TOWN OF BETHLEHEM INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

IMPORTANT NOTICE: The answers to the questions contained in this application are necessary to determine your firm's eligibility for financing and other assistance from the Town of Bethlehem Industrial Development Agency. These answers will also be used in the preparation of papers in this transaction. Accordingly, all questions should be answered accurately and completely by an officer or other employee of your firm who is thoroughly familiar with the business and affairs of your firm and who is also thoroughly familiar with the proposed project. This application is subject to acceptance by the Agency.

TO: Town of Bethlehem Industrial Development Agency Town Hall—Room 203 445 Delaware Avenue Delmar, New York 12054

This application by applicant respectfully states:

APPLICANT:					
APPLICANT'S STREET ADDRESS:					
CITY:	STATE:	ZIP:	PHONE:		
FAX:	EMAIL:				

NAME OF PERSON(S) AUTHORIZED TO SPEAK FOR APPLICANT WITH RESPECT TO THIS APPLICATION:

IF APPLICANT IS REPRES	ENTED BY AN ATTO	RNEY, COMPLETE	THE FOLLOWING:		
NAME OF FIRM:					
NAME OF ATTORNEY:					
ATTORNEY'S STREET ADDRESS:					
CITY: STATE: ZIP: PHONE:					
FAX: EMAIL:					

NOTE: PLEASE READ THE INSTRUCTIONS ON PAGE 2 BEFORE FILLING OUT THIS APPLICATION.

INSTRUCTIONS

1. The Agency will not approve any application unless in the judgment of the Agency said application contains sufficient information upon which to base a decision whether to approve or tentatively approve an action.

2. Fill in all blanks, using "none" or "not applicable" or "N/A" where the question is not appropriate to the project which is the subject of this application (the "Project").

3. If an estimate is given as the answer to a question, put "(est.)" after the figure or answer which is estimated.

4. If more space is needed to answer any specific question, attach a separate sheet.

5. When completed, return this application to the Agency at the address indicated on the first page of this application.

6. The Agency will not give final approval to this application until the Agency has received a completed environmental assessment form concerning the Project which is the subject of this application.

7. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the Agency (with certain limited exceptions) are open to public inspection and copying. If the applicant feels that there are elements of the Project which are in the nature of trade secrets which if disclosed to the public or otherwise widely disseminated would cause substantial injury to the applicant's competitive position, the applicant may identify such elements in writing and request that such elements be kept confidential in accordance with Article 6 of the Public Officers Law.

8. The applicant will be required to pay to the Agency all actual costs incurred in connection with this application and the Project contemplated herein (to the extent such expenses are not paid out of the proceeds of the Agency's bonds issued to finance the project). The applicant will also be expected to pay all costs incurred by general counsel and bond counsel to the Agency. The costs incurred by the Agency, including the Agency's general counsel and bond counsel, may be considered as a part of the project and included as a part of the resultant bond issue.

9. The Agency has established a general Agency fee to be paid by the applicant upon closing. Such fee is to be in the amount of $\frac{3}{4}$ of one percent of the bond amount for a tax-exempt issue, $\frac{3}{4}$ of one percent of the bond amount for a taxable issue, $\frac{3}{4}$ of one percent of the cost of the project for a straight lease, and $\frac{1}{2}$ of one percent of the bond amount for a not-for-profit.

10. The Agency will charge annually an administrative fee of 5 basis points computed on (i) on the original bond amount or (ii) in the case of a straight lease on the cost of the project; the fee shall be payable on January 1 of each year until all the financing documents shall terminate and be discharged and satisfied.

11. The Agency requires a non-refundable administrative fee of FIVE HUNDRED DOLLARS (\$500.00) TO BE PAID UPON SUBMISSION OF THE APPLICATION.

12. Two (2) hard copies and one (1) electronic copy are required by the Agency.

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FOR AGENCY USE ONLY

1.	Project Number	
2.	Date application Received by Agency	, 20
3.	Date application referred to attorney for review	, 20
4.	Date copy of application mailed to members	, 20
5.	Date notice of Agency meeting on application posted	, 20
6.	Date notice of Agency meeting on application mailed	, 20
7.	Date of Agency meeting on application	, 20
8.	Date Agency conditionally approved application	, 20
9.	Date of mailing Notice of Public Hearing to affected taxing jurisdictions	, 20
10.	Date of posting Notice of Public Hearing	, 20
11.	Date of publication Notice of Public Hearing	, 20
12.	Date Public Hearing held	, 20
13.	Date Environmental Assessment Form ("EAF") received	, 20
14.	Date Agency completed environmental review	, 20
15.	Date of Town Board Approval	, 20
16.	Date of final approval or rejection of application	, 20

SUMMARY OF PROJECT

Applicant:			
Contact Person:			
Phone Number:			
Occupant:			
Project Location:			
Approximate Size of	Project Site:		
Description of Project	t:		
Type of Project:	 Manufacturing Commercial Other-Specify 		 Warehouse/Distribution Not-For-Profit
Employment Impact:	Existing Jobs: New Jobs:		
Project Cost: \$			
Type of Financing:	□ Tax-Exempt	□ Taxable	□ Straight Lease
Amount of Bonds Rea	quested: \$		
Estimated Value of T	ax-Exemptions:		
Mortga Real P	Sales and Compensating age Recording Taxes: roperty Tax Exemptions: (please specify):	Use Tax:	\$ \$ \$

