

Alden NY Shop

Instructions and Insurance Requirements Document

Section I: Applicant Background Information

Please answer all questions. Use "None" or "Not Applicable" where necessary. Information in this application may be subject to public review under New York State Law.

Applicant Information - Company Receiving Benefit

Project Na	me	Alden NY Shop		
Project Sur	nmary	Build new 23000 square foot building on in Alden NY . 21,000 square feet of shop and 2000 square feet of office space.		
Applicant N	Name	Highway rehab corp		
Applicant A	Address	100 stradtman st		
Applicant A	Address 2			
Applicant C	City	Cheektowaga		
Applicant S	State	New York		
Applicant Z	Zip	14206		
Phone		(845) 721-4094		
Fax				
E-mail		tom@highwayrehab.com		
		www.highwayrehab.com		
		237310		
Business	<u>Organization</u>			
Type of Bu	usiness	Corporation		
Year Estab	blished	1981		
State in which Organization is established		New York		
Individual	Completing Application			
Name	Thomas Colella			
Title	President			
Address	100 Stradtmen st			
Address 2				
City	Cheektowaga			
State	New York			
Zip	14206			
Phone	(845) 721-4094			
-				

Fax (716) 462-5387

E-Mail tom@highwayrehab.com

Company Contact - Authorized Signer for Applicant

Contact is same as individual completing application	Yes
Name	
Title	
Address	
Address 2	
City	
State	
Zip	
Phone	
Fax	
E-Mail	

Company Counsel

Name of Attorney	Benjamin Burge	
Firm Name	Rupp,Baase, Pfalzgrafa, cunningham LLC	
Address	1600 Liberty Building	
Address 2	424 Main st	
City	Buffalo	
State	New York	
Zip	14202	
Phone	(716) 854-3400	
Fax		
E-Mail		
Benefits Requested (select all that apply)		
Exemption from Sales Tax Yes		Yes
Exemption from Mortgage Tax Yes		Yes

Exemption from Mortgage Tax	Yes
Exemption from Real Property Tax	Yes
Tax Exempt Financing*	No

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

Applicant Business Description

Describe in detail company background, history, products and customers. Description is critical in determining eligibility. Also list all stockholders, members, or partners with % ownership greater than 20%.

9/8/22, 8:45 AM

The Erie County Industrial Development Agency (ECIDA)

Highway Rehab Corp is a Hot In-place Asphalt Recycling Company that was started by Ken Carr in 1981. Ken owned and operated the company for nearly 40 years before developing pancreatic cancer. After becoming sick Ken took a step back and trusted Mike and Myself to run day to day operations. Ken received treatment and was cancer free for sometime but it would later return. This is when he realized he had to sell the company. Everyone who looked at Highway Rehab Corp wanted to close our facility in buffalo where we manufacture and maintenance the recycling equipment. This meant a large part of his Highway Rehab family would loose their jobs and the companies legacy would end. I was with Ken for almost 20 years at this point and Knew I had to do something. This is when Mike and I partnered up and with the help of Erie county and key bank we were able to purchase the company . No one lost their job and we were able to grow and add 10 more full time employees. Highway Rehab has tirelessly worked on improving the techniques and equipment for Hot In-Place Asphalt Recycling. Today Highway Rehab is in the forefront of Hot IN-Place Recycling. Hot In-place is a one of most cost effective and energy efficient processes in road maintenance. Our process is currently used by NY DOT , Mass DOT , Maine DOT , Vermont DOT , as well as numerous towns and counties through out the Northeast. Here we are almost 3 years later and we have out grown our facility in Cheektowaga NY. Us building a new facility will allow us to add another 12 to 15 jobs over the next year. Michael Haggerty and Thomas Colella each hold 50% stock in Highway Rehab Corp.

Estimated % of sales within Erie County	10 %
Estimated % of sales outside Erie County but within New York State	75 %
Estimated % of sales outside New York State but within the U.S.	15 %
Estimated % of sales outside the U.S.	0 %
(*Percentage to equal 100%)	

For your operations, company and proposed project what percentage of your total annual supplies, raw materials and vendor services are purchased from firms in Erie County?

0

Describe vendors within Erie County for major purchases

Section II: Eligibility Questionnaire - Project Description & Details

Project Location

Address of Proposed Project Facility

11061 Walden Ave

Town/City/Village of Project Site

Alden

School District of Project Site

Alden

Current Address (if different)

100 StradtMan St

Current Town/City/Village of Project Site (if different)

Cheektowaga

SBL Number(s) for proposed Project

96.00-4-6.1 and 96.00-4-5

What are the current real estate taxes on the proposed Project Site

If amount of current taxes is not available, provide assessed value for each.

Land \$ 550,000 Building(s)

\$0

If available include a copy of current tax receipt.

Are Real Property Taxes current at project location?

Yes

If no please explain

*The ECIDA has an unpaid tax policy and you will be required to certify all taxes and PILOTS are current.

Does the Applicant or any related entity currently hold fee title or have an option/contract to purchase the Project site?

Yes

If No, indicate name of present owner of the Project Site

Does Applicant or related entity have an option/contract to purchase the Project site?

Yes

Describe the present use of the proposed Project site (vacant land, existing building, etc.)

Vacant Land

Provide narrative and purpose of the proposed project (new build, renovations) square footage of existing and new construction contemplated and/or equipment purchases. Identify specific uses occurring within the project. Describe any and all tenants and any/all end users: (This information is critical in determining project eligibility)

New 23000 Square foot Building. This facility will be used to manufacture and maintenance equipment. There will be 2000 square foot of office space within the building . 1 plow ,skid steer and mower will be purchased to maintain the property. Highway Rehab Corp will be the only tenant .

Municipality or Municipalities of current operations

Cheektowaga NY

Will the Proposed Project be located within a Municipality identified above?

Will the completion of the Project 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?

No

If the Proposed Project is located in a different Municipality within New York State than that Municipality in which current operations are being undertaken, is it expected that any of the facilities in any other Municipality will be closed or be subject to reduced activity?

Yes

(If yes, you will need to complete the Intermunicipal Move Determination section of this application)

Is the project reasonably necessary to prevent the project occupant from moving out of New York State?

No

If yes, please explain and identify out-of-state locations investigated, type of assistance offered and provide supporting documentation available

Have you contacted or been contacted by other Local, State and/or Federal Economic Development Agencies?

No

If yes, please indicate the Agency and nature of inquiry below

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:

Describe the reasons why the Agency's financial assistance is necessary, and the effect the Project will have on the Applicant's business or operations. Focus on competitiveness issues, project shortfalls, etc... Your eligibility determination will be based in part on your answer (attach additional pages if necessary)

Given the rise of interest rates and the increased cost of materials and fuel we are in need of assistance to complete the proposed project. Highway Rehab would otherwise have to put the project on hold. Without this new facility we will not be able to store or service any more equipment stopping our growth and causing us to reduce the number of employees we have. We already have a back log from this year and had to turn down work from repeat customers for the 2nd year in a row. We would have to turn down a fair amount of new work and completing the work we promised would be tight. We have several new agencies looking to work with us in 2023. This new building is critical to our growth.

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

Yes

If the Applicant is unable to obtain Financial Assistance for the Project, what will be the impact on the Applicant and Erie County?

If the project does not take place it will force us to reduce our staff and force us to sign a lease that is going up 30%. Further more we will need to remove some of our equipment from the property given the limited amount of space we have We have spent over \$500,000 building equipment to add another crew. Without the space to store and maintain this equipment it will become a financial burden. By adding a crew we buy more materials, trucks, tools and consumables . This will benefit local businesses and the sales tax we pay goes to the county. The added crew will require another 12 positions be filled. We provide a Green and more cost effective process for Government agencies through out the Northeast and they would also be hurt without this project moving forward. We also need to hire 3 full time positions for the office.

Will project include leasing any equipment?

No

If yes, please describe equipment and lease terms.

We would need to lease a new Hamm Roller and Cat Fork truck.

Site Characteristics

Is your project located near public transportation?

No

If yes describe if site is accessible by either metro or bus line (provide route number for bus lines)

Has a project related site plan approval application been submitted to the appropriate planning department?

Yes

If Yes, include the applicable municipality's and/or planning department's approval resolution, the related State Environmental Quality Review Act ("SEQR") "negative declaration" resolution, if applicable, and the related Environmental Assessment Form (EAF), if

applicable.

If No, list the ECIDA as an "Involved Agency" on the related EAF that will be submitted to the appropriate municipality and/or planning department for site plan approval.

Will the Project meet zoning/land use requirements at the proposed location?

Yes

Describe the present zoning/land use

Industrial

Describe required zoning/land use, if different

Industrial

If a change in zoning/land use is required, please provide details/status of any request for change of zoning/land use requirements

N/A

Is the proposed Project located on a site where the known or potential presence of contaminants is complicating the development/use of the property?

