COUNTY OF CHAUTAUQUA INDUSTRIAL DEVELOPMENT AGENCY

APPLICATION FOR FINANCIAL ASSISTANCE

| APPLICATION OF: | |
|-------------------------------|-------------|
| DFT Local Service Corporation | |
| 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.

DATE

PART I, APPLICANT

| A. | APPLICANT FOR FINANCIAL ASSISTANCE: | | | | | | |
|---|--|--|--|--|--|--|---|
| | Name: DFT Local Service Corporation | | | | | | |
| | Address: PO Box 209 Fredonia NY 14063-0209 Fax: <u>716.679.7990</u> | | | | | | |
| | NY State Dept. of Labor Reg #: N/A * Federal Employer ID #: N/A | | | | | | |
| | NAICS Code #: 513300 | | | | | | |
| | Website:www.dftcommunications.com | | | | | | |
| | Name of CEO or Authorized Representative Certifying Application: Mark R. Maytum | | | | | | |
| | Title of Officer: President, C.O.O. | | | | | | |
| Phone Number: 716.673.3031 E-Mail: mark.maytum@dftel.com | | | | | | | |
| В. | . BUSINESS TYPE (Check applicable status. Complete blanks as necessary): | | | | | | |
| Sole Proprietorship General Partnership Limited Partnership Limited Liability Company Privately Held Corporation _X_ Publicly Held Corporation Exchange listed on Not-for-Profit Corporation | | | | | | | |
| | | | | | | | Income taxed as: Subchapter S Subchapter C _X 501(c)(3) Corporation Partnership |
| | | | | | | | State and Year of Incorporation/Organization: Delaware, 1998 |
| | | | | | | | Qualified to do Business in New York: Yes _X_ No N/A |

^{*} All labor is contracted thru parent company DFT Communications Corporation

| C. APPLICANT COUNSE |
|---------------------|
|---------------------|

Firm name: Beckage PLLC

Address: Liberty Building

420 Main Street, Suite 1110

Buffalo NY 14202

Primary

Contact: Jennifer A. Beckage

Phone: 716.898.2102

E-Mail: jbeckage@beckage.com

D. Principal stockholders, members or partners, if any (i.e., owners of 20% or more of equity/voting rights in Applicant):

| Name | Percentage owned |
|-------------------|------------------|
| Robert A. Maytum | 40% |
| Mark R. Maytum | 13.34% |
| Kurt W. Maytum | 13.34% |
| Sheri Stoltenberg | 13.34% |
| LICT Corporation | 20.00% |

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

Parent = DFT Communications, Brick Skirt Holdings Co, LLC

Affiliates = Dunkirk & Fredonia Telephone Company, Cassadaga Telephone Corporation, Netsync Internet Services Corp, DFT Security Services, Inc, Erie Shore Holdings and The Maytum Company_

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

| G. | or any principal(s) of the Appli aware of any threatened litigati | company, subsidiary, affiliate or related entity or person) cant or its related entities involved in any litigation or on that would have a material adverse effect on the or the financial condition of said principal(s)? If YES, |
|----|--|--|
| | YES | NO X |
| Н. | person) or any principal(s) of the concern with which such entities | at company, subsidiary, affiliate or related entity or the Applicant or its related entities, or any other business or so, persons or principal(s) have been connected, ever been say, creditors rights or receivership proceedings or sought ES, attach details at Schedule I. |
| | YES | NO X |
| Ĭ. | person) or any principal(s) of the any felony or misdemeanor (otherwise) persons or principal(s) held post that has been convicted of a felonic person of the convicted o | at company, subsidiary, affiliate or related entity or the Applicant or its related entities, ever been convicted of the than minor traffic offenses), or have any such related itions or ownership interests in any firm or corporation only or misdemeanor (other than minor traffic offenses), or ject of a pending criminal proceeding or investigation? If I. |
| | YES | NO X |
| J. | person) or any principal(s) of the concern with which such entities for (or is there a pending proceed federal, state or local laws or re- | t company, subsidiary, affiliate or related entity or e Applicant or its related entities, or any other business or s, persons or principal(s) have been connected, been cited ding or investigation with respect to) a civil violation of gulations with respect to labor practices, hazardous, taxation, or other operating practices? If YES, attach |
| | YES | NO X |
| K. | or any principal(s) of the Applic with which such entities, person any of the foregoing persons or | company, subsidiary, affiliate or related entity or person) cant or its related entities, or any other business or concerns or principal(s) have been connected, delinquent or have entities been delinquent on any New York State, federal ne past five (5) years? If YES, attach details at Schedule I. |
| | YES | NO X |