I. <u>INFORMATION CONCERNING THE PROPOSED OCCUPANT OF THE</u> <u>PROJECT (HEREINAFTER, THE "COMPANY")</u>.

A. <u>Identity of Company</u>:

1.	Coi	mpany	Name:					
	Pre	sent	Address:					
	Τον	wn/Ci	ty: State: Zip Code:					
	Em	ploye	r's ID No.:					
	Pho	one: _	Fax: Email:					
2.	If tl	he Co	Company differs from the Applicant, give details of relationship:					
3	Ind	icate 1	type of business organization of Company:					
	a.		Corporation. If so, incorporated in what country?;					
			What State? Date Incorporated:;					
			Type of Corporation?;					
			Authorized to do business in New York? Yes; No					
	b.		Partnership. If so, indicate type of partnership:;					
			Number of general partners; Number of limited partners					
	c.		Limited liability company. If so, formed in what state?					
			Date formed; Authorized to do business in New York? Yes No					
	d.		Sole proprietorship.					

4 Is the Company a subsidiary or direct or indirect affiliate of any other . organization(s)? If so, indicate name of related organization(s) and relationship:

_

B. <u>Management of Company</u>:

1. List all owners, officers, members, directors and partners (complete all columns for each person):

NAME AND HOME ADDRESS	OFFICE HELD	OTHER PRINCIPAL BUSINESS

- 2. Is the Company or management of the Company now a plaintiff or a defendant in any civil or criminal litigation? Yes _____; No _____.
- 3. Has any person listed above ever been convicted of a criminal offense (other than a minor traffic violation)? Yes _____; No _____.
- 4. Has any person listed above or any concern with whom such person has been connected ever been in receivership or been adjudicated bankrupt? Yes _____; No _____.
- 5. Has the company been cited by any regulatory authority for environmental violations? Yes _____; No _____.
- 6. If the answer to any of questions 2 through 5 is yes, please furnish details in a separate attachment.
- C. <u>Principal Owners of Company</u>:
 - 1. Is the Company publicly held? Yes _____; No _____. If yes, please list exchanges where stocks are traded:
 - 2. If no, list all stockholders having a 5% or more interest in the Company:

NAME	Address	PERCENTAGE OF HOLDING

_					
E.		e attach copies of the company's financial statements (audited preferred) for st four years.			
F.		Please attach your Company's business plan; including projected financial statements for the next three years.			
Note:	For iter	ns E and F, confidentiality may be maintained upon your specific request.			
DAT	A REG.	ARDING PROPOSED PROJECT.			
A.	<u>Descr</u> Projec	iption of the Project: (Please provide a brief narrative description of the ct.)			
В.	Locati	ion of the Project:			
	1.	Street			
	2.	Address: City of:			
	2. 3.	Town of:			
	4.	Village of:			
	5.	County of:			
C.	Descr	iption of the Project site:			
	1.	Approximate size (in acres or square feet) of the Project site: Is a map, survey or sketch of the Project site attached? Yes; No			
	2.	Are there existing buildings on the Project site? Yes; No			
		a. If yes, indicate the number of buildings on the site: Also, please briefly identify each existing building and indicate the approximate size (in square feet) of each such building:			

b.	Are the existing buildings in operation? Yes; No describe present use of present buildings:
c.	Are the existing buildings abandoned? Yes; No; About to be abandoned? Yes; No If yes, desc
d.	Attach photograph of any existing buildings.
Util	ities serving the Project site:
	Vater-Municipal:
•	Other (describe)
S	ewer-Municipal
~	Other (describe)
E	lectric-Utility
	Other (describe)
Н	leat-Utility
	Other (describe)
Pres	sent legal owner of the Project site:
a.	If the Company owns the Project site, indicate date of pur , 20; purchase price \$
b.	If Company does not own the Project site, does Company has option signed with the owner to purchase the Project site?; No If yes, indicate date option signed wi

owner: _____, 20__; and the date the option expires: _____, 20__.

- c. If the Company does not own the Project site, is there a relationship legally or by common control between the Company and the present owner of the Project site? Yes _____; No _____. If yes, describe:
- 5. a. Zoning District in which the Project is located: _____
 - b. Are there any variances or special permits affecting the Project site? Yes _____; No _____. If yes, list below and attach copies of all such variances or special permits:

D. <u>Description of Proposed Construction</u>:

- 1. Does part of the Project consist of the acquisition or construction of a new building or buildings? Yes _____; No _____. If yes, indicate number and size of new buildings:
- 2. Does part of the Project consist of additions and/or renovations to existing buildings located on the Project site? Yes ____; No ____. If yes, indicate the buildings to be expanded or renovated, the size of any expansions and the nature of expansion and/or renovation:
- 3. Describe the principal uses to be made by the Company of the building or buildings to be acquired, constructed or expanded:

- E. <u>Description of the Equipment</u>:
 - Does a part of the Project consist of the acquisition or installation of machinery, equipment or other personal property (the "Equipment")? Yes
 _____; No _____. If yes, describe the Equipment:
 - 2. With respect to the Equipment to be acquired, will any of the Equipment be Equipment which has previously been used? Yes _____; No _____. If yes, please provide detail:

3. Describe the principal uses to be made by the Company of the Equipment to be acquired or installed:

F. <u>Project Use</u>:

1. What are the principal products to be produced at the Project?

2. What are the principal activities to be conducted at the Project?

- 3. Does the Project include facilities or property that are primarily used in making retail sales of goods or services to customers who personally visit such facilities? Yes _____; No _____. If yes, please provide detail:
- 4. If the answer to question 3 is yes, what percentage of the cost of the Project 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? ____%.
- 5. If the answer to question 3 is yes, and the answer to question 4 is more than 33.33%, indicate whether any of the following apply to the Project:
 - a. Will the Project be operated by a not-for-profit corporation? Yes _____; No _____. If yes, please explain:
 - b. Is the Project likely to attract a significant number of visitors from outside the economic development region in which the Project will be located? Yes _____; No _____. If yes, please explain:
 - c. Would the Project occupant, but for the contemplated financial assistance from the Agency, locate the related jobs outside the State of New York? Yes _____; No _____. If yes, please explain:

d. 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 _____. If yes, please provide detail:

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- e. Will the Project be located in one of the following: (i) an area designed as an economic development zone pursuant to Article 18-B of the General Municipal Law; or (ii) 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 (x) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of households receiving public assistance, and (y) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates? Yes _____; No _____. If yes, please explain:
- If the answers to any of subdivisions c. through e. of question 5 is yes, will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York? Yes _____; No _____. If yes, please explain:
- 7. Will the completion of the Project result in the removal of a plant or facility of the Company or another proposed occupant of the Project (a "Project Occupant") from one area of the State of New York to another area of the State of New York? Yes _____; No _____. If yes, please explain:
- 8. Will the completion of the Project result in the abandonment of one or more plants or facilities of the Company located in the State of New York? Yes _____; No _____. If yes, please provide detail:

9.		If the answer to either question 7 or question 8 is yes, indicate whether any of the following apply to the Project:		
	a.	Is the Project reasonably necessary to preserve the competitive position of the Company or such Project Occupant in its industry? Yes; No If yes, please provide detail:		
	b.	Is the Project reasonably necessary to discourage the Company or such Project Occupant from removing such other plant or facility to a location outside the State of New York? Yes ; No If yes, please provide detail:		
10.		the Project be owned by a not-for-profit corporation? Yes; No If yes, please provide detail:		
11.	Secti Yes	e answer to 10 is yes, is the corporation exempt from taxation under ton 501(c) of the Internal Revenue Code of 1986, as amended? ; No If yes, please indicate details and which subsection to 501(c).		
12.		e answer to question 10 is yes, indicate whether any of the following y to the Project:		
	a.	Is the Project a housing facility primarily designed to be occupied by individuals 60 years of age or older? Yes; No If yes, please explain:		

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Is the Project a dormitory for an educational institution? Yes ____;
 No ____. If yes, please explain:

- c. Is the Project a facility as defined in Article 28 of the Public Health Law? Yes _____; No _____. If yes, please explain:
- 13. If the answer to any of the questions contained in question 12 is yes, indicate whether the cost of the Project will exceed \$20 million. Yes _____; No _____. If yes, please provide detail:
- 14. Will the Project be sold or leased to a municipality? Yes _____; No _____. If yes, please provide detail:

- G. <u>Other Involved Agencies</u>:
 - 1. Please indicate all other local agencies, boards, authorities, districts, commissions or governing bodies (including any city, county and other political subdivision of the State of New York and all state departments, agencies, boards, public benefit corporations, public authorities or commissions) involved in approving or funding or directly undertaking action with respect to the Project. For example, do you need a municipal building permit to undertake the Project? Do you need a zoning approval to undertake the Project? If so, you would list the appropriate municipal building department or planning or zoning commission which would give said approvals.

2. Describe the nature of the involvement of the federal, state or local agencies described above:

H. <u>Project Status</u>:

- 1. If the Project includes the acquisition of any land or buildings, have any steps been taken toward acquiring same? Yes _____; No _____. If yes, please discuss in detail the approximate stage of such acquisition.
- 2. If the Project includes the acquisition of any Equipment, have any steps been taken toward acquiring same? Yes _____; No _____. If yes, please discuss in detail the approximate stage of such acquisition:
- 3. If the Project involves the construction or reconstruction of any building or other improvement, has construction or reconstruction work on any such building or improvement begun? Yes _____; No _____. If yes, please discuss in detail the approximate extent of construction or reconstruction and the extent of completion. Indicate in your answer whether such specific steps have been completed as site clearance and preparation; completion of foundations, installation of footings; etc.:

4. Please indicate amount of funds expended on the Project by the Company in the past three (3) years and the purposes of such expenditures:

- 5. Please indicate the date the applicant estimates the Project will be completed: ______.
- 6. Please describe the projected timeframe for the creation of any new jobs with respect to the undertaking of the Project:
- I. <u>Agent Status (for sales tax purposes) (See also question A.3 in Part VI below):</u>
 - 1. If the Agency approves the Project, there are two methods that may be used to undertake the Project. The applicant can undertake the Project privately and sell the Project to the Agency upon completion. Alternatively, the applicant can request to be appointed as "agent" of the Agency for purposes of constructing the project, which request, if approved, will result in the applicant constructing the project as "agent" of the Agency, in which case certain laws applicable to public construction may apply to the Project. Does the applicant wish to be designated as "agent" of the Agency for purposes of undertaking the Project? Yes _____; No _____.
 - 2. If the answer to question 1 is yes, does the applicant desire such "agent" status prior to the closing date of the financing? Yes _____; No _____.

III. <u>INFORMATION CONCERNING LEASES OR SUBLEASES OF THE PROJECT.</u> (PLEASE COMPLETE THE FOLLOWING SECTION IF THE COMPANY INTENDS TO LEASE OR SUBLEASE ANY PORTION OF THE PROJECT).

