City of Utica Industrial Development Agency <u>Application</u>

The information required by this form is necessary to determine the eligibility of your project for IDA benefits. Please answer all questions; insert "NONE", or "NOT APPLICABLE", where necessary. If an estimate is given, put "EST." after the figure. Attach additional sheets if more space is needed for a response than is provided. Return three copies of this application to the City of Utica Industrial Development Agency.

All information contained in this form will be treated confidentially, to the extent permitted by law.

A project financed through this Agency involves the preparation and execution of significant legal documents. Please consult with an attorney before signing any documents in connection with the proposed project.

PART I

Applicant

Applicar	nt's legal Na	me: 231 Genes	see l	Jtica LLC		
Principa	I Address:	207 Rockawa	y TP	KE		
r molpul r laar ooor		Lawrence NY				
Project	· Address:	231 Genesee	ST			
,		Utica NY 135	01			
Telepho	ne Number	(s): 516-490-80	080			
	Federal Identification Number: <u>83-4258939</u>					
Compa	Company IRS Filing Office Location:					
10-112-00-01-011-0-00-02-01-00-01-00-00-00-00-00-00-00-00-00-00-	ny Officer co Uri Dre	ompleting this applica	tion:			
		ng Member				
ride.		1-8291		516-490-8080		office
Email:		ckawaycp.com				UNICE
				eren er forsteller in here here here here here here here her		

1. A. Is the applicant a:

- () Corporation: If YES, Public () Private () If a PUBLIC Corporation, on which exchange is it listed?
- () Sole Proprietorship
 () Partnership
 () Subchapter S
 () DISC
- (x) Other (specify) LLC

B. State of incorporation, if applicable: New York

2. Stockholders, Directors, Officers, Partners or Members

A. Provide the following information in regard to principal stockholders or parties:

Name	Home Address	
Uri Dreifus		
	(
Zev Salomon		

Provide the following information in regard to officers and directors:

Company Officer	Name and Home Address	Other Principal Business Affiliation
Uri Dreifus		
Zev Salomon		
and an and a second		<u></u>

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C. Is the applicant or any of the persons listed in 2(A) above related, directly or indirectly, to any other entity by more than 50% common ownership? If also, indicate name of such entity and the relationship.

No	
Is the applicant affiliated with any other er indicated in response to paragraph C above relationship of such other entity and the addre NO	ve? If YES, please indicate name ar
NO	
Applicant's accountant Name and Title: Murry Englard	
Name of Firm: Englard CPA PC	
Address: 33 W Hawthorne Ave S	Suite 32
Valley Stream NY 1158	
Telephone Number: 516-678-6840	Email:
Applicant's attorney	
Name and Title: B David Schreiber	n.
Name of Firm: Law Offices of B Da	
Address: 366 Pearsall Ave Suite	
Cedarhurst NY 11516	
Telephone: 516-561-8800	Email:

3.

4.

.

5.

References (Individuals and institutions in this section may be contacted)

A. Banking/Financial Institution:

Name of <u>Institution</u>	Address and Phone Number	Account Officer/ Contact Person
Signature Bank	923 Broadway, Woodmere	Craig Spatz
Metropolitan Bank	99 Park Avenue NY,NY 100	Alfred Fisher

Name of Supplier	Address and Phone Number	Account Officer/	
	Those Number	Contact Person	
Elmax Builder Supply	718-588-0220	Molish Goldberger	
Statewide Supply	718-292-6916	Michael Rand	
Ted Supply	732-200-1595	Joel Dreifus	

Name of	Address and	Account Officer/
Customer	Phone Number	Contact Person
NAICA	1075 Grand Concourse Bronx NY 10452	
Samaritan Daytop Village	138-02 Queens BLVD, Briarwood Jeffrey Gass	
Bowery Residents	212-803-5706	Brian Moriarty

6. Business Description

A. Describe nature of business and principal products and/or services:
 Uri and his partners are in the business of purchasing investment properties
 in areas where they believe there will be upside in long term ownershipa
 as well as by investing additional capital. The goal with this asset
 is to continue holding the property throughout the term of the lease
 and beyond with Bassett, or any future tenants serving the Utica area.

	В.	Describe the geographical market(s) served: Primarily Brooklyn, Queens, B	ronx and N	/lanhattan
				· · · · · · · · · · · · · · · · · · ·
7.		Present location(s) of business operations		
	A.	List present location(s):		
		1. Attached is a summary of current real estat	e investments/o	ownership.
		2. However there are no "business operations	" outside of mu	Itifamily or commercia
		3.		
	Β.	For what purpose is each of these used?		
		1		
		2		
		3.		
	C.	For each of your present locations which are <u>RE</u>	<u>NTED</u> , provide	the following information:
	D.	Name of Landlord Landlord's A	ddress	Landlord's
				Telephone Number
		1.		×
		2	an	
		3.		
		Amount of Space Annual R	lental	Lease Termination Date
		1		
		2		
		3		

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D. For each of your present locations which you <u>OWN</u>, provide the following information:

E.

1

Location	Annual Mortgage Payment	Termination Date
1. SEE ATTACHED SC	HEDU	-
2.		
3.		anna ann an ann ann an an an an ann an a
	t locations, if any, will be vacated if IDA ap	oproval for your project is
given:		
None		
		and the second
an - a canada and and and an		
миниканан каланан каланан каланан каланан калан кал Калан калан кал		
If any of these locations v	vill be sublet or sold, provide information of	concerning your ability to
do so:		
2		
		1
6		

PART II

Reasons for Project

Please explain in detail why you want to undertake this project and define scope of project: Purchasing Bassett Health asset for long term hold/investment purposes in Utica.

The goal is to continue to hold the asset for the long term whether Bassett continues to operate

or a future tenant wants the location to operate in the city of Utica.

Why are you requesting the involvement of the IDA in your project?

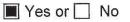
We are applying to continue the in-place agreement for the benefit of the tenant operating here for the long term.

How will the applicant's plans be affected if IDA approval is not granted?

Without the tax exemption, the purchase of the property will not make sense for us as purchaser

due to the structure of the lease/return without tax exemption.

Please confirm by checking the box, below, if there is likelihood that the Project would not be undertaken but for the Financial Assistance provided by the Agency?



If the Project could be undertaken without Financial Assistance provided by the Agency, then provide a statement in the space provided below indicating why the Project should be undertaken by the Agency: N/A

Identify the assistance being requested of the Agency (select all that apply):

1.	Exemption from Sales Tax	Yes or No
2.	Exemption from Mortgage Tax	X Yes or No
3.	Exemption from Real Property Tax	X Yes or No
4.	Tax Exempt Financing *	Yes or No
	200 BBC 10 BBC 1	

* (typically for not-for-profits & small qualified manufacturers)

A. <u>Type of Project</u>

Check category or categories best describing your project (O - Owner) and all end-users (T – Tenant(s)) and the square footage of each:

٩.

	Manufacturing		sf
	Industrial (Assembly or Service)		sf
	Research and Development	· · · · · · · · · · · · · · · · · · ·	sf
	Warehousing		sf
	Commercial		sf
	Pollution Control		sf
	Housing		sf
60%	Back Office	30,000	sf
	Facility for Aging		sf
	Multi-Tenant		sf
	Retail		sf
	Recreational		sf
40%	Other (specify)	20,000 (first two floors are used for data storage on servers)	sf
	Total	50,000	sf

B. Description of Proposed Project

Check all appropriate categories which apply to the proposed project:

1. Acquisition of land	YES()	NO()
2. Acquisition of existing building	YES(x)	NO()
3. Renovations to existing building	YES()	NO()
4. Construction of addition to existing building	YES()	NO()
5. Demolition	YES()	NO()
6. Construction of a new building	YES()	NO()
7. Acquisition of machinery and/or equipment	YES()	NO()
8. Installation of machinery and/or equipment	YES()	NO()
9. Other (specify)	YES()	NO()

C. What is the zoning classification of the proposed site?

Central Business District

D. For what purpose was the site most recently used (e.g. light manufacturing, heavy manufacturing, assembly, etc.)?

office

E.	Location(s)	Street Address	Number of Floors/ SF/floor
231 Genesee St Utica			5 - 50,000 SF

- F. Is the site in an Empire Zone? (x) Yes () No
 Is the business Empire Zone certified at this location: () Yes (x) No
 Attach a copy of the last Business Annual Report filed.
 Is the proposed project located within the boundary of a Central New York Regional Transportation (Centro) District? (x) Yes () No
- G. 1. Please describe in detail the facility to be acquired, constructed or renovated (including number of buildings and other existing structures or facilities) and attach plot plans, photos or renderings, if available.

The site was acquired from M&T Bank (who had previously used it for office space)

The new owners (and now sellers) signed Bassett to an 11 year lease, and have invested significant capital

into the building by way of new roof, new HVAC, and millions of dollars of fiber cables and electricity/servers.

Representative from Bassett indicated there were ~\$15+ Million in total investments in the facility

2. If construction or renovation work on this project has already begun, please describe the work in detail.

See above. This is still ongoing and the top three floors (office) are currently being repainted/redone

for existing and future office tenants

3. What is the estimated useful life of the:

a.

- Facility: 50+ years
- b. Equipment: 25+ Years

H. List the principal items or categories of equipment to be acquired as part of the project. The amount of equipment and investment into the property from Bassett and current owners total roughly \$15M

At this time, Bassett is continuing to add to the site by renovating and installing mostly office equipment (phones, computers, desks chairs etc)

I. If any of this equipment has already been purchased or ordered, please attach all invoices and purchase orders and list amounts paid and dates of expected delivery as well as a brief description:

All purchases were done by Bassett, outside of the new roof from the exsisting landlord.

J.

K. If the construction or operation of the proposed project will require any local ordinance or variance to be obtained or requires a permit or prior approval of any state or federal agency or body (other than normal occupancy/construction permits), please specify:
 No

L. Will the project have a significant effect on the environment, YES () NO (x). If YES, please describe the effect. Important: please attach Environmental Assessment Form to this Application

No, all interior work, no major structural changes or adverse impacts on environment.

M. Will a related real estate holding company, partnership or other entity be involved in the ownership structure of the Transaction? YES(x) NO() If YES, please explain:

current applicants are in the process of purchasing the property from existing owners.

M.	1.	With regard to the present owner of the project site, please give:
543	Name	Gold Dome II LLC (Greg Widrick and Kurt Wendler)
	Addre	ss: 8400 Glen Eagle Drive PO Box 207
		Manlius NY 13104
	Telep	hone Number: 315-569-0488
	2.	If the applicant already owns the project site, indicate:
		a. date of purchase: Does not - but projected 05/21/19
		b. purchase price: \$5,000,000
	3.	If the project site is mortgaged, please indicate: a. balance of mortgage: 2,000,000

- b. holder of mortgage: M&T Bank
- N. Is there a relationship, legally, by virtue of common control, or through related persons, directly or indirectly, between the applicant and the present owner of the project site?
 YES () NO (x) If YES, please explain:

O. Is the company currently a tenant in the building to be occupied?

YES () NO(x)

P. Are you planning to use/develop the entire proposed facility?

YES(x) NO()

If NO, give the following information with respect to present tenants:

1. <u>Pre</u> a.	<u>esent Tenant Information</u> Name of <u>Business</u>	Floors Occupied	Square Feet <u>Occupied</u>	Nature of Tenant's <u>Business</u>	
Bass	ett Health	5	50,000	Healthcare Services	
			anninga ann a ann an 1994 ann an 1996 ann an 1996 ann an 1996 ann an 1997 ann an 1997 ann an 1997 ann an 1997 a		
				14	
b.	Which of the above tenants will be vacating upon your initial use of the facility? How many jobs will be affected?				
	Name of Firm	<u>Jobs</u>	<u>Square Footage No</u>	w Occupied	
None	9				
С.	For those tenants who following transaction:	will remain afte	r your initial occupa	ncy of the site, provide the	
	Name of	Term of	Renewal	Square Footage	
	Tenant	Lease	<u>Options</u>	Now Occupied	
Bassett Health		6+ years rem	5, five year options	50,000	
	Are any of the above ter	nants related to	the owner of the facil	ity? YES()NO(x)	

d. If the applicant will be occupying the premises of any of the tenants listed in (c) when their lease expires, please list.

N/A

e. Please provide copies of all present lease(s) at the proposed project site.

Do you propose to lease part of the project facility to firms not presently tenants?
YES () NO ($_X$) If YES, provide details of your proposals:
Will financing by the Agency for the Project result in the removal or abandonment of a plan
or other facility of the applicant or any related entity presently located in another area in the
State of New York? YES() NO(_X)
If the answer is YES, please explain briefly the reasons for the move.
2
Is the proposed project reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the State of New York? YES () NO ($_X$)
Is the proposed project reasonably necessary to preserve the competitive position of the project occupant in its respective industry? YES ($~$) NO ($_X$)
If any of the parties who will be tenants in this project are related to or affiliated with the applicant, please identify them: N/A

1. Please attach any written agreements (e.g., options, purchase contracts, invoices, etc.) concerning the acquisition of the real property or equipment for this proposed facility.

2. Employment *

a. List your present employment in the City of Utica, if any, and an estimate of the employment at the proposed facility at the end of two years. NOTE: New York State considers Full Time employment as 35 hours or more. Full-time jobs, plus the combination of two or more part-time jobs that, when combined together, constitute the equivalent hours of a full-time position (35 or more hours).

Employment	Current # of applicant's jobs at/or to be located at proposed project location	Number of FTE jobs to be RETAINED	Number of FTE jobs to be CREATED two years after project completion	Estimate number of residents in Labor Market Area that will fill projected jobs two years after project completion
Full-Time (FTE)	see sticky note			

The Labor Market Area consists of the following counties: Oneida, Lewis, Herkimer, Otsego, Madison and Oswego

b. Characterize the labor force to be associated with this project location according to the following categories:

Category	Current/ Anticipated	Avg Salary or Salary Range	Avg Fringe Benefits or Range
Officers	More detailed reports	would have to	come from tenant
Sales/Supervisory			
Clerical			
Plant/Production			
Other (specify)			

Notes:

c. Estimate the Annual Payroll for the employees associated with the project location.

Currently	End of Year One	End of Year Two
\$ Continuing ongoing program	\$	\$

* Company/Applicant will be required to submit Annual Project Monitoring Reports (attached) along with a copy of the NYS 45 (four quarters) for a minimum of five (5) years for any commercial project and ten (10) years for any industrial/manufacturing project, or for the length of UIDA involvement in the project. Annual Project Monitoring Reports will be compared to employment counts as stated above and companies whose reported counts fall below those levels above will be subject to the Agency's Recapture Provisions Policy.

Sources of Funds for Project Costs:		% of Total project costs		
Bank Financing:	_{\$} 3,500,000	70%		
Equity (excluding equity attributed to grants/tax credits)	\$ <u>3,500,000</u> \$ <u>1,500,000</u>	30%		
Tax Exempt Bond Issuance (if applicable)	\$			
Taxable Bond Issuance (if applicable)	\$			
Public Sources (Include sum total of all state and federal grants and tax credits)	\$			
Identify each state and federal grant/credit:				
<u>N/A</u> \$	<u></u>			
\$				
\$				
\$				
Total Sources of Funds for Project Costs:	\$ <u>5,000,000</u>	100%		
Have any of the above costs been paid or incurred as of	the date of this Applica	tion?		
Yes No. If Yes, describe particulars: Due Dilig	ence of the purchas	e including		
environmental studies, surveys, bank due diligence and attorney/lender fees				
Mortgage Recording Tax Exemption Benefit: Amount of mortgage recording tax:	of mortgage that would	be subject to		
Mortgage Amount (include sum total of construction/perma	anent/bridge financing):	\$3,500,000		
Estimated Mortgage Recording Tax Exemption Benefit (product of mortgage \$				
Amount as indicated above multiplied by 0.75%):		670 9		

Please Note: The New York State General Municipal Law was recently amended to reflect that industrial development agencies are not exempt from the additional mortgage recording tax of .25% that is assessed to properties that are located within a regional transportation district. Oneida County is located within the Central New York Regional Transportation District; as such, all UIDA projects will be exempt from .75% of mortgage recording tax, but must pay .25% of mortgage recording tax, which will be directed to the Transportation District.

3. Estimated Project Cost

Listed the costs necessary for the construction, acquisition or renovation of the project (this should <u>NOT</u> include working capital needs, moving expenses, work in progress, stock in trade, applicant's debt repayment, real estate broker fees or your legal fees):

Acquisition of Land	\$1,500,000 \$3,500,000
Acquisition of Building(s)	<u>\$</u> 3,500,000
Renovation Costs	\$
New Construction of Buildings	\$
Machinery and Equipment (other than furniture costs)	\$
Furniture and Fixtures	\$
Installation Costs	\$
Architectural/Engineering Fees	\$
Fees (other than your own counsel and brokerage fees)	\$
Interest on Interim Financings	\$
Other (specify)	\$
······	
Total Project Cost	\$ <u>5,000,000</u>

Sales and Use Tax: Gross amount of costs for goods and services that are subject to State and local Sales and Use tax - said amount to benefit from the Agency's Sales and Use Tax exemption benefit: N/Δ

\$<u>N/A</u>

Estimated State and local Sales and Use Tax Benefit (product of 8.75% multiplied by the figure, above): **N/A**

4. Real Estate Taxes

List separately the proposed project's Real Estate Taxes and/or Assessed Value as it applies to land and building:

Project's	Real Estate Taxes	Assessed Value	
Land(s)	* can not find breakout on Costar	_{\$} 94,500	
Building(s)	\$* can not find breakout on Costar	_{\$} 905,500	
Total	\$38,811	\$1,000,000	

Calculate the value of the PILOT exemption anticipated for the project described:

\$ 38,811 (already ongoing and current)

5. Project Schedule

Indicate the estimated dates for the following:

- a. Construction commencement: 01/2015
- b. Construction completion: 01/2020
- c. Project financing: List the dates and in what amounts the estimated funds will be required:

Improvements were/are Self Funded by Bassett (tenant)

d. Indicate the name of the incorporated municipality in which the facility will be located and the applicant's (or any related entity's) estimated capital expenditures in such municipality during the past three years:

City of Utica

e. What do you expect the applicant's (or any related entities) capital expenditures to be in the above municipality during the next three years (including this project):

None - Tenant funded. Tenant will continue to improve the premises and add to current job total by finishing the office space now that the server rooms are done

f. If the applicant or any related entity has previously secured the benefit of tax exempt financing in the City of Utica, whether through IDA, the New York Job Development Authority or any other entity, please explain (indicate date, location of financed facility, and outstanding balance):

No Has the applicant or any related entity received the benefit of tax exempt financing g. anywhere within the United States within the past 90 days or is the applicant or any related entity contemplating the receipt of such financing assistance within the next 90 days? YES () NO () if YES, please explain. No

6. Project Financing Efforts

IT IS THE APPLICANT'S RESPONSIBILITY TO SECURE A PURCHASER FOR IDA BONDS ISSUED IN CONJUNCTION WITH THIS PROJECT. Below are a series of questions relating to your efforts to secure financing for your project if IDA approval is granted.

A. Has the applicant contacted any bank, financial/lending institution or private investor in regard to the financing for this project? YES(x) NO() If YES, please give details:

TD Bank will be financing part of the acquisition of the Bassett Property

Lender term sheet attached

B. Have you obtained a financial commitment for this project? YES (x) NO ()

1. If YES, please briefly describe this commitment and attach related corresponde TD Bank	nce:
2. If NO, please explain how you will be able to finance this project:	
Are there any other governmental agencies that you have contacted concerning finance assistance in regard to your proposed project? YES() NO(_X) If YES, please ex	
	-
	-
1. Will the applicant's obligations be guaranteed, and if so, by whom? TD Bank is the ultimate guarantor	
2. Is the guarantor related to or affiliated with the applicant?	
N/A	

C.

D.

- E. Financial Information (Attach the Following).
 - 1. Financial Statements for the last three fiscal years.
 - 2. Pro forma Balance Sheet as at start of operations at project site.
 - 3. Projected Profit and Loss Statements for first two years of operation at project site.
 - 4. Projected "Cash Flow" Statement, by quarters, for first year of operation at project site.

REPRESENTATIONS AND CERTIFICATION BY APPLICANT

The undersigned requests that this Application be submitted for review to the City of Utica Industrial Development Agency (the "Agency") and its Board of Directors.

Approval of the Application can be granted solely by this Agency's Board of Directors. The undersigned acknowledges that Applicant shall be responsible for all costs incurred by the Agency and its counsel in connection with the attendant negotiations whether or not the transaction is carried to a successful conclusion.