No

If yes, please explain

Has a Phase I Environmental Assessment been prepared, or will one be prepared with respect to the proposed Project Site?

Yes

If yes, please provide a copy.

Have any other studies, or assessments been undertaken with respect to the proposed Project Site that indicate the known or suspected presence of contamination that would complicate the site's development?

No

If yes, please provide copies of the study.

If you are purchasing new machinery and equipment, does it provide demonstrable energy efficiency benefits?

No

If yes, describe the efficiencies achieved

You may also attach additional information about the machinery and equipment at the end of the application.

Does or will the company or project occupant perform research and development activities on new products/services at the project location?

No

If yes, include percentage of operating expenses attributed to R&D activities and provide details.

Select Project Type for all end users at project site (you may check more than one)

For purposes of the following, the term "retail sales" means (i) sales by a registered vendor under Article 28 of the Tax Law of the State of New York (the "Tax Law") primarily engaged in the retail sale of tangible personal property (as defined in Section 1101(b)(4)(i) of the Tax Law), or (ii) sales of a service to customers who personally visit the Project.

Will customers personally visit the Project site for either of the following economic activities? If yes with respect to either economic activity indicated below, you will need to complete the Retail section of this application.

es Yes
C

Please check any and all end uses as identified below.

No Acquisition of Existing Facility	No Assisted Living	Yes Back Office
No Civic Facility (not for profit)	No Commercial	No Equipment Purchase
No Facility for the Aging	Yes Industrial	No Life Care Facility (CCRC)

No Market Rate Housing	No Mixed Use	No Multi-Tenant
No Retail	No Senior Housing	Yes Manufacturing
No Renewable Energy	No Other	

<u>For proposed facility please include the square footage for each of the uses outlined below</u> If applicant is paying for FFE for tenants, include in cost breakdown.

		Cost	% of Total Cost
Manufacturing/Processing	19,000 square feet	\$ 3,428,170	83%
Warehouse	2,000 square feet	\$ 360,860	8%
Research & Development	square feet	\$ 0	0%
Commercial	square feet	\$ 0	0%
Retail	square feet	\$ 0	0%
Office	2,000 square feet	\$ 360,970	9%
Specify Other	square feet	\$ 0	0%

If you are undertaking new construction or renovations, are you seeking LEED certification from the US Green Building Council? No

If you answered yes to question above, what level of LEED certification do you anticipate receiving? (Check applicable box) <BLANK>

< BLANK >	
No	
square feet	18 acres
23,000 square feet	
square feet	
	No

square feet

\$0

5.) Manufacturing Equipment

\$ 85,000

6.) Infrastructure Work

\$350,000

7.) Non-Manufacturing Equipment: (furniture, fixtures, etc.)

\$ 15,000

8.) Soft Costs: (Legal, architect, engineering, etc.)

\$75,000

9.) Other Cost

\$0

Explain Other Costs

Total Cost \$ 5,225,000

Construction Cost Breakdown:

Total Cost of Construction	\$ 4,500,000 (sum of 2, 3, 4 and 6 in Project Information, above)
Cost of materials	\$ 3,515,000
% sourced in Erie County	60%

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	\$ 3,515,000
Estimated State and local Sales and Use Tax Benefit (product of 8.75% multiplied by the figure, above):	\$ 308,875

** Note that the estimate provided above will be provided to the New York State Department of Taxation and Finance. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to undertake the total amount of investment as proposed within this Application, and that the estimate, above, represents the maximum amount of sales and use tax benefit that the Agency may authorize with respect to this Application. The Agency may utilize the estimate, above, as well as the proposed total Project Costs as contained within this Application, to determine the Financial Assistance that will be offered.

Project refinancing estimated amount, if applicable (for refinancing of existing debt only)	\$0
Have any of the above costs been paid or incurred as of the date of this Application?	No
If Yes, describe particulars:	
Sources of Funds for Project Costs:	
Equity (excluding equity that is attributed to grants/tax credits):	\$ 1,350,000
Bank Financing:	\$ 3,900,000
Tax Exempt Bond Issuance (if applicable):	\$0
Taxable Bond Issuance (if applicable):	\$0
Public Sources (Include sum total of all state and federal grants and tax credits):	\$0
Identify each state and federal grant/credit: (ie Historic Tax Credit, New Market Tax Credit, Brownfield, Cleanup Program,	0