| L. | offic | 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> | Other Business Affiliations | | |
| | Rob | ert A. Maytum | C.E.O | The Maytum Company | | |
| | | | | Erie Shore Holdings, LLC | | |
| | Mar | k R. Maytum | Presdient, C.O.O. | The Maytum Company Erie Shore Holdings, LLC | | |
| | | W. Maytum | President, C.T.O. | The Maytum Company | | |
| | | id T. Pihl | Sr. VP Operations | N/A | | |
| | | z Mjoen | VP of Finance | N/A | | |
| | | ert Sciarrino | VP of Network | • • • | | |
| | State | | of New York State or | appointive positions with New York any other governmental agency? If | | |
| | | YES | | NO X | | |
| N | or an gove | y agency, authority, der rnmental or quasi-gover YES | oartment, board, or con rnmental organization | NO X | | |
| M. | Curre | ent operations at project | location (if applicable | e): N/A | | |
| | 1. | 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 fa (i.e., acreage of | | | | |
| | (f) Buildings (number and square footage of each): | | | | | |
| | | (g) Applicant's interes | est 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 X | | |
| O. | Has the Applicant considered moving t York State? If YES, explain circumstar | o another state or another location within New nces. | | |
| | YES | NO X | | |
| Ρ, | Does any one supplier or customer according or sales, respectively? If YES, attach national customer, as applicable: | ount for over 50% of Applicant's annual purchases ame and contact information for supplier and/or | | |
| | YES | NO X | | |
| Q. | Applicant or its related entities, or any opersons or principal(s) have been connected. | ed entity or person) or any principal(s) of the other business or concern with which such entities, ected, have any contractual or other relationship tauqua? If YES, attach details at Schedule I. | | |
| | YES _X | NO | | |
| R. | Nature of Applicant's business (e.g., de manufactured, assembled or processed, | scription of goods to be sold, products services rendered): | | |
| | DFT Local Service Corporation and Broadband access to custom | is a local exchange carrier who provides dial tone ters via resale and facilities based | | |
| S. | ANY RELATED PARTY PROPOSED | TO BE A USER OF THE PROJECT: | | |
| | Name: | | | |
| | 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

| Α. | Туре | s of Financial Assistance Requested: |
|-------|---------------------|---|
| | | Tax-Exempt Bonds |
| | _ | Taxable Bonds |
| | _ | Refunding Bonds |
| | _ | Sales/Use Tax Exemption |
| | | Mortgage Recording Tax Exemption |
| | $\ddot{\mathbf{x}}$ | Real Property Tax Exemption |
| | | Other (specify): |
| В. | Туре | of Proposed Project (check all that apply and provide requested information): |
| | X | New Construction of a Facility Square footage: |
| | A nol | e line with Aerial Fiber will be constructed for approximately. 145 miles in the |
| scope | of the | |
| | | 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: |
| | | Square footage of existing facility: |
| | X | Acquisition of Land/Building |
| | | Acreage/square footage of land: |
| | Eccom | Square footage of building: |
| | Easen | nents and pole attachment will be sought to accomplish the build of Pole/Cable |
| | \mathbf{X} | Acquisition of Furniture/Machinery/Equipment |
| | | List principal items or categories: |
| | | See attachment J |
| | X | Other (specify): Broadband services provided to currently unserved or |
| | unders | served locations in Chautauqua County. See attachment J |
| C. | Briefly | describe the purpose of the proposed Project, the reasons why the Project is |
| | necess the eff | 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: |

The project will provide currently non-existent broadband services to households; businesses and key community organizations that are currently unserved. The broadband services will create the potential for increased business growth, public services, public safety, and quality of life for many residents in Chautauqua County. To some extent, this project will provide local redundancy and new broadband access to internet. DFT portion of project is substantial at \$1,068,634 which is very large for a company of our size to fund out of pocket. Assistance in any way would be appreciated to help us offset this significant upfront capital expenditure.

| 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 | | NO X | | |
| | do not get some additional assistance. Wi | ith Broadband, emplo is, education on line | is reliant on broadband access. With all the | | |
| 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 o Chautauqua? Would the Applicant proceed with the Project without Agency financing other Agency financial assistance? Describe. | | | | |
| | Without additional assistance with this proriginal grant award will remain unserved | | and businesses in the wake of the scope of the h broadband needs. | | |
| F. | Location of Project: Varies | | | | |
| | Street Address: | | | | |
| | Tax Map Section: | Block: | Lot: | | |
| | Census Tract Number: | | | | |
| G. | Present use of the Project site: See | attached Maps | | | |
| Н. | (a) What are the current real estaxes is not available, provi | | Project site? (If amount of current e for each): | | |
| | General: \$0 School: \$0 | - | | | |
| | Since this will be new territ paid. As an attachment to the pow and power company is the taxpaye | er line poles, we | not yet known the taxes that would be are paying rent to power company town the property (pole). | | |