The Applicant further understands and agrees with the Agency as follows:

- Annual Sales Tax Filings. 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 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.
- 2. Annual Employment Reports. 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, with the Agency, on an annual basis, reports regarding the number of people employed at the project site as well as tax benefits received with the action of the Agency. Failure to provide such reports as provided in the transaction documents will be an Event of Default under the Lease (or Leaseback) Agreement between the Agency and Applicant. In addition, a Notice of Failure to provide the Agency with an Employment Report may be reported to Agency board members, said report being an agenda item subject to the Open Meetings Law.
- 3. Absence of Conflict of Interest. The Applicant has consulted the Agency website of the list of the Agency 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 herein after described (if none, state "none"):
- 4. Hold Harmless. Applicant hereby releases the Agency and its members, officers, servants, agents and employees 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 (A) 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 tax

exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project; 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 reach final agreement with respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in the processing of the Application, including attorneys' fees, if any.

- 5. The Applicant acknowledges that the Agency has disclosed that the actions and activities of the Agency are subject to the Public Authorities Accountability Act signed into law January 13, 2006 as Chapter 766 of the 2005 Laws of the State of New York.
- The Applicant acknowledges that the Agency is subject to New York State's Freedom of Information Law (FOIL). <u>Applicant understands that all Project information and records related to this</u> <u>application are potentially subject to disclosure under FOIL subject to limited statutory</u> <u>exclusions</u>.
- 7. The Applicant acknowledges that it has been provided with a copy of the Agency's recapture policy (the "Recapture Policy"). The Applicant covenants and agrees that it fully understands that the Recapture Policy is applicable to the Project that is the subject of this Application, and that the Agency will implement the Recapture Policy if and when it is so required to do so. The Applicant further covenants and agrees that its Project is potentially subject to termination of Agency financial assistance and/or recapture of Agency financial assistance so provided and/or previously granted.
- 8. The Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if Financial Assistance is provided for the proposed Project:

§ 862. Restrictions on funds of the agency. (1) No funds of the agency shall be used in respect of any project if the completion thereof would result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the project occupant located within the state, provided, however, that neither restriction shall apply if the agency shall determine on the basis of the application before it that the project is reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the state or is reasonably necessary to preserve the competitive position of the project occupant in its respective industry.

- 9. The Applicant confirms and acknowledges that the owner, occupant, or operator receiving Financial Assistance for the proposed Project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations.
- 10. The Applicant confirms and acknowledges 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 exemption claimed by reason of the Agency's involvement the Project.

- 11. The Applicant confirms and hereby acknowledges that as of the date of this Application, the Applicant is in substantial compliance with all provisions of Article 18-A of the New York General Municipal Law, including, but not limited to, the provision of Section 859-a and Section 862(1) of the New York General Municipal Law.
- 12. The Applicant and the individual executing this Application on behalf of the Applicant acknowledge that the Agency will rely on the representations made herein when acting on this Application and hereby represent that the statements made herein do not contain any untrue statement of a material fact and do not omit to state a material fact necessary to make the statements contained herein not misleading.

STATE OF NEW YORK) COUNTY OF ONEIDA) ss.:

<u>UN DICIUS</u>, being first duly sworn, deposes and says:

- 1. That I am the <u>Minulaina Member</u> (Corporate Office) of <u>231 Genesce</u> (Applicant) and that I am duly authorized on behalf of the Applicant to bind the Applicant.
- 2. That I have read the attached Application, I know the contents thereof, and that to the best of my knowledge and belief, this Application and the contents of this Application are true, accurate and complete.

(Signature of Officer)

Subscribed and affirmed to me under penalties of perform

this day of Nou , 2019. NO TARY OUALIFIED IN OUALIFIED IN NASSAU COUNTY COMM. EXP. 04-14-2022 Notary Publich

If the application has been completed by or in part by other than the person signing this application for the applicant please indicate who and in what capacity:

Ву:_____

Name:

Title:

Date:_____

Return the original application and six copies with a check in the amount of \$250.00 made payable to: Utica Industrial Development Agency, 1 Kennedy Plaza, Utica, New York, Attn.: Jack N. Spaeth, Executive Director.