A. Does the Company intend to lease or sublease more than 10% (by area or fair market value) of the Project? Yes _____; No _____. If yes, please complete the following for each existing or proposed tenant or subtenant:

1.	Sublessee Name: Present Address:			
	City:		State:	Zip:
	Employer's ID No.:			
	Sublessee Is:	Corporation:	Partnership:	Sole Proprietorship:
	Relationship to Con	npany:		

Percentage of Project to be leased or subleased:

Use of Project intended by Sublessee:

Date of lease or sublease to Sublessee:

Term of lease or sublease to Sublessee:

2.

3.

Will any portion of the space leased by this sublessee be primarily used in making retail sales of goods or services to customers who personally visit the Project? Yes _____; No _____. If yes, please provide on a separate attachment (a) details and (b) the answers to questions II(F)(4) through (6) with respect to such sublessee.

Please provide on a separate attachment answers to questions II(F)(7) and (8) with respect to such sublessee.

Sublessee Name:		
Present Address:		
City:	State:	Zip:
Employer's ID No.:		
Sublessee Is: Corpora	tion: Partnership:	Sole Proprietorship:
Relationship to Company:		
Percentage of Project to be le	ased or subleased:	
Use of Project intended by St	ublessee:	
Date of lease or sublease to S	ublessee:	
Term of lease or sublease to	Sublessee:	
Will any portion of the spac retail sales of goods or servic ; No If yes, pl the answers to questions II(F	es to customers who personal ease provide on a separate at	lly visit the Project? Yes tachment (a) details and (b)
Please provide on a separate respect to such sublessee.	e attachment answers to ques	stions II(F)(7) and (8) with
Sublessee Name:		
Present Address:		
City:	State:	Zip:

Sublessee Is: ____ Corporation: ____ Partnership: ____ Sole Proprietorship: ___

Relationship to Company:

Employer's ID No.:

Percentage of Project to be leased or subleased:

Use of Project intended by Sublessee:

Date of lease or sublease to Sublessee:

Term of lease or sublease to Sublessee:

Will any portion of the space leased by this sublessee be primarily used in making retail sales of goods or services to customers who personally visit the Project? Yes _____; No _____. If yes, please provide on a separate attachment (a) details and (b) the answers to questions II(F)(4) through (6) with respect to such sublessee.

Please provide on a separate attachment answers to questions II(F)(7) and (8) with respect to such sublessee.

B. What percentage of the space intended to be leased or subleased is now subject to a binding written lease or sublease?

IV. <u>EMPLOYMENT IMPACT</u>.

A. Indicate the number of people presently employed at the Project site and the **additional** number that will be employed at the Project site at the end of the first and second years after the Project has been completed, using the tables below for (1) employees of the Applicant, (2) independent contractors, and (3) employees of independent contractors. (Do not include construction workers). Also indicate below the number of workers employed at the Project site representing newly created positions as opposed to positions relocated from other project sites of the applicant. Such information regarding relocated positions should also indicate whether such positions are relocated from other project sites financed by obligations previously issued by the Agency.

TYPE OF EMPLOYMENT Employees of Applicant					
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled	Totals
Present Full Time					
Present Part Time					
Present Seasonal					

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First Year Full Time		
First Year Part Time		
First Year Seasonal		
Second Year Full Time		
Second Year Part Time		
Second Year Seasonal		

TYPE OF EMPLOYMENT Independent Contractors					
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled	Totals
Present Full Time					
Present Part Time					
Present Seasonal					
First Year Full Time					
First Year Part Time					
First Year Seasonal					
Second Year Full Time					
Second Year Part Time					

Second Year Seasonal			
----------------------	--	--	--

TYPE OF EMPLOYMENT Employees of Independent Contractors					
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled	Totals
Present Full Time					
Present Part Time					
Present Seasonal					
First Year Full Time					
First Year Part Time					
First Year Seasonal					
Second Year Full Time					
Second Year Part Time					
Second Year Seasonal					

B. Indicate below the number of people presently employed at the Project site and the **additional** number that will be employed at the Project site at the end of the first and second years after the Project has been completed. (Do not include construction workers). Also indicate below the number of workers employed at the Project site representing newly created positions as opposed to positions relocated from other project sites of the applicant. Such information regarding relocated positions should also indicate whether such positions are relocated from other project sites financed by obligations previously issued by the Agency.

	RELATED EMPL	OYMENT INFOI	RMATION	
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled
Estimated Salary and Fringe Benefit Averages or Ranges				
Estimated Number of Employees Residing in the Capital District Economic Development Region ¹				

C. Please prepare a separate attachment describing in detail the types of employment at the Project site. Such attachment should describe the activities or work performed for each type of employment.

V. <u>PROJECT COSTS AND FINANCING SOURCES</u>.

A. <u>Anticipated Project Costs</u>. State the costs reasonably necessary for the acquisition of the Project site, the construction of the proposed buildings and the acquisition and installation of any machinery and equipment necessary or convenient in connection therewith, and including any utilities, access roads or appurtenant facilities, using the following categories:

Description of Cost	Amount
Land	\$
Buildings	\$
Machinery and equipment costs	\$
Utilities, roads and appurtenant costs	\$
Architects and engineering fees	\$

¹ The Capital District Economic Development Region consists of the following counties: Albany, Schenectady, Rensselaer, Greene, Columbia, Saratoga, Warren and Washington.

Costs of Bond Issue (legal, financial and printing)	\$
Construction loan fees and interest (if applicable)	\$
Other (specify)	
	\$
	\$
	\$
TOTAL PROJECT COSTS	\$

B. <u>Anticipated Project Financing Sources</u>. State the sources reasonably necessary for the financing of the Project site, the construction of the proposed buildings and the acquisition and installation of any machinery and equipment necessary or convenient in connection therewith, and including any utilities, access roads or appurtenant facilities, using the following categories:

Description of Sources	<u>Amount</u>
Private Sector Financing	\$
Public Sector	
Federal Programs	\$
State Programs	\$
Local Programs	\$
Applicant Equity	\$

Other (specify)	
	\$
	\$ -
	\$ -
TOTAL AMOUNT OF PROJECT FINANCING SOURCES	\$ -

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C.	Have any of the above expenditures already been made by the app Yes; No If yes, indicate particulars.				
D.	Amo	unt of loan requested: \$;			
	Matu	rity requested:years.			
E.		a commitment for financing been received as of this application date, and if so, whom?			
	Yes_	; No Institution Name:			
	Provi	ide name and telephone number of the person we may contact.			
	Name	e: Phone:			
F.		percentage of Project costs to be financed from public sector sources is nated to equal the following:%			
G.		The total amount estimated to be borrowed to finance the Project is equal to the following: \$			
FIN.	ANCIA	L ASSISTANCE EXPECTED FROM THE AGENCY.			
A.	Finar	ncing			
	1.	Is the applicant requesting that the Agency issue bonds to assist in financing the project? Yes; No If yes, indicate:			
		a. Amount of loan requested:Dollars;b. Maturity requested:Years.			
	2.	Is the interest on such bonds intended to be exempt from federal income taxation? Yes; No			
	3.	If the answer to question 2 is yes, will any portion of the Project be used for any of the following purposes:			
		 a. retail food and beverage services: Yes; No b. automobile sales or service: Yes; No c. recreation or entertainment: Yes; No d. golf course: Yes; No e. country club: Yes; No 			

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VI.

- f. massage parlor: Yes____; No____
- tennis club: Yes ; No g.
- skating facility (including roller h.
- skating, skateboard and ice skating):Yes____; No____ racquet sports facility (including i. handball and racquetball court):Yes____; No____
 - hot tub facility: Yes____; No____
- j. k. suntan facility: Yes____; No____
- racetrack: Yes____; No_____ 1.
- 4. If the answer to any of the above questions contained in question 3 is yes, please furnish details on a separate attachment.
- 5. Is the Applicant requesting the Agency to issue federally tax exempt Enterprise Zone bonds? Yes___; No____.

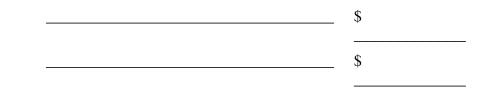
B. Tax Benefits.

- 1. Is the applicant requesting any real property tax exemption in connection with the Project that would not be available to a project that did not involve the Agency? Yes ____; No ____.
- 2. Is the applicant expecting that the financing for the Project will be secured by one or more mortgages? Yes ____; No ____. If yes, what is the approximate amount of financing to be secured by mortgages?
- Is the applicant expecting to be appointed agent of the Agency for the 3. purpose of qualifying for exemption from N.Y.S. Sales Tax or Compensating Use Tax? Yes ; No . If yes, what is the approximate amount of purchases which the applicant expects to be exempt from the N.Y.S. Sales and Compensating Use Taxes? \$_____.
- 4. What is the estimated value of each type of tax-exemption being sought in connection with the Project? Please detail the type of tax-exemption and value of each exemption.

a.	N.Y.S. Sales and Compensating Use Taxes:	\$
b.	Mortgage Recording Taxes:	\$
c.	Real Property Tax Exemptions:	\$

d.

Other (please specify):



- 5. Are any of the real property tax exemptions being sought inconsistent with the Agency's Uniform Tax Exemption Policy? Yes ____; No ____. If yes, please explain how the request of the applicant differs from the Agency's Uniform Tax Exemption Policy:
- 6. Is the Project located in the Town's state designated Empire Zone? Yes___; No____.
- C. <u>Project Benefit Information</u>. Using the attached template, provide the Agency with information so that the Agency can perform a cost/benefit analysis of undertaking the Project.
- VII. <u>**REPRESENTATIONS BY THE APPLICANT**</u>. The applicant understands and agrees with the Agency as follows:
 - A. <u>Job Listings:</u> In accordance with Section 858-b(2) of the New York General Municipal Law, the applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the Project (including any tenants located in the Project) will be listed with (1) the New York State Department of Labor Community Services Division (the "DOL") and (2) the administrative entity of the service delivery area created by the Federal Job Training Partnership Act (P.L. No. 97-300) (the "JTPA Law") in which the Project Facility is located (while currently cited in Section 858-b of the Act, the Federal Job Training Partnership Act was repealed effective June 1, 2000, and has been supplanted by the Workplace Investment Act of 1998 (P.L. No. 105-220)).
 - B. <u>First Consideration for Employment</u>: In accordance with Section 858-b(2) of the New York General Municipal Law, the applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, where practicable, the applicant (and any tenants located in the Project) will first consider persons eligible to participate in JTPA Law programs who shall be referred by the JTPA Entities for new employment opportunities created as a result of the Project.
 - C. <u>Annual Sales Tax Filings</u>: In accordance with Section 874(8) of the New York General Municipal Law, the applicant understands and agrees that, if the Project receives any sales tax exemptions as part of the Financial Assistance from the

Agency, in accordance with Section 874(8) of the General Municipal Law, the applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the applicant and all consultants or subcontractors retained by the applicant.