| (b) | Are tax certiorari proceedings currently property? If YES, attach details at Sch decisions, etc. | y pending with respect to the Project rea edule I including copies of pleadings, |
|--|--|--|
| | YES | NO X |
| Desc | cribe proposed Project site ownership stru | cture (i.e., Applicant or other entity): |
| 100% | of the Fiber route/Pole line route will be owned | by DFT Local Service Corporation. |
| be us | what purpose will the building or building sed by the Applicant? (Include description ufactured, assembled or processed and se | of goods to be sold, products to be |
| | uildings will be constructed, just a pole line with a cess Broadband. Attachments to existing poles as | |
| relate | y space in the Project is to be leased to or ed to the Applicant), or is currently leased in as tenants, provide the names and conf | l to or occupied by third parties who wil |
| indic | cate total square footage of the Project to losed use by each tenant: | |
| indic prope | cate total square footage of the Project to | be leased to each tenant, and describe |
| indic prope DFT I | cate total square footage of the Project to losed use by each tenant: | be leased to each tenant, and describe and will not be sub-leasing it in the future. On requested, in Part I, Questions A, B, 1 |
| DFT I Provi | cate total square footage of the Project to losed use by each tenant: Local Service will own and build its own facilities ide, to the extent available, the information | be leased to each tenant, and describe and will not be sub-leasing it in the future. On requested, in Part I, Questions A, B, I he preceding response. |
| DFT I Provi | cate total square footage of the Project to loosed use by each tenant: Local Service will own and build its own facilities ide, to the extent available, the information, with respect to any party described in the service of the extent and party described in the service of the extent and party described in the service of the extent and party described in the service of the extent and party described in the service of the extent and party described in the service of the extent and t | be leased to each tenant, and describe and will not be sub-leasing it in the future. On requested, in Part I, Questions A, B, I he preceding response. |
| Provided to the control of the contr | cate total square footage of the Project to losed use by each tenant: Local Service will own and build its own facilities ide, to the extent available, the information, with respect to any party described in the service of the extent available. | se leased to each tenant, and describe s and will not be sub-leasing it in the future. on requested, in Part I, Questions A, B, I he preceding response. se requirements at proposed location? NO |
| Provided to the control of the contr | cate total square footage of the Project to loosed use by each tenant: Local Service will own and build its own facilities ide, to the extent available, the information of the proposed Project meet zoning/land uses the proposed Project meet zoning/land uses X Local Service is currently working with each of the proposed Project meet zoning/land uses X | se leased to each tenant, and describe s and will not be sub-leasing it in the future. On requested, in Part I, Questions A, B, I he preceding response. Se requirements at proposed location? NO ch township etc to obtain permitting for |
| DFT I Provide and C N/A Does DFT upcon | cate total square footage of the Project to loosed use by each tenant: Local Service will own and build its own facilities ide, to the extent available, the information of the expect to any party described in the state of the proposed Project meet zoning/land uses the proposed Project meet zoning/land uses X Local Service is currently working with earning build. | s and will not be sub-leasing it in the future. On requested, in Part I, Questions A, B, I he preceding response. See requirements at proposed location? NO ch township etc to obtain permitting for RIES/PUBLIC RIGHT OF WAY |

| 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 Ap | | ed entity or person, | currently hold fee title to | (i.e. own) | |
| | | YES | | NO X | | |
| | If YES, indic | cate: | | | | |
| | (a) | Date of purchase | ; <u></u> | | | |
| | (b) | Purchase price: \$ | | | | |
| | (c) | (c) Balance of existing mortgage, if any: \$ | | | | |
| | (d) | Name of mortgage holder: | | | | |
| | (e) | Special condition | ns: | | | |
| | If NO, indica | ite name of present | owner of Project sit | e: varies | | |
| P. | | | ed person or entity hany buildings on the | ave an option or a contrac e Project site? | t to | |
| | | YES | | NO X | | |
| | If YES, attac | h copy of contract o | or option at Schedul | e I and indicate: | | |
| | (a) | Date signed: | | residente de la companya de la comp | | |
| | (b) | Purchase price: | \$ | | | |
| | (c) | Closing date: | | | | |
| | | nd/or its principals) | | on control or ownership be e Project (and/or its princip | | |
| | | YES | | NO X | | |

| Q. | activities? If | | t to either economic a | either of the following economic activity indicated below, complete | the |
|----|---|---|--|--|-----------|
| | | | O X Sales of Serv t is a Fiber Route. | rices: YES NO X | |
| R. | or will be loc | ated and the impa | act of the proposed P | community where the Project site Project on the community (includin blice and other government-provide | g |
| | buy homes in ou current services well served, Bus | or communities to he and will restrict grove | Ip the tax base grow. Ab wth in our community, re cate in communities that I | for attraction of business and residents we osent these types of services is detrimenta etaining services will ensure community is have good infrastructure and this includes | I to s |
| S. | Identify the fo | Identify the following Project parties (if applicable): | | | |
| | Architect: Engineer: Contractors: | N/A N/A | | - - - | |
| T. | | | | nply with Green Building Standard hat will be achieved): | is? |
| | | YES | | NO X | |
| | No building con | struction required, no | o structures will be built o | on the ground. | |
| U. | | ed Project site loc and proposed re | | d? (if YES, provide description of | |
| | | YES | | NO X | |
| | No building cons | struction required by | a structures will be built of | on the ground | |

| Will the p | roposed Project produce a unique service ovise available in the community in which t | or product or provide a service that in the proposed Project site is located? | | | |
|---|---|---|--|--|--|
| | YES _X | NO | | | |
| Broadbane currently | Broadband speeds of 25/4 mbps (download/upload) will be availale to structures/home currently underserved or unserved at this point. | | | | |
| | oosed Project site currently subject to an II otherwise)? If yes, explain. | OA transaction (whether through the | | | |
| | YES | NO X | | | |
| Provide an | PART III. CAPITAL COSTS OF TE | | | | |
| 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. | Land and/or Building Acquisition Building Demolition Construction/Reconstruction/Renovati Site Work Infrastructure Work Architectural/Engineering Fees Applicant's Legal Fees Financial Fees Other Professional Fees Furniture, Equipment & Machinery Acquisition (not included in 3. above) Other Soft Costs (describe) Other (describe) Testing | S | | | |
| | Sources of Funds for Project Costs: | | | | |
| | -Exempt IDA Bonds: able IDA Bonds: | \$ \$ | | | |

| entify: ther Public Source Broadband Gra ther Public Agence ther Private Loans uity Investment: cluding equity at anced from public of the above cost | rnmental Financing: es (e.g., grants, tax credit nt Program #AB870/CF. ey Loans: s: ttributable to grants/tax of TOTAL al project costs are ic sector sources:80% s been paid or incurred (late of this application? I | \$s ss credits) \$ including conti | |
|--|---|--|---|
| her Public Source Y Broadband Gra her Public Agence her Private Loans uity Investment: cluding equity at anced from public of the above cost orders) as of the de- neet. (see attache | nt Program #AB870/CF. by Loans: s: ttributable to grants/tax of TOTAL al project costs are ic sector sources:80% s been paid or incurred (late of this application? I | A#69737 \$s credits) \$s including conting YES, describ | 1,068,634 |
| Y Broadband Gra her Public Agence her Private Loans uity Investment: cluding equity at entage of the tota anced from publi of the above cost orders) as of the de- reet. (see attache YES _X | nt Program #AB870/CF. by Loans: s: ttributable to grants/tax of TOTAL al project costs are ic sector sources:80% s been paid or incurred (late of this application? I | A#69737 \$s credits) \$s including conting YES, describ | 1,068,634 |
| her Public Agence her Private Loans uity Investment: cluding equity at entage of the total anced from public of the above cost orders) as of the detect. (see attached the entage of the detect. | ey Loans: s: ttributable to grants/tax of TOTAL al project costs are ic sector sources:80% s been paid or incurred (late of this application? I | \$s s credits) \$ including conting YES, describ | 5,343,170 |
| her Private Loans uity Investment: cluding equity at entage of the tota anced from public of the above cost orders) as of the doneet. (see attached YES _X | TOTAL It project costs are ic sector sources:80% s been paid or incurred (late of this application? I | sredits) \$ including conti | 5,343,170 |
| uity Investment: cluding equity at entage of the tota anced from public of the above cost orders) as of the doneet. (see attache YES _X | TOTAL If project costs are ic sector sources:80% Is been paid or incurred (late of this application? I | sredits) \$ including conti | 5,343,170 |
| entage of the total anced from public of the above cost orders) as of the direct. (see attached YES _X | TOTAL If project costs are ic sector sources:80% is been paid or incurred (late of this application? Incurred) | \$including conti f YES, describ | 5,343,170 |
| entage of the tota anced from public of the above cost orders) as of the d neet. (see attache | TOTAL If project costs are ic sector sources:80% is been paid or incurred (late of this application? Incurred) | \$including conti f YES, describ | racts of sale or |
| anced from public of the above cost orders) as of the detect. (see attached YES _X | al project costs are ic sector sources:80% s been paid or incurred (late of this application? I | including conti f YES, describ | racts of sale or |
| anced from public of the above cost orders) as of the detect. (see attached YES _X | ic sector sources:80% s been paid or incurred (late of this application? I ed) | including contr f YES, describ | |
| of the above cost orders) as of the d neet. (see attache YES _X | s been paid or incurred (late of this application? I | including contr f YES, describ | |
| orders) as of the deneet. (see attache | late of this application? I | f YES, describ | |
| orders) as of the deneet. (see attache | late of this application? I | f YES, describ | |
| YES X | ed) | · | |
| YES _X | , | NO | |
| | _ | NO | |
| of working canit | | | |
| S. | МО | NOT A | APPLICABLE X |
| | | | |
| | | | |
| , be used to repay | or refinance an existing | | |
| S | NO | NOT A | APPLICABLE X |
| | , be used to repay | f the funds to be borrowed through the A; be used to repay or refinance an existing g bond issue? If YES, provide details: | f the funds to be borrowed through the Agency's issuand, be used to repay or refinance an existing mortgage, out g bond issue? If YES, provide details: |

