

**Livingston County**  
**Capital Resource Corporation**

**Civic Facilities Bond Assistance Application**



**(September, 2010)**

**Livingston County**  
**Capital Resource Corporation**

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**Livingston County**  
**Capital Resource Corporation**

**Introduction**

The applicant is responsible for the submission of a complete financial assistance package, which includes:

1. Three (3) Applications (one executed original and 2 copies) and all supporting documents
2. Completed Full Environmental Assessment Form (page 12)  
*One copy each to LCIDA and Transaction Counsel*
3. Application Fee (*see below*)
4. Counsel Retainer Fee (*see below*)

**Please note**

*The Livingston County Capital Resource Corporation (LCCRC), in its discretion, may require an environmental audit with respect to the proposed site of this project. If such an audit is prepared for others, including the Company or a lender, such audit shall be provided to the LCCRC.*

**ANY APPLICATION WHICH IS INCOMPLETE OR CONTAINS INSUFFICIENT  
INFORMATION AND SUPPORTING DOCUMENTATION WILL  
BE RETURNED TO THE APPLICANT**

**APPLICATION FEE:**

Application fee: (non-refundable) \$500.00  
(payable to the LCCRC with Assistance Application)

**LEGAL FEE:**

Counsel Retainer Fee: (non refundable deposit towards counsel fees) \$1500.00  
(payable to the LCCRC with Assistance Application)

**LIVINGSTON COUNTY CAPITAL RESOURCE CORPORATION**  
**APPLICATION FOR FINANCIAL ASSISTANCE**

**Applicant Information**

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone number \_\_\_\_\_  
Fax number \_\_\_\_\_  
Email \_\_\_\_\_  
Federal ID number \_\_\_\_\_  
Contact Person \_\_\_\_\_

**Corporate Structure**

- Corporation
- Partnership:    general     limited 
  - Number of general partners \_\_\_\_\_ and, if applicable.
  - Number of limited partners \_\_\_\_\_
- Limited Liability Company/Partnership
  - Number of members/partners \_\_\_\_\_
- Sole Proprietorship

Date of establishment/incorporation \_\_\_\_\_

Place of organization \_\_\_\_\_

Is the applicant authorized to do business in the State of New York? \_\_\_\_\_

Names and titles of principal officers and owners:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Applicant's Counsel**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

## Project Information

### PROJECT TYPE

- New building and/or equipment
- Refinancing
- Transfer
- Additional facility
- Amendment
- Second mortgage
- Other \_\_\_\_\_

Describe the proposed acquisition, construction or reconstruction, purchase of equipment and other project items. Explain the reason for the project and the benefits for the applicant. Explain how the project will be used. (Attach an additional page if necessary.)

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Project Address: \_\_\_\_\_

Municipalities and school district: \_\_\_\_\_

Tax map number: \_\_\_\_\_

Present record owner of the site: \_\_\_\_\_

Proposed record owner of the site: \_\_\_\_\_

Site zoning: Current \_\_\_\_\_ Proposed \_\_\_\_\_

Necessary variances: \_\_\_\_\_

Principal use of project upon completion: \_\_\_\_\_

Upon completion, do you expect this project to be a phase of further capital expansions within the next 3 years? If so, explain phases and initiation dates:

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Size of building/addition: \_\_\_\_\_

Type of building: \_\_\_\_\_

If project site is not presently owned, is it under purchase contract/option? \_\_\_\_\_

Explain: \_\_\_\_\_

**Will the project owner be different than the applicant? If yes, please provide on a separate sheet the identity, address and contact information of the owner and its**

**counsel. If a lease has been or will be executed between the owner and the applicant, please submit it with this application, if available.**

Please explain, including relationship of between the owner and the applicant:

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Will the project result in the removal of a plant or facility of the applicant's or another proposed occupant of the project from one area of New York State to another area of the state? \_\_\_\_\_

Will the project result in the abandonment of one or more plants or facilities of the applicant or other occupant of the project located in New York State? \_\_\_\_\_

If the answer to either of the preceding two questions was "yes", please answer the following two questions:

1. Has the applicant or another proposed occupant of the project considered removing such other plant or facility to a location outside New York State?