- D. <u>Annual Employment Reports</u>: The applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, the applicant agrees to file, or cause to be filed (including any tenants located in the Project), with the Agency, on an annual basis, reports regarding the number of people employed at the project site.
- E. <u>Agency Financial Assistance Required for Project</u>: The Project would not be undertaken but for the Financial Assistance provided by the Agency or, if the Project could be undertaken without the Financial Assistance provided by the Agency, then the Project should be undertaken by the Agency for the following reasons:
- F. <u>Relocation or Abandonment</u>: The provisions of subdivision one of Section 862 of the General Municipal Law will not be violated if Financial Assistance is provided for the Project.
- G. <u>Compliance with Federal, State, and Local Laws</u>: The applicant is in substantial compliance with applicable local, state, and federal tax, worker protection, and environmental laws, rules, and regulations.
- H. <u>False or Misleading Information</u>: The applicant understands that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of any Financial Assistance and the reimbursement of an amount equal to all or part of any tax exemptions claimed by reason of Agency involvement in the Project.
- I. <u>Absence of Conflicts of Interest</u>: The applicant has received from the Agency a list of the members, officers and employees of the Agency. No member, officer or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described:

I affirm under penalty of perjury that all statements made on this application are true, accurate and complete to the best of my knowledge.

By:

Title:

NOTE: APPLICANT MUST COMPLETE THE APPLICABLE VERIFICATION FORM ATTACHED TO THIS APPLICATION BEFORE A NOTARY PUBLIC <u>AND</u> MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT ATTACHED TO THIS APPLICATION.

Applicant

Page 30 of 44

(If Applicant is a Corporation)

STATE OF)) SS.:	
COUNTY OF)	
(Name of o	fficer of applicant)	, deposes and says that he is the
	of	
(Title)		(Company Name)

the corporation named in the attached application; that he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. Deponent further says that the reason this verification is made by the deponent and not by said Company is because the said Company is a corporation. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as an officer of and from the books and papers of said corporation.

(Officer of applicant)

Sworn to before me this

_____ day of _____, 20___.

(If Applicant is a Partnership)

STATE OF)
) SS.:
COUNTY OF)

	, deposes and says that he is on	e
(Name of individual)		
of the members of the firm of	, th	e
	(Partnership name)	

partnership named in the attached application; that he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as a member of and from the books and papers of said partnership.

(Partner)

Sworn to before me this

_____ day of _____, 20___.

(If Applicant is a Limited Liability Company)

STATE OF)	
) SS.:	
COUNTY OF)	
		, deposes and says that he is the
(Name of o	fficer of applicant)	,,,,,,,
	of	,
(Title)		(Company Name)

the Company named in the attached application; that he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. Deponent further says that the reason this verification is made by the deponent and not by said Company is because the said Company is a limited liability company. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as an officer of and from the books and papers of said Company.

(Officer of applicant)

Sworn to before me this

_____ day of _____, 20___.

(If Applicant Sole Proprietor)

STATE OF)) SS.: COUNTY OF)

____, deposes and says that he has read

(Name individual)

the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application

(Proprietor)

Sworn to before me this

_____ day of _____, 20___.

HOLD HARMLESS AGREEMENT

Applicant hereby releases the Town of Bethlehem Industrial Development Agency and the members, officers, servants, agents and employees thereof (hereinafter collectively referred to as the "Agency") from, agrees that the Agency shall not be liable for and agrees to indemnify, defend and hold the Agency harmless from and against any and all liability arising from or expense incurred by (1) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the application or the project described therein or the issue of bonds requested therein are favorable acted upon by the Agency, and (2) the Agency described therein or the issue of bonds requested therein financing of the project described herein; including without limiting the generality of the foregoing, all causes of action and attorneys' fees and any other expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing. If, for any reason 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 Agency or the Applicant are unable to find buyers willing to purchase the total bond issue requested, then, and in that event, upon presentation of any invoice itemizing the same, Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred by the Agency in the processing of the Application, including attorneys' fees, if any.

(Applicant)

By: _____

Title: _____

Sworn to before me this

_____ day of _____, 20___.

NOTE: THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS THE APPLICANT SIGNS THE HOLD HARMLESS AGREEMENT NOTED ABOVE.

TOWN OF BETHLEHEM INDUSTRIAL DEVELOPMENT AGENCY COST / BENEFIT ANALYSIS - PROJECT QUESTIONNAIRE

In order for the Town of Bethlehem Industrial Development Agency (the "Agency") to prepare a Cost/Benefit Analysis for a proposed project (the "Project"), the Applicant must answer the questions contained in this Project Questionnaire (the "Questionnaire") and complete the attached Schedules. This Questionnaire and the attached Schedule will provide information regarding various aspects of the Project, and the costs and benefits associated therewith.

The Questionnaire must be completed before we can finalize the Cost/Benefit Analysis. Please complete the Questionnaire and forward it to us at your earliest convenience.

