



Application for Financial Assistance

	1001010100
1.	Applicant Information
	Company Name: Address: BGW Properties, LLC. 413 Garden Drive Batavia, W 14020
	Phone No.: Fax No.: Email Address: Fed. Id. No.: Contact Person: (585) 343-1966 Christine cecere a hotmail. com #16-1608335 Contact Person:
	Principal Owners/Officers/Directors: (list owners with 15% or more in equity holdings with percentage ownership) Bran Wormley 100%
	Corporate Structure (attach schematic if Applicant is a subsidiary or otherwise affiliated with another entity)
	Form of Entity:
į	C Corp
I	S Corp
0	Partnership(General or Limited; number of general partners and, if applicable number of limited partners).
8	LLC (number of members)
1	LLP (number of members)
D	Sole Proprietorship
0	Not for Profit
	If a corporation, partnership, limited liability company/partnership or Not for Profit:
	What is the date of the establishment
	Place of organizationand,
	If a foreign organization, is the Applicant authorized to do business in the State of New
	67

Line of Phinancