



INDUSTRIAL DEVELOPMENT AGENCY
Crossroads Commerce & Conference Center
6087 State Route 19N – Suite 100
Belmont, NY 14813-1039

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APPLICATION FOR FINANCIAL ASSISTANCE

Allegany County Industrial Development Agency

Crossroads Commerce & Conference Center

6087 State Route 19N – Suite 100

Belmont, New York 14813

(585) 268-7472 tel

(800) 893-9484 tel

(585) 268-7473 fax

clarkcr@alleganyco.com

Craig R. Clark, P.E., Ph.D.

IDA Executive Director

*A non-refundable application fee of \$500.00 must be submitted
at the time of application.*

Please submit the original application and two (2) copies.

(For office use only)

Name of Applicant

Number

Note to Applicant:

The information requested by this form is necessary to determine the eligibility of your project for Agency benefits. Please answer **all** questions, inserting “none” or “not applicable” where appropriate. If you are providing an estimate, please indicate by inserting “est” after the figure. Attach additional sheets if more space is needed for a response than is provided.

Return the original application and two copies with a check in the amount of \$500.00 made payable to: **Allegany County Industrial Development Agency**, Crossroads Commerce & Conference Center, 6087 State Route 19N, Belmont, New York 14813-1039, Attn.: Jack W. Wood, IDA Chairman.

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

By signing and submitting this Application, the Applicant acknowledges that it received a copy of the Uniform Tax Exemption Policy adopted by the Agency and Agency Memorandums pertaining to the benefits of projects financed through the Agency.

A project financed through the 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 Information

Note: In responding to the following questions, please keep in mind that the Applicant will be party to all of the documents and is the individual or entity, which will receive the actual financial assistance from the Agency.

Applicant

1(a) Applicant's Legal Name:

1(b) Principal Address:

1(c) Telephone/Facsimile Numbers:

1(d) Federal Identification Number:

1(e) Contact Person:

- 1(f) Is the Applicant a
- Corporation: If yes, Public Private
If public, on which exchange is it listed? _____
 - Subchapter S
 - Sole Proprietorship
 - General Partnership Limited Partnership
 - Limited Liability Corporation/Partnership
 - DISC
 - Other (specify)

1(g) State of Organization (if applicable)

Applicant's Stockholders, Directors and Officers (or Partners)

2(a) Provide the following information with respect to parties with 15% or more in equity holdings:

Name	Home Address	Social Security No.	Percentage of Ownership
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2(b) Is the Applicant, or any of the individuals listed in 2(a) above, related directly or indirectly to any other entity by more than 50% common ownership? If so, indicate name of such entity and the relationship.

2(c) Is the Applicant affiliated with any other entity, directly or indirectly, other than as listed in the response to 2(c) above? If yes, please indicate name and relationship of such other entity and the address thereof:

Applicant's Counsel and Accountant

3(a). Applicant's Attorney

Name/Title:

Firm:

Address:

Telephone/Fax:

3(b) Applicant's Accountant

Name/Title:

Firm:

Address:

Telephone/Fax:

Business Description

4(a) Describe the nature of your business and principal products and/or services.

Part II: Project Information

Reasons for Project

5(a) Please explain in detail why you want to undertake this project.

5(b) Why are you requesting the involvement of the Agency in your project?

5(c) How will the Applicant's plans be affected if Agency approval is not granted?

5(d) Is the proposed project reasonably necessary to discourage the Applicant from removing such other plant or facility to a location outside the State of New York? Yes No

Is the proposed project reasonably necessary to preserve the competitive position of the Applicant in its respective industry? Yes No

5(e) Will financing by the Agency result in the removal or abandonment of a plant or other facility of the applicant or any related entity presently located in another area of New York State? Yes No If yes, please explain briefly the reason for the move.

5(f) Has the Applicant or any related entity previously secured financial assistance in Allegany County (whether through the Agency, the Empire State Development Corporation, or any other entity)? Yes No
If yes, please explain (indicate date of benefit, location of facility and outstanding balance).

5(g) Has the Applicant or any related entity secured financial assistance anywhere within the United States within the last 90 days or does the Applicant or any related entity anticipate receiving financial assistance within the next 90 days? Yes No
If yes, please explain.

5(f) Check all categories best describing the **type of project**:

- Manufacturing
- Industrial Assembly or Service
- Research and Development
- Warehousing
- Commercial or Recreational
- Pollution Control (specify)
- Other (specify)

5(g) Check all categories best describing the **scope of the project**:

- Acquisition of land
- Acquisition of existing building
- Renovations to existing building
- Construction of addition to existing building
- Demolition of existing building
- Construction of a new building
- Acquisition of machinery and/or equipment
- Installation of machinery and/or equipment
- Other (specify)

5(h) Please indicate the financial assistance you are requesting of the Agency, and provide the estimated value of said assistance.

Assistance	Estimated Value
<input type="checkbox"/> Real Property Tax Abatement	\$
<input type="checkbox"/> Mortgage Tax Exemption	\$
<input type="checkbox"/> Sales and Use Tax Exemption	\$
<input type="checkbox"/> Issuance by the Agency of Tax Exempt Bonds	\$

Part III: Facility Information

Facility (Physical Information)

- 6(a) Street Address of Facility:
- 6(b) City, Town and/or Village:
*(Note: It is important that you list **all** incorporated municipalities in which the facility lies. This information will be used in scheduling a public hearing as required by statute.)*
- 6(c) School District:
- 6(d) Tax Account Number(s):
- 6(e) For what purpose was the facility site most recently used (i.e., light manufacturing, heavy manufacturing, assembly, etc.)?
- 6(f) Zoning Classification:
- 6(g) Please describe in detail the facility to be acquired, constructed or renovated (including number of buildings, square footage, number of floors,) and attach plot plans, photos or renderings, if available. ***Please be as specific as possible.***

6(h) Has construction or renovation commenced? Yes No

If yes, please describe the work in detail, including the date of commencement.

If no, indicate the estimated dates of commencement and completion:

Construction commencement:

Construction completion:

6(i) Will the construction or operation of the facility require any local ordinance or variance to be obtained or require a permit or prior approval of any state or federal agency or body (other than normal occupancy and/or construction permits)? Yes No

If yes, please describe.

6(j) Will the project have a significant effect on the environment? Yes No

Important: please attach Environmental Assessment Form to this Application.

6(k) What is the useful life of the facility? _____ years

Facility (Legal Information)

- 7(a) With respect to the **present owner** of the facility, please give the following information:
(*Note: the present owner is not necessarily the user of the facility, but that party which holds legal title to the facility.*)

Legal Name:

Address:

Telephone:

Balance of Mortgage:

Holder of Mortgage:

If the Applicant is not the present owner of the facility, please attach any written agreements and contracts concerning the acquisition of the real property and/or equipment.

- 7(b) Is there a legal relationship, directly or indirectly, by virtue of common control or through related persons, between the Applicant and the present owner of the facility?
 Yes No. If yes, please explain.
- 7(c) Will a related real estate holding company, partnership or other entity, be involved in the ownership structure of the transaction? Yes No. If yes, please explain.
- 7(d) Will the title owner of the facility also be the user of the facility? Yes No. If no, please explain.
- 7(e) Is the Applicant currently a tenant in the facility? Yes No

7(f) Are you planning to use the entire proposed facility? Yes No
If no, please give the following information with respect to tenant(s) which will remain in the facility after the completion of the project:

Name of Tenant	Floors Occupied	Square Feet Occupied	Nature of Business
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7(g) Are any of the tenants related to the owner of the facility? Yes No
If yes, please explain.

Equipment

8(a) List the principal items or categories of equipment to be acquired as part of the project. (As soon as one is available, please submit a detailed inventory of said equipment.)

8(b) Please provide a brief description of any equipment which has already been purchased or ordered, attach all invoices and purchase orders, list amounts paid and dates of expected delivery.

8(c) What is the useful life of the equipment? _____ years

Part IV: Employment Information

9(a) Estimate how many construction and permanent jobs will be created or retained as a result of this project.

Construction _____

Permanent _____

Retained _____

Part V: Estimated Project Cost and Financing

- 10(a) List the costs necessary for the construction, acquisition or renovation of the facility. Do **not** 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

Acquisition of Building(s)

Renovation Costs

New Construction of Buildings

Machinery and Equipment
(other than furniture costs)

Fixtures

Installation Costs

Fees (other than your own
broker and legal fees)

Architectural/Engineering

Interest on Interim Financing

Other (specify)

Subtotal

Agency Fee

Total Project Cost

- 10(b) What amount of the Total Project Cost is the Applicant requesting financing by the Agency?

Real Estate Taxes

11(a) For each tax parcel which comprises the facility, please provide the following information, using figures from the most recent tax year:

Tax Acct #	Assessed Value (Land)	Assessed Value (Building)	Real Estate Taxes
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11(b) Address of Receiver of
Town and/or Village Taxes:

11(c) Address of Receiver of
School Taxes:

11(d) Will the completion of the proposed project result in the increase of the assessment of any of the parcels named above? Yes No

If yes, please indicate which tax account numbers will be affected.

Financial Information

12(a) Has the Applicant contacted any bank, financial/lending institution or private investor with respect to the financing of the proposed project? Yes No

If yes, please provide details.

12(b) Has the Applicant received a commitment letter for said financing? Yes No

If yes, please submit a copy of said commitment letter along with this Application.

12(c) Please complete the Cost/Benefit Analysis form and attach to this Application.

REPRESENTATIONS AND CERTIFICATION BY APPLICANT

The undersigned requests that this Application be submitted for review to the Allegany County Industrial Development Agency's 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:

1. **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.
3. **Absence of Conflict of Interest.** 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 herein after described:
4. **Hold Harmless.** Applicant hereby releases Allegany County Industrial Development Agency and the members, officers, servants, agents and employees thereof (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 (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.

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.

(Print Applicant's Name)

By: _____

State of _____ Print Name:

County of _____ Print Title:

Sworn to before me this

____ day of _____, 20____.

Date: _____

Notary Public

*Return the original and two (2) copies of the application with a check in the amount of \$500.00 made payable to: **Allegany County Industrial Development Agency**, Crossroads Commerce & Conference Center, 6087 State Route 19N, Belmont, New York 14813-1039, Attn.: Craig R. Clark, IDA Executive Director.*