1. Name of Project Beneficiary ("Company"):	
2. Brief Identification of the Project:	
3. Estimated Amount of Project Benefits Soug	ht:
A. Amount of Bonds Sought:	\$
B. Value of Sales Tax Exemption Sought	\$
C. Value of Real Property Tax Exemption	Sought
	\$
D. Value of Mortgage Recording Tax Exer	nption
Sought	\$

PROJECTED PROJECT INVESTMENT

A.	Land-Related Costs	
1.	Land acquisition	\$
2.	Site preparation	\$
3.	Landscaping	\$
4.	Utilities and infrastructure development	\$
5.	Access roads and parking development	\$
6.	Other land-related costs (describe)	\$
B.	Building-Related Costs	
1.	Acquisition of existing structures	\$
2.	Renovation of existing structures	\$
3.	New construction costs	\$
4.	Electrical systems	\$
5.	Heating, ventilation and air conditioning	\$
6.	Plumbing	\$
7.	Other building-related costs (describe)	\$

PROJECTED PROJECT INVESTMENT - Continued

C.	Machinery and Equipment Costs	
1.	Production and process equipment	\$
2.	Packaging equipment	\$
3.	Warehousing equipment	\$
4.	Installation costs for various equipment	\$
5.	Other equipment-related costs (describe)	\$
D.	Furniture and Fixture Costs	
1.	Office furniture	\$
2.	Office equipment	\$
3.	Computers	\$
4.	Other furniture-related costs (describe)	\$
E.	Working Capital Costs	
1.	Operation costs	\$
2.	Production costs	\$
3.	Raw materials	\$
4.	Debt service	\$
5.	Relocation costs	\$
6.	Skills training	\$
7.	Other working capital-related costs (describe)	\$
F.	Professional Service Costs	
1.	Architecture and engineering	\$
2.	Accounting/legal	\$
3.	Other service-related costs (describe)	\$
G.	Other Costs	
1.		\$
2.		\$
H.	Summary of Expenditures	
1.	Total Land Related Costs	\$
2.	Total Building Related Costs	\$
3.	Total Machinery and Equipment Costs	\$
4.	Total Furniture and Fixture Costs	\$
5.	Total Working Capital Costs	\$
б.	Total Professional Service Costs	\$
7.	Total Other Costs	\$

PROJECTED CONSTRUCTION EMPLOYMENT IMPACT

I. Please provide estimates of total construction jobs at the Project:

Year	Construction Jobs (Annual wages and benefits \$40,000 and under)	Construction Jobs (Annual wages and benefits over \$40,000)
Current Year		
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		

II. Please provide estimates of total annual wages and benefits of total construction jobs at the Project:

Year	Total Annual Wages and Benefits	Estimated Additional NYS Income Tax
Current Year	\$	\$
Year 1	\$	\$
Year 2	\$	\$
Year 3	\$	\$
Year 4	\$	\$
Year 5	\$	\$

PROJECTED PERMANENT EMPLOYMENT IMPACT

I. Please provide estimates of total existing permanent jobs to be preserved or retained as a result of the Project:

Year	Existing Jobs (Annual wages and benefits \$40,000 and under)	Existing Jobs (Annual wages and benefits over \$40,000)
Current Year		
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		

II. Please provide estimates of total new permanent jobs to be created at the Project:

Year	New Jobs (Annual wages and benefits \$40,000 and under)	New Jobs (Annual wages and benefits over \$40,000)
Current Year		
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		

III. Please provide estimates of total annual wages and benefits of total permanent jobs at the Project:

Year	Total Annual Wages and	Estimated Additional
	Benefits	NYS Income Tax
Current Year	\$	\$
Year 1	\$	\$
Year 2	\$	\$
Year 3	\$	\$
Year 4	\$	\$
Year 5	\$	\$

- IV. Please provide estimates for the following:
 - A. Creation of New Job Skills relating to permanent jobs. Please complete Schedule A.

PROJECTED OPERATING IMPACT

I. Please provide estimates for the impact of Project operating purchases and sales:

Additional Purchases (1 st year following project completion)	\$
Additional Sales Tax Paid on Additional Purchases	\$
Estimated Additional Sales (1 st full year following project completion)	\$
Estimated Additional Sales Tax to be collected on additional sales (1 st full year following project completion)	\$

II. Please provide estimates for the impact of Project on existing real property taxes and new payments in lieu of taxes ("Pilot Payments"):

Year	Existing Real Property Taxes	New Pilot Payments	Total
Current Year			
Year 1			
Year 2			
Year 3			
Year 4			
Year 5			
Year 6			
Year 7			
Year 8			
Year 9			
Year 10			

- III. Please provide estimates for the impact of other economic and local benefits expected to be produced as a result of the Project:
- IV. Please provide estimates for the impact of economic and local costs expected to be produced as a result of the Project:

CERTIFICATION

I certify that I have prepared the responses provided in this Questionnaire.

I understand that the foregoing information and attached documentation will be relied upon, and constitute inducement for, the Agency in providing financial assistance to the Project. I certify that I am familiar with the Project and am authorized by the Company to provide the foregoing information, and such information is true and complete to the best of my knowledge. I further agree that I will advise the Agency of any changes in such information, and will answer any further questions regarding the Project prior to the closing.

I affirm under penalty of perjury that all statements made on this application are true, accurate and complete to the best of my knowledge.

Date Signed: , 20	Name of Person Completing Project Questionnaire on behalf of the Company.
	Name: Title: Telephone Number:
	Signature:

SCHEDULE A

CREATION OF NEW JOB SKILLS

Please list the projected new job skills for the new permanent jobs to be created at the Project as a result of the undertaking of the Project by the Company.

New Job Skills	Number of Positions Created	Wage Rate

Should you need additional space, please attach a separate sheet.

TOWN OF BETHLEHEM INDUSTRIAL DEVELOPMENT AGENCY ANNUAL STATEMENT OF FINANCIAL DISCLOSURE

Estimated Sales Tax Savings: Projected Construction Cost\$-\$-\$-\$-\$-\$-\$-\$-\$-\$0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 0.00%0.00% 6.00%0.00%<	Project Name:				
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Number of Existing Jobs 0.00 0.00 0.00 0.00 Total Projected New Jobs(Schedule B) $\$$ $ \$$ $-$ Projected Total Wages of New Jobs (Schedule B) $\$$ $ \$$ $ \$$ $-$ Income and Sales Taxes: $\$$ $ \$$ $ \$$ $ \$$ $-$ Average State Income Tax Rate * 3.50% 3.50% 3.50% 3.50% 3.50% Estimated Total State Income Taxes Paid $\$$ $ \$$ $ \$$ $-$ Average % of Income Paid as Sales Tax 1.8% 1.8% 1.8% 1.8% Sales Tax Rate 8.25% 8.25% 8.25% 8.25% Total Sales Taxes Paid $\$$ $ \$$ $-$ Total Income and Sales Taxes Paid $\$$ $ \$$ $-$ Estimated Indirect Benefits and Taxes $\$$ $ \$$ $-$ Estimated Indirect Taxes Paid (ad valorum, fire, etc) $\$$ $ \$$ $-$ Fee Paid to Agency $\$$ $ \$$ $ \$$ $-$	Part 2: Community Benefits & New Taxes Produced				
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Average State Income Tax Rate *3.50%3.50%3.50%Estimated Total State Income Taxes Paid\$-\$-Average % of Income Paid as Sales Tax1.8%1.8%1.8%Sales Tax Rate8.25%8.25%8.25%Total Sales Tax Paid\$-\$-Total Sales Tax Paid\$-\$-Total Income and Sales Taxes Paid\$-\$-Estimated Indirect Benefits and Taxes\$-\$-Fee Paid to Agency\$-\$-\$-\$-\$-	Projected Total Wages of New Jobs (Schedule B)	\$	-	\$ 	\$ -
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Average % of Income Paid as Sales Tax1.8%1.8%Sales Tax Rate8.25%8.25%Total Sales Tax Paid\$-Total Income and Sales Taxes Paid\$-Estimated Indirect Benefits and TaxesEstimated Indirect Taxes Paid (ad valorum,fire,etc)\$-Fee Paid to Agency\$-\$	Average State Income Tax Rate *		3.50%	3.50%	3.50%
Sales Tax Rate8.25%8.25%8.25%Total Sales Tax Paid\$-\$-Total Income and Sales Taxes Paid\$-\$-Estimated Indirect Benefits and TaxesEstimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-	Estimated Total State Income Taxes Paid	\$	-	\$ -	\$ -
Sales Tax Rate8.25%8.25%8.25%Total Sales Tax Paid\$-\$-Total Income and Sales Taxes Paid\$-\$-Estimated Indirect Benefits and TaxesEstimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-	Average % of Income Paid as Sales Tax		1.8%	 1.8%	 1.8%
Total Sales Tax Paid\$-\$-Total Income and Sales Taxes Paid\$-\$- Estimated Indirect Benefits and Taxes Estimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-	e				8.25%
Total Income and Sales Taxes Paid\$-\$-Estimated Indirect Benefits and Taxes Estimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-		\$		\$	\$ -
Estimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-	Total Income and Sales Taxes Paid	\$	-	 -	-
Estimated Indirect Taxes Paid (ad valorum, fire, etc)\$-\$-Fee Paid to Agency\$-\$-\$-	Estimated Indirect Benefits and Taxes				
Fee Paid to Agency\$-\$-		\$	-	\$ _	\$ -
			-	_	_
	Total Indirect Benefits	\$	-	\$ _	\$ -

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Total Estimated NYS Taxes and Agency Fee	\$ -	\$ -	\$ -
Total Estimated Net Tax Savings	\$ -	\$ -	\$ -
Projected Net Community Benefits (Loss)	\$ -	\$ -	\$ -

*Average state income tax rate was supplied by the IDA

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Policy Manual - Part IV - Internal Policies - Cost Benefit Spreadsheet 2008--10-21

Part 3: Cost Benefit Analysis

Schedule A - Property Tax Abatement:

Base Year Annual Taxes	\$ -
Estimated Annual Taxes on Improvements	\$ -
Taxes Eligible for Abatement	\$ -

Year	% Tax Due	Tax Due		Tax S	Savings
Year 1		\$	-	\$	-
Year 2		\$	-	\$	-
Year 3		\$	-	\$	-
Year 4		\$	-	\$	-
Year 5		\$	-	\$	-
Year 6		\$	-	\$	-
Year 7		\$	-	\$	-
Year 8		\$	-	\$	-
Year 9		\$	-	\$	-
Year 10		\$	-	\$	-
Totals		\$	-	\$	-
Average		\$	-	\$	-

Schedule B - Calculation of Projected Total Wages for New Hires:

Year	Projected New Hires	Annu	erage al Wage <u>w</u> Jobs	Total Annual Wage of <u>New</u> Jobs		
Year 1		\$	-	\$	-	
Year 2		\$	-	\$	-	
Year 3		\$	-	\$	-	
Year 4		\$	-	\$	-	
Year 5		\$	-	\$	-	
Year 6		\$	-	\$	-	
Year 7		\$	-	\$	-	
Year 8		\$	-	\$	-	
Year 9		\$	-	\$	-	
Year 10		\$	-	\$	-	
Totals		\$	-	\$	-	
Average		\$	-	\$	-	

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