| | YES | | NC |) | NOT APPLI | CABLE X |
|-------------------|--|---|---------------------------|---------------------|--------------------|--------------|
| G. | Construction Cost Breakdown: Total Cost of Construction: | | = | 5,327,090 | ` | |
| | | Cost for materia | als: \$ | _2,767,167 | Question A | above) |
| | | Cost for labor: | \$ | _2,559,923 | | |
| | | Cost for "other' | ·: \$ | | | |
| | covenant by | nt acknowledges to the Applicant to uses set forth in this A PART IV. | ndertake a Application | nd document tl | ne total amount o | |
| A. | payroll. I | ant presently oper Estimate projected ar after completion | l payroll a | t the Project sit | | |
| Commi be seein | unications Co | ervice Corporation poration. Absentiation and the laboration ight size the laboration are the laboration. | t this proje | ect, it is projecte | ed that the parent | company will |
| | | Present | First Yea | <u>r</u> | Second Year | Third Year |
| | Full-time: | \$ | ß | | \$ | \$ |
| | Part-time:1 | | | | | |

| | <u>Present</u> | First Year | Second Year | Third Year |
|--------------|----------------|------------|-----------------|---------------|
| Full-time: | \$ | \$ | \$ | \$ |
| | , | | | * |
| | | | | |
| Part-time: 1 | | | | |
| | | | | [|
| L | | | | |

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 |
| | | |

 $^{^{1}}$ 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).

| Management | | |
|---|--|--|
| Professional | | |
| Administrative | | |
| Production | | |
| Supervisor | | |
| Laborer | | |
| Independent | | |
| Contractor ² | | |
| Other | <u> </u> | |
| Other | | |
| Category of Jobs | Average Salary or Range | Average Fringe Benefits or |
| to be Created: | of Salary: | Range of Fringe Benefits |
| to bo Created. | <u> </u> | rumgo or rimgo zonoria |
| Management | | |
| Professional | | |
| Administrative | | |
| Production | | |
| Supervisor | | |
| Laborer | | |
| Independent | | |
| Contractor ³ | | |
| Other | | |
| forth in Schedule C, amo offered by the Agency to transaction/bond docume | ong other things, to determine the Applicant. The Applicant ents may include a covenant occupations and amount of p | rojections and the projections set e the financial assistance that will lent acknowledges that the by the Applicant to retain the payroll with respect to the Project set. |
| describe, please describe | | n existing location(s)? If YES, byces to be transferred and the erred: |
| YES | 1 | NO X |
| | | |

В.

² As used in this chart, this category includes employees of independent contractors.
³ As used in this chart, this category includes employees of independent contractors.

(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:

6-10 approximately

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

\$ 200,000 annually

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

0%

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)?

0%

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

None

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>Am</u> c | ount | % Sourced in | % Sourced in State |
|--------|-------------|------|-------------------|--------------------|
| | | | Chautauqua County | |
| Year 1 | \$ | 0 | 0 | 100% |
| Year 2 | \$ | 0 | 0 | 100% |
| Year 3 | \$ | 0 | O | 100% |

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:

Bed tax will be the result of having additional contractors on site to do the required work. Sales tax for all food and beverages contractors consume here will also be additional revenues for the count as a result of the project.

F. Estimated Value of Requested Financial Assistance:

| | (i.e., g that a | nated Value of Sales Tax Benef gross amount of cost of goods and so re subject to state and local sales and plied by [8.0%]) | ervices | \$ None | |
|----|--------------------|--|--|---|--------------------|
| | (i.e., p | nated Value of Mortgage Tax B principal amount of mortgage loans multiplied by [1.25%]) | enefit: | \$ None | |
| | Estin | nated Property Tax Benefit: | | | |
| | | Will the proposed Project utilize exemption benefit other than fror (if so, please describe) | | No | |
| | | Term of PILOT Requested: _10 y | years | | |
| | | Existing Property Taxes on Land | and Building: \$_ | 0 | |
| | | Estimated Property Taxes on con (without Agency financial assista | | 187,011 annual estima | ated |
| | rates a | NOTE: Upon acceptance of this Associated and indicate the estimate and assessed valuation, make an estimate tax jurisdictions, and attach such | d amount of PILC mate of the alloca | OT Benefit/Cost utilizi ation of PILOT payme | ng anticipated tax |
| G. | | ribe and estimate any other one- Agency) that the Project will c | | l revenues (not inclu | ading fees payable |
| | N/A | | | | |
| | | | OJECT SCHI | | |
| A. | | licable, has construction/reconstindicate the percentage of com | | ation work on the Pi | roject begun? If |
| | 1. | (a) Site clearance | YES | NO X | 0% complete |
| | | (b) Environmental Remediation | YES | NO X | 0% complete |
| | | (c) Foundation | YES | NO X | 0% complete |
| | | (d) Footings | YES | NO X | 0% complete |
| | | | | | |

| | | (e) Steel | YES | NO X | 0% complete |
|----|--------------------------|---|---|--|--|
| | | (f) Masonry | YES | NO X | 0% complete |
| | | (g) Interior | YES | NO X | 0% complete |
| | | (h) Other (describe below): ENGINEER | YES X | NO | 0% complete |
| | 2. | If NO to all of the above cate of construction, reconstruction Project? | egories, what on, renovatio | is the proposed n, installation or | date of commencement equipping of the |
| | | 2018 - 2020 | | | |
| В. | Proje | ide an estimate of time schedule ect is expected to occur: | | | when the first use of the |
| A. | What | PART VI. ENVI | impact of the | | lete the attached |
| | None | ronmental Assessment Form (S | cnedule G)). | | |
| B. | Is an | environmental impact statement ervation Law (i.e., the New Yo | nt required by rk State Envi | Article 8 of the ronmental Quality | N.Y. Environmental ty Review Act)? |
| | | YES | | NO X | |
| C. | Appli and se Envir | e be advised that the Agency micant the preparation and delive cope satisfactory to the Agency onmental Assessment Form. If red in connection with the Proj | ry to the Age , depending an environm | ency of an enviro on the responses tental report has l | nmental report in form set forth in the |
| D. | Protection any o | Applicant authorizes the Agency ction Agency, the New York State of the appropriate federal, state of the Project site or any proper the Project site or any proper | tate Departm or local goves | ent of Environme nmental agency | ental Conservation or or authority as to |

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: DET/LOCAL SERVICE CORP.

Signature/

Name: (KÜŘŤ W. MAÝŢJUM Title: PRESIDENT, C.T.O.

Date:

Sworn to before me this

day of January, 20

Notary Public

PATRICIA L. THOMPSON Notary Public, State of New York No. 01TH6002392

Qualified in Chautauqua County Commission Expires February 9, 20

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: DFT LOCAL SERVICE CORP.

Name: KURT W. MAYTUM

Title:PRESIDENT, C.T.O.

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.

Dame KURT W. MAYTUN Title:PRESIDENT. C.T.O.

Subscribed and affirmed to me this _______

Notary Public

PATRICIA L. THOMPSON Notary Public, State of New York No. 01TH6002392 Qualified in Chautaugua County

Commission Expires February 9, 20:

TABLE OF SCHEDULES:

| <u>Schedule</u> | Title | 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 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 most recent Annual Report, if any. | -Q's) and current reports (Form 8-K's) since the | | |
| | any anticipated Guarantor of the propos | ation described above in items F1, F2, and F3 of sed transaction, if different than the Applicant, ent 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).

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

| 1. | Describe the production | n process which occurs at the | facility to be financed. |
|-------------|---|--|---|
| | N/A | | |
| 2. | line, employee lunchrooparking, research, sales | om, offices, restrooms, storag , etc.) and location in relation | ressed in square footage) (e.g., production ge, warehouse, loading dock, repair shop, to production (e.g., same building, h blueprints of the facility to be financed. |
| <u>FUNC</u> | TION | LOCATION | SO. FOOTAGE |
| | | | Market Market and Market M |
| | | p.c. 118 | |
| | | | |
| | | TOTAL | |
| 3. | | | unction (e.g., executive offices, payroll, on (e.g., same building, adjacent land or |
| <u>FUNC</u> | <u>TION</u> | LOCATION | SQ. FOOTAGE |
| | | | |
| | | | |
| | | | |
| | | | |

TOTAL

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: | DFT LOCAL SERVICE CORP. |
| | |
| Signature: | KURT W. MAYTUM |
| Name: | KURT W. MAYTUM |
| Title: | PRESIDENT, C.T.O. |
| Date | 1/7/2014 |

GUIDELINES FOR ACCESS TO EMPLOYMENT OPPORTUNITIES

INITIAL EMPLOYMENT PLAN

| Prior to the expenditure of complete the following is | | | f other finan | cial assistant | ce, the Applicant shall |
|---|-----------------------------|-------------|---|-------------------|--|
| Applicant Name: | | | | | |
| Address: | | | | | |
| Type of Business: | | | ···· | | _ |
| Contact Person: | | | | | Tel. No.: |
| Please complete the folio proposed Project followi | | | ed full-time e | quivalent en | ployment plan for the |
| | | Ful Jobs | imated Num Il Time Equi s After Comp of the Projec | valent pletion | Estimate of Number of Residents of the Chautauqua County that would fill such jobs by the third year |
| Current and Planned Occupations | Present Jobs Per Occupation | 1 year | 2 years | <u>3 years</u> | |
| Management | | | | | Av. |
| Professional | | | | | are area |
| Administrative | | | | | elemberous constituto |
| Production | | | | | |
| Supervisor | | | · · · · · · · · · · · · · · · · · · · | | 2.,,, 2.22= |
| Laborer | | | | | aloute of the same |
| Independent Contractor | | ···· | | | and the substitute |
| Other (describe) | | | | | |

 $[\]frac{4}{2}$ 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 acquisition, construction and/or renovation of the Pro | n jobs anticipated to be created in connection with the oject: |
|--|---|
| Please indicate the estimated hiring dates for the new that will be required: | v jobs shown above and any special recruitment or training |
| | |
| Are the Applicant's employees currently covered by | a collective bargaining agreement? |
| YES | NO |
| IF YES, Union Name and Local: | |
| above number of jobs, types of occupations and amo Attached hereto as Schedule H is a true, correct and Combined Withholding, Wage Reporting, and Unem request of the Agency, the Applicant shall provide suthe Agency may require with respect to the Applicant | I by the Agency to the Applicant. The Applicant hay include a covenant by the Applicant to retain the |
| statement attached hereto are true, correct and compl | |
| | Name of Applicant: DFT LOCAL SERVICE COPPORATION Signature: KURT W. MAYTUM Title: PRESIDENT, C.T.O. Date: 1/7/2019 |

ANTI-RAIDING QUESTIONNAIRE

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

| A. | Applicant, or of a proposed user, employee of the Applicant or of a | t result in the removal of a plant or facility of the occupant or tenant of the Project, or a relocation of any proposed user, occupant or tenant of the Project, from atside of Chautauqua County) to an area within |
|--------|---|---|
| | YES | NO |
| If the | answer to Question A is YES, please pro- | vide the following information: |
| Addr | ess of the to-be-removed plant or facility of | or the plants or facilities from which employees are relocated: |
| | | |
| Name | | s of the to-be-removed plant or facility: |
| В. | Will the completion of the Project facilities of the Applicant, or of a | result in the abandonment of one or more plants or proposed user, occupant or tenant of the Project, New York other than in Chautauqua County? |
| | YES | NO |
| If the | answer to Question B is YES, please prov | vide the following information: |
| Addre | esses of the to-be-abandoned plants or fac- | ilities: |
| | | |
| Name | s of all current occupants of the to-be-aba | ndoned plants or facilities: |

| C, | | trial development agency at which its current cated with respect to the Applicant's intention? |
|-----------|---|--|
| | YES | NO |
| If the ar | nswer 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 present or of a proposed user, occupant or tenant of | rve the competitive position of the Applicant, the Project, in its industry? |
| | YES | NO |
| E. | Is the Project reasonably necessary to discovoccupant or tenant of the Project, from remoutside of the State of New York? | |
| | YES | NO |
| | ANSWER TO EITHER QUESTION D OR E IS " ATE ATTACHMENT. | YES", PLEASE PROVIDE DETAILS IN A |
| | ngly, the Applicant certifies that the provisions of iolated if financial assistance is provided by the Ag | |
| a propos | sed user, occupant or tenant of the Project, within t ncy to the chief executive officer(s) of the municip | andonment of a plant or facility of the Applicant, or he State of New York, notification will be made by ality or municipalities in which such plant or facility |
| | NDERSIGNED HEREBY CERTIFIES that the ans at attached hereto are true, correct and complete. | wers and information provided above and in any |
| | | Name of Applicant: DFT LOCAL SERVICE CORPORATION Signature: KURT W. MAYTUM Title: PRESIDENT, C.T.O Date: 7 2019 |

RETAIL QUESTIONNAIRE

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

| A. | othe | | ng that portion of the cost to be financed from equity or sources facilities or property that are or will be primarily used in ersonally visit the Project? |
|----------------|-----------------------|--|---|
| | | YES | NO |
| Tax L prope | aw of th rty (as c | he State of New York (the "Tax La | es" means (i) sales by a registered vendor under Article 28 of w") primarily engaged in the retail sale of tangible personal the Tax Law), or (ii) sales of a service to customers who |
| В. | of the | e cost to be financed from equity o | at percentage of the cost of the Project (including that portion r sources other than Agency financing) will be expended on d in making retail sales of goods or services to customers who |
| | | | |
| C. | | e answer to Question A is YES, and ate whether any of the following a | I the amount entered for Question B is greater than 33.33%, pply to the Project: |
| | 1. | | significant number of visitors from outside the economic ern New York) in which the Project is or will be located? |
| | | YES | NO |
| | 2. | not, but for the Project, be rease | he Project to make available goods or services which would anably accessible to the residents of the city, town or village e located, because of a lack of reasonably accessible retail ods or services? |
| | | YES | NO |
| | 3. | pursuant to Article 18-B of the numbering area (or census trace according to the most recent ce which the data relates, or at lea | ne of the following: (a) an area designated as an empire zone General Municipal Law; or (b) a census tract or block or block numbering area contiguous thereto) which, nsus data, has (i) a poverty rate of at least 20% for the year in st 20% of the households receiving public assistance, and (ii) st 1.25 times the statewide unemployment rate for the year to |
| | | YES | NO |

| | If the answer to any of the subdivisions 1 through | igh 3 of Question C is YES, attach details. |
|----|--|--|
| D. | | igh 3 of Question C is YES, will the Project preserve overall number of permanent, private sector jobs in the |
| | YES | NO |
| Ė. | State percentage of the Applicant's annual group | ss revenues comprised of each of the following: |
| | Retail Sales:% | Services:% |
| F. | State percentage of Project premises utilized for | or same: |
| | Retail Sales:% | Services:% |
| | NDERSIGNED HEREBY CERTIFIES that the a contact and complete the attached hereto are true, correct and complete the attached hereto are true, correct and complete the attached hereto are true, correct and complete the attached hereto are true. | inswers and information provided above and in any |
| | | Name of Applicant: DFT LOCAL SERVICE CORPORATION Signature: AUAT AUAT Name: KURT W. MAYTUM Title: PRESIDENT, C.T.O Date: 17/20/9 |

Schedule F

APPLICANT'S FINANCIAL ATTACHMENTS

See Attachments

Schedule G

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.

N/A

Schedule I

$\underline{\textbf{OTHER}\ \textbf{ATTACHMENTS}}$

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. To Be Determined.

1/4/2019

Schedule A DFT Local Service Corp.

| | | | Property | • | Assessment |
|--------------------------------------|-------------|------|-------------|-----------|------------------|
| Project Cost | | Year | Taxes | PILOT | PILOT Percentage |
| Total Cost | \$5,343,170 | - | 187,011 | 18,701 | 10% |
| | | 2 | 187,011 | 18,701 | 10% |
| New Assessment | | ო | 187,011 | 37,402 | 20% |
| Estimated | \$5,343,170 | 4 | 187,011 | 37,402 | 20% |
| | | 5 | 187,011 | 56,103 | 30% |
| Real Property Tax Savings (10 Years) | ars) | ၑ | 187,011 | 56,103 | 30% |
| Normal | \$1,870,110 | 7 | 187,011 | 74,804 | 40% |
| PILOT | \$561,033 | ∞ | 187,011 | 74,804 | 40% |
| Savings | \$1,309,077 | တ | 187,011 | 93,505 | 20% |
| | | 10 | 187,011 | 93,505 | 20% |
| Sales Tax Savings | \$0 | | \$1,870,110 | \$561,033 | |
| | | | | | |
| Mortgage Recording Tax Savings | \$0 | | | | |

Taxes and PILOT (Payment-in-Lieu-of-Tax) payments provided for illustrative purposes. PILOT Schedule would be based on Percentage of Assessme Real Property Tax Estimated Using an Average Combined Real Property Tax Rate of \$35.00 per \$1,000 for illustrative purposes. Applicant opting to forego Sales Tax and Mortgage Recording Tax Abatements Calculations based on estimates.

\$1,309,077

Total Estimated Savings

Schedule 1

Erie Shore Holdings LLC and the Maytum Company are related parties of DFT Communications Corporation (owner of DFT Local Service Corporation). Common ownership exists between these companies thru the Maytum family. These companies have had a host of connections, contractual or not with many agencies for the County of Chautauqua.

Currently, Erie Shore Holdings LLC and the Maytum Company have an outstanding loan with the IDA on the W. Lake Road property in Dunkirk, NY. DFT communications and subsidiaries have many services provided monthly for various county businesses, telecommunications and broadband related.

Schedule J

DFT Local Service Corporation will be building out a 145 Miles of Mainline Fiber to service unserved and underserved areas of Chautauqua County. Which includes part of the City of Dunkirk, and part of the following Townships: Arkwright, Charlotte, Chautauqua, Sheridan, Stockton, Pomfret, and also a portion of the Village of Cassadaga.

As part of this Mainline Fiber build DFT Local Service Corporation will be attaching to 1,200 national grid poles, over lashing to another 1,200 D&F and Cassadaga Telephone Company's poles, and set another 600 new pole. This process will not only include the fiber optic cable, Strand, latching wire, pole, mount hardware, anchors, splice cases, terminals, and Fiber Distribution Cabinets, Splitters, and Calix GPON Equipment, Cisco switches, Giga-center inside the home for both hardwire and wireless experience, generator and frame installed inside Cassadaga Central Office.

The purpose of this project is to serve the unserved and underserved area of the attached area, to break the digital divide so people in the rural areas of Chautauqua County I have the same or better experience of broadband as if they were living in New York City. Latest statics show a 3% increase in value of homes of those house that have a fiber base access -vs- those who do not.

Allowing them to Stream Entertainment, to take Distance Learning Classes for better education, Elementary thru High School Students can do their homework, access to what most businesses rely on allowing homeowner the ability to work from home, increase local business productivity.