If yes, please explain in detail: \_\_\_\_\_

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2. Is the project reasonably necessary to preserve the competitive position of the applicant or another proposed occupant of the project in its respective industry? \_\_\_\_\_

If yes, please explain in detail: \_\_\_\_\_

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**Current retained full time equivalent employment at this project location**

1. At this project location ? \_\_\_\_\_

2. At any other location within Livingston County? \_\_\_\_\_

3. Estimated average annual salary of jobs to be retained \$ \_\_\_\_\_

**Job Creation**

Estimate the number of jobs to be created upon completion of this project, over the next three years.

	Jobs	Annual Payroll
At project completion:		
1. year after project completion	_____	_____
2. year after project completion	_____	_____
3. year after project completion	_____	_____

At project completion:

1. Annualized salary range of jobs to be created \$ \_\_\_\_\_ to \_\_\_\_\_

2. Estimated average annual salary of jobs to be retained (at current market rates)  
\$ \_\_\_\_\_

Expected mortgage, if any, necessary to finance this project: \$ \_\_\_\_\_

**Project Costs**

**Land** \$ \_\_\_\_\_  
**Building:**  
Renovation \$ \_\_\_\_\_  
Acquisition \$ \_\_\_\_\_  
Expansion \$ \_\_\_\_\_  
New Building \$ \_\_\_\_\_

**Equipment:**

Manufacturing \$ \_\_\_\_\_  
Non-mfg. Equip. \$ \_\_\_\_\_

(that is equipment subject to sales tax)

Describe Equipment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other non-reoccurring costs subject to sales tax

\_\_\_\_\_  
\_\_\_\_\_

**Soft costs:**

Engineering \$ \_\_\_\_\_  
Architect \$ \_\_\_\_\_  
Fees/permits \$ \_\_\_\_\_  
LCIDA fee \$ \_\_\_\_\_ (1.25% of costs benefiting

from CRC assistance)

Legal fees (including transaction counsel, Corporation  
counsel, applicant counsel, bank counsel, etc.  
\$ \_\_\_\_\_

**Other costs:** \$ \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_

## REPRESENTATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

**A) Job Listings.** 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, then except as otherwise provided by collective bargaining agreement, new employment opportunities created as a result of the Project will be listed with the New York State Department of Labor Community Services Division (the "DOL") and the administrative entity (collectively with the DOL, the "JTPA Entities") of the service delivery area created by the federal Job Training Partnership Act (Public Law 97-300) in which the project is located.

**B) First Consideration for Employment.** In accordance with Section 858-b(2) of the New York State General Municipal Law, the Applicant understands and agrees that, if the Project receives any financial assistance from the Agency, then except as otherwise provided by collective bargaining agreements, where practicable, the Applicant will first consider persons eligible to participate in WIB programs who shall be referred by the WIB entities for new employment opportunities created as a result of the Project.

**C) Annual Sales Tax Filings.** In accordance with Section 874(8) of the New York State 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, the Applicant will 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 the sales tax exemptions claimed by the Applicant and all consultants or sub contractors retained by the state. This information must be filed with the Agency annually before March 1<sup>st</sup>.

**D) New York State Department of Taxation and Finance Form ST-60.** In accordance with Section 874(9) of the New York General Municipal Law, the Applicant understands that the Applicant and each agent, subagent, contractor and/or sub contractor appointed by the Applicant and claiming a sales tax exemption in connection with the Project must complete a New York State Department of Taxation and Finance Form ST-60. Original copies of each completed Form St-60 must be delivered to the Agency within five (5) days of the appointment of the Applicant or any such agent, subagent, contractor and/or subcontractor as agent of the Agency for purposes of completing the Project. Failure to comply with these requirements may result in loss of sales tax exemptions for the Project.

**E) Annual Employment Reports.** The Applicant understands and agrees that, if the Project receives any financial assistance from the Agency, the Applicant will file, or cause to be filed, with the Agency, on an annual basis, reports regarding the number of people employed at the Project site. This information will be reported to the Agency using Form NYS-45-MN

**F) Absence of Conflicts of Interest.** The Applicant has received from the Agency a list of the members, officers and employees of the Agency. No members, officers or employee of the Agency has an interest, whether direct or indirect, in any transaction completed by the Applicant, except as hereinafter described:

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**G) State Environmental Quality Review Act Compliance.** The Agency, in granting financial assistance to the Applicant, is required to comply with the New York State Environmental Quality Review Act ("SEQR") and must complete necessary determinations



required thereunder. Consequently, the Applicant has completed and attached hereto appropriate Environmental Assessment Forms, with respect to the Project, if appropriate at this time. In any event, the Applicant understands that, at its sole expense, it is required to take all necessary action in order for the Agency to comply with the requirements of SEQR, and including through a lead agency other than the Agency in the case of a coordinated review.

**The Applicant and, if applicable, the individual executing this Application on behalf of the Applicant, acknowledges 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 material fact and do not omit to state a material fact necessary to make the statements contained herein not misleading.**

\_\_\_\_\_  
(Applicant)

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

This application should be submitted with an application fee of \$500.00, payable to the Livingston County Capital Resource Corporation, c/o 6 Court Street, Geneseo, New York 14454, and a retainer of \$1,500.00, payable to Livingston County Capital Resource Corporation which will be forwarded to legal counsel.

**Certification**

\_\_\_\_\_ (name of representative of entity submitting application, or name of individual submitting application) deposes and says that she/he (choose and complete one of the following two options) (i) is a/the \_\_\_\_\_ (title) of \_\_\_\_\_ (company name), the entity named in the attached application, or (ii) is the individual named in the attached application; that she/he has read the foregoing application and knows the contents thereof; and that the same is true to his/her knowledge.

Deponent further says that s/he is duly authorized to make this certification on behalf of her/himself or on behalf of the entity named in the attached application. The grounds of deponent's belief relative to all matters in said application which are not stated upon his/her own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as, if deponent is not an individual applicant, information acquired by deponent in the course of his/her duties in connection with said entity and from the books and papers of said entity.

As (i) the representative of said entity, or (ii) the individual applicant (such entity or individual applicant hereinafter referred to as the "Applicant"), deponent acknowledges and agrees that the Applicant shall be and is responsible for all costs incurred by the Livingston County Capital Resource Corporation (hereinafter referred to as the "Corporation") acting on behalf of the Applicant in connection with this application and all matters relating to the provision of financial assistance to which this application relates. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails to act within a reasonable or specified period of time to take reasonable, proper or requested action or withdraws, abandons, cancels or neglects the application, then upon presentation of an invoice, the Applicant shall pay to the Corporation, its agents or assigns, all actual costs incurred with respect to the application up to that date and time, including fees to transaction counsel for the Corporation and fees of general counsel for the Corporation. Upon the successful conclusion of the transaction contemplated herein, the Applicant shall pay to the Agency an administrative fee set by the Corporation in accordance with its fee schedule in affect of the date of the foregoing application, which amount is payable at closing.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. \_\_\_\_\_

(seal)



**Livingston County**  
**Capital Resource Corporation**  
**Environmental Assessment Form**

This form is immediately available as either a printable version via the internet or filled out entirely online via the internet.

**PRINTABLE VERSION**

To download a PDF (Portable Document Format) to your computer go to:

**New York State Website: (<http://www.dec.state.ny.us>)**

- Be certain to select the **Full Environmental Assessment Form** and download to your computer.

**ONLINE VERSION**

To fill out this form online:

- Go to the New York State website (<http://www.dec.state.ny.us>)
- Be certain to select the **Full Environmental Assessment Form** and download to your computer
- Read and follow the instructions on how to fill out this form online
- **NOTE:** This form contains many questions. Even though many are comprised of simple check boxes, be advised that this form may take an hour or more to complete online.

Please complete and sign the State form and submit it, along with your finished application to the Livingston County CRC office.