ESD, other public sources)

Total Sources of Funds for Project Costs: Have you secured financing for the project?	\$5,250,000 Yes		
Mortgage Recording Tax Exemption Benefit: Amount of mortgage, if any that would be subject to mortgage recording tax:			
Mortgage Amount (include sum total of construction/permanent/bridge financing).	3,900,000		
Lender Name, if Known			
Estimated Mortgage Recording Tax Exemption Benefit (product of	\$29,250		

Real Property Tax Benefit:

Identify and describe if the Project will utilize a real property tax exemption benefit other than the Agency's PILOT benefit (485-a, 485-b, other):

mortgage amount as indicated above multiplied by 3/4 of 1%):

<u>IDA PILOT Benefit</u>: Agency staff will indicate the estimated amount of PILOT Benefit based on estimated Project Costs as contained herein and anticipated tax rates and assessed valuation, including the annual PILOT Benefit abatement amount for each year of the PILOT benefit and the sum total of PILOT Benefit abatement amount for the term of the PILOT as depicted in the PILOT worksheet in the additional document section.

<u>Percentage of Project Costs financed from Public Sector sources</u>: Agency staff will calculate the percentage of Project Costs financed from Public Sector sources based upon the Sources of Funds for Project Costs as depicted above. The percentage of Project Costs financed from public sector sources will be depicted in the PILOT worksheet in the additional document section.

ECIDA encourages applicants to utilize MBE/WBE contractors for their projects. Describe your company's internal practices that promote MBE/WBE hiring and utilization

Highway Rehab Is a union contractor. We are an equal opportunity employer. We do not have a written policy I place. However we currently employ women , minorities, recovering addicts and military veterans. I believe all people deserve an opportunity. The GC does not have a written policy .

Is project necessary to expand project employment?

Yes

Is project necessary to retain existing employment?

Yes

Will project include leasing any equipment?

No

If yes, please describe equipment and lease terms.

We would need to lease a new Hamm Roller and Cat Fork truck.

Employment Plan (Specific to the proposed project location)

The Labor Market Area consists of the following six counties: Erie, Niagara, Chautauqua, Cattaraugus, Wyoming and Genessee.

By statute, Agency staff must project the number of FTE jobs that would be retained and created if the request for Financial Assistance is granted. Agency staff will project such jobs over the TWO Year time period following Project completion. Agency staff converts PT jobs into FTE jobs by dividing the number of PT jobs by two (2).

Current # of jobs at proposed project location or to be relocated at project location If financial assistance is granted – project the number of FT and PT jobs to be retained If financial assistance is granted – project the number of FT and PT jobs to be created upon 24 months (2 years) after Project completion Estimate number of residents of the Labor Market Area in which the project is located that will fill the FT and PT jobs to be created

				upon 24 months (2 years) after project completion **
Full time	67	0	15	15
Part time	0	0	0	0
Total	67	0	15	

Salary and Fringe Benefits for Jobs to be Retained and Created

Category of Jobs to be Retained and/or Created	# of Employees Retained and/or Created	Average Salary for Full Time	Average Fringe Benefits for Full Time	Average Salary for Part Time (if applicable)	Average Fringe Benefits for Part Time (if applicable)
Management	5	\$ 260,000	\$ 33,996	\$ O	\$ O
Professional	8	\$ 91,750	\$ 15,250	\$ O	\$ O
Administrative	2	\$ 63,202	\$ 1,460	\$ O	\$ O
Production	67	\$ 76,200	\$ 40,500	\$ O	\$ O
Independent Contractor	0	\$0	\$0	\$0	\$0
Other	0	\$ O	\$0	\$ O	\$ O

** Note that the Agency may utilize the foregoing employment projections, among other items, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to retain the number of jobs and create the number of jobs with respect to the Project as set forth in this Application.

Yes By checking this box, I certify that the above information concerning the current number of jobs at the proposed project location or to be relocated to the proposed project location is true and correct.

Employment at other locations in Erie County: (provide address and number of employees at each location):

Address			
Full time	0	0	0
Part time	0	0	0
Total	0	0	0

Payroll Information

Annual Payroll at Proposed Project Site upon completion

6,927,000

Estimated average annual salary of jobs to be retained (Full Time)

88,340

Estimated average annual salary of jobs to be retained (Part Time)

0

Estimated average annual salary of jobs to be created (Full Time)

67,200

Estimated average annual salary of jobs to be created (Part Time)

0

From (Full Time)	60,000	To (Full Time)	110,000
From (Part Time)	0	To (Part Time)	0

Section III: Environmental Questionnaire

INSTRUCTIONS: Please complete the following questionnaire as completely as possible. If you need additional space to fully answer any question, please attach additional page(s).

General Background Information

Address of Premises

11061 Walden ave Alden NY 14004

Name and Address of Owner of Premises

HRC Properties 2258 Route 22 Brewster NY 10509

Describe the general features of the Premises (include terrain, location of wetlands, coastlines, rivers, streams, lakes, etc.)

18 Acres of vacant land . No wetlands . Zoned industrial.

Describe the Premises (including the age and date of construction of any improvements) and each of the operations or processes carried out on or intended to be carried on at the Premises

We will have a 23000 square foot building with a fenced in parking area for securely storing equipment and supplies. There will also be parking in the front of building for employees and visitors.

Describe all known former uses of the Premises

There is a foundation on the lot from a building that burned down some years ago. Prior use unknown.

Does any person, firm or corporation other than the owner occupy the Premises or any part of it?

No

If yes, please identify them and describe their use of the property

Have there been any spills, releases or unpermitted discharges of petroleum, hazardous substances, chemicals or hazardous wastes at or near the Premises?

No

If yes, describe and attach any incident reports and the results of any investigations

Has the Premises or any part of it ever been the subject of any enforcement action by any federal, state or local government entity, or does the preparer of this questionnaire have knowledge of: a) any current federal, state or local enforcement actions; b) any areas of non-compliance with any federal, state or local laws, ordinances, rules or regulations associated with operations over the past 12 months?

No

If yes, please state the results of the enforcement action (consent order, penalties, no action, etc.) and describe the circumstances

Has there been any filing of a notice of citizen suit, or a civil complaint or other administrative or criminal procedure involving the Premises?

No

If yes, describe in full detail

Solid And Hazardous Wastes And Hazardous Substances

Does any activity conducted or contemplated to be conducted at the premises generate, treat or dispose of any petroleum, petroleum-related products, solid and hazardous wastes or hazardous substances?

If yes, provide the Premises' applicable EPA (or State) identification number

Have any federal, state or local permits been issued to the Premises for the use, generation and/or storage of solid and hazardous wastes?

No

If yes, please provide copies of the permits.

Identify the transporter of any hazardous and/or solid wastes to or from the Premises

Identify the solid and hazardous waste disposal or treatment facilities which have received wastes from the Premises for the past two (2) years

Does or is it contemplated that there will occur at the Premises any accumulation or storage of any hazardous wastes on-site for disposal for longer than 90 days?

No

If yes, please identify the substance, the quantity and describe how it is stored

Discharge Into Waterbodies

Briefly describe any current or contemplated industrial process discharges (including the approximate volume, source, type and number of discharge points). Please provide copies of all permits for such discharges

Identify all sources of discharges of water, including discharges of waste water, process water, contact or noncontact cooling water, and stormwater. Attach all permits relating to the same. Also identify any septic tanks on site

- sewer to municipal sewer system- storm water runs to retention basin then to state discharge system - Clean water from county water system

Is any waste discharged into or near surface water or groundwaters?

No

If yes, please describe in detail the discharge including not only the receiving water's classification, but a description of the type and quantity of the waste

Air Pollution

Are there or is it contemplated that there will be any air emission sources that emit contaminants from the Premises?

No

If yes, describe each such source, including whether it is a stationary combustion installation, process source, exhaust or ventilation system, incinerator or other source

Are any of the air emission sources permitted?

No

If yes, attach a copy of each permit.

Storage Tanks

List and describe all above and under ground storage tanks at the Premises used to store petroleum or gasoline products, or other chemicals or wastes, including the contents and capacity of each tank. Please also provide copies of any registrations/permits for the tanks

Have there been any leaks, spills, releases or other discharges (including loss of inventory) associated with any of these tanks?

If yes, please provide all details regarding the event, including the response taken, all analytical results or reports developed through investigation (whether internal or external), and the agencies which were involved

Polychlorinated Biphenyls ("PCB" or "PCBs") And Asbestos

Provide any records in your possession or known to you to exist concerning any on-site PCBs or PCB equipment, whether used or stored, and whether produced as a byproduct of the manufacturing process or otherwise.

Have there been any PCB spills, discharges or other accidents at the Premises?

No

If yes, relate all the circumstances

Do the Premises have any asbestos containing materials?

No

If yes, please identify the materials

Section IV: Facility Type - Single or Multi Tenant

Is this a Single Use Facility or a Multi-Tenant Facility?

Single Use Facility

For Single Use Facility

Occupant Name	Highway Rehabilitation Corp	
Address		
Contact Person	Thomas Colella	
Phone	(845) 721-4094	
Fax		
E-Mail	tom@higwayrehab.com	
Federal ID #	22-2355196	
SIC/NAICS Code	237310	

SS

Section VI: Retail Determination

To ensure compliance with Section 862 of the New York General Municipal Law, the Agency requires additional information if the proposed Project is one where customers personally visit the Project site to undertake either a retail sale transaction or to purchase services.

Please answer the following:

Will any portion of the project (including that portion of the costs to be financed from equity or other sources) consist of facilities or property that are or will be primarily used in making sales of goods or services to customers who personally visit the project site?

No

If yes, complete the Retail Questionnaire Supplement below. If no, proceed to the next section.

Section VII: Adaptive Reuse Projects

Adaptive Reuse is the process of adapting old structures or sites for new purposes.

Are you applying for tax incentives under the Adaptive Reuse Program?

Section VIII: Inter-Municipal Move Determination

The Agency is required by state law to make a determination that, if completion of a Project benefiting from Agency Financial Assistance results 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, Agency financial Assistance is required to prevent the project occupant from relocating out of the state, or is reasonably necessary to preserve the project occupant's competitive position in its respective industry.

Current Address

100 stradtman st

City/Town

Cheektowaga

State

New York

Zip Code

14206

Will the project 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?

No

Will the project result in the abandonment of one or more plants or facilities of the Project occupant located within the state?

No

If Yes to either question, explain how, notwithstanding the aforementioned closing or activity reduction, the Agency's Financial Assistance is required to prevent the Project from relocating out of the State, or is reasonably necessary to preserve the Project occupant's competitive position in its respective industry:

Does this project involve relocation or consolidation of a project occupant from another municipality?

Within New York State	Yes
Within Erie County	Yes
If Yes to either question, please, explain	

Highway Rehab corp. has out grown the current facility in Cheektowaga and needs more space to operate. We did spend more than a year looking for properties in Cheektowaga as well as the surrounding areas but

Will the project result in a relocation of an existing business operation from the City of Buffalo?

No

were unable to find a adequate facility.

If yes, please explain the factors which require the project occupant to relocate out of the City of Buffalo (For example, present site is not large enough, or owner will not renew leases etc.)

What are some of the key requirements the project occupant is looking for in a new site? (For example, minimum sq. ft., 12 foot ceilings, truck loading docs etc.)

minimum parking 400 ft x 250 ft plus 12 front office parking spots, minimum of 20 ft ceilings, minimum of 16,000 square feet of shop space consisting of 4 bays with doors 16 ft x 14 ft. Must be zoned industrial. Must have a minimum of 1500 square foot office space.

If the project occupant is currently located in Erie County and will be moving to a different municipality within Erie County, has the project occupant attempted to find a suitable location within the municipality in which it is currently located?

Yes

What factors have lead the project occupant to consider remaining or locating in Erie County?

A majority of our vendors and service shops are located within County . A majority of our employees are also located in Erie County.

If the current facility is to be abandoned, what is going to happen to the current facility that project occupant is located in?

The current facility will more than likely be leased to key safety who already occupies a large part of the industrial complex we reside in.

Please provide a list of properties considered, and the reason they were not adequate. (Some examples include: site not large enough, layout was not appropriate, did not have adequate utility service, etc.) Please include full address for locations.

100 Stradtman St, Cheektowaga NY our current location, not adequate space to expand. The Bic recycling facility at 4284walden Ave in Cheektowaga needed too much work and lacked parking. We also looked at 5636 Transit Rd, Depew NY. This property need block work, tons of electrical work, the headers were rotted out above doors, buried fuel tanks were of concern to us, and the parking lot was not large enough. We also contacted Uniland and inquired about property they have in Cheektowaga NY off Walden Ave. They wanted 65K an acre and that was out of our price range.

Section IX: Senior Housing

IDA tax incentives may be granted to projects under the Agency's Senior Citizen Rental Housing policy when the project consists of a multifamily housing structure where at least 90% of the units are (or are intended to be) rented to and occupied by a person who is 60 years of age or older.

Are you applying for tax incentives under the Senior Rental Housing policy?