Address: Type of Business: Contact Person: Tel. No.: Please complete the following table describing the projected full-time equivalent employment plan for the proposed Project following receipt of financial assistance: Estimated Number of Estimate of Number of Full Time Equivalent Residents of the Jobs After Completion Chautauqua County that of the Project:4 would fill such jobs by the third year Current and Present Jobs **Planned Occupations** Per Occupation 1 year 2 years 3 years Management 100% Professional 100% Administrative 100% Production Supervisor 100% 1 Laborer 100% Independent Contractor 100% Other (describe)

The 4 Present Jobs were created after the purchase of the property

<sup>&</sup>lt;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 job acquisition, construction and/or renovation of the Project:	s anticipated to be:20	e created in connection with the
Please indicate the estimated hiring dates for the new jobs that will be required:	s shown above and	d any special recruitment or training
We will be hiring Marketing and a Food summer show, scheduled for august 23 laborers will com the winter months	and beverage Supe on board with the	pervisor in order with our first ne summer shows and also during
Are the Applicant's employees currently covered by a col	lective bargaining	g agreement?
YES	NO _	_x
IF YES, Union Name and Local:		
Please note that the Agency may utilize the foregoing empedetermine the financial assistance that will be offered by the acknowledges that the transaction/bond documents may in above number of jobs, types of occupations and amount of Attached hereto as Schedule H is a true, correct and comple Combined Withholding, Wage Reporting, and Unemployn request of the Agency, the Applicant shall provide such of the Agency may require with respect to the Applicant's cultible UNDERSIGNED HEREBY CERTIFIES that the answer statement attached hereto are true, correct and complete.	he Agency to the aclude a covenant f payroll with respected copy of the Anent Insurance Reher or additional irrent employment	Applicant. The Applicant by the Applicant to retain the sect to the proposed project.  pplicant's most recent Quarterly eturn (Form NYS-45-MN). Upon information or documentation as a levels in the State of New York.
	Name of Applicant: Signature: Name: Title: Date:	

Please indicate the number of temporary construction jobs anticipated to be created in connection with the acquisition, construction and/or renovation of the Project:20				
Please indicate the estimated hiring dates for the new jo that will be required:	bs shown above a	and any special recruitment or training		
August 2017 spread out over the next y	/ear			
Are the Applicant's employees currently covered by a co	ollective bargaini	ng agreement?		
YES	NO	X		
IF YES, Union Name and Local:				
Please note that the Agency may utilize the foregoing emdetermine the financial assistance that will be offered by acknowledges that the transaction/bond documents may in above number of jobs, types of occupations and amount of Attached hereto as Schedule H is a true, correct and complement Combined Withholding, Wage Reporting, and Unemploy request of the Agency, the Applicant shall provide such of the Agency may require with respect to the Applicant's complete.	the Agency to the nelude a covenar of payroll with replete copy of the ment Insurance Futher or additional urrent employme	e Applicant. The Applicant not by the Applicant to retain the spect to the proposed project.  Applicant's most recent Quarterly Return (Form NYS-45-MN). Upon I information or documentation as not levels in the State of New York.		
	Name of Applicant: Signature: Name: Title: Date:	Dun Mrh  Owne 6-20-9		

# **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 NOx
If the	answer to Question A is YES, please provide the following information:
Addre	ess of the to-be-removed plant or facility or the plants or facilities from which employees are relocated:
,	
Name:	s of all current users, occupants or tenants of the to-be-removed plant or facility:
В.	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 a	answer to Question B is YES, please provide the following information:
	sses of the to-be-abandoned plants or facilities:
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 a	answer to Question C is YES, please pro	ovide details in a separate attachment.	
IF TH	E ANSWER TO EITHER QUESTION	A OR B IS "YES", ANSWER QUESTIONS D AND E.	
D.	Is the Project reasonably necessar or of a proposed user, occupant o	ry to preserve the competitive position of the Applicant, r tenant of the Project, in its industry?	
	YES	NO _x	
E.	Is the Project reasonably necessar occupant or tenant of the Project, outside of the State of New York?	y to discourage the Applicant, or a proposed user, from removing such plant or facility to a location	
	YES	NO _x_	
IF THE SEPAR	ANSWER TO EITHER QUESTION DATE ATTACHMENT.	OR E IS "YES", PLEASE PROVIDE DETAILS IN A	
Accordi	ingly, the Applicant certifies that the provide	visions of Section 862(1) of the General Municipal Law will d 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.			
ΓΗΕ UN statemer	NDERSIGNED HEREBY CERTIFIES to attached hereto are true, correct and contact attached hereto are true.	hat the answers and information provided above and in any omplete.	
		Name of Applicant:  Signature: Name: Title: Date:	

Schedule E

### **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 source 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 _x_	NO	
For pu Tax La	rposes of Question A, the term "retail sales" aw of the State of New York (the "Tax Law"	means (i) sales by a registered vendor under Article 28 of ) primarily engaged in the retail sale of tangible personal	

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?

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.

ly visit the Project?				
	100	0%		

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:

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 _x	NO	
To describe the second of the		

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 x

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?

Carol/Rich, how does the IDA verify this percent? with our research it reads 19%, we are very close, can you please give us your input

	If the answer to any of the subdivisions 1 through 3 of Qu	nestion C is YES, attach details.
D.	If the answer to any of the subdivisions 2 through 3 of Qu permanent, private sector jobs or increase the overall num State of New York? If YES, attach details.	estion C is YES, will the Project preserve ber of permanent, private sector jobs in the
	YES	NOx
E.	State percentage of the Applicant's annual gross revenues	comprised of each of the following:
	Retail Sales:20%	Services:80%
F.	State percentage of Project premises utilized for same:	
	Retail Sales:20%	Services:80%
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:

Signature: Name:

Title: Date:

### Schedule F

# APPLICANT'S FINANCIAL ATTACHMENTS

## Schedule G

## ENVIRONMENTAL ASSESSMENT FORM

Schedule H

## 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.

## Schedule I

# **OTHER ATTACHMENTS**

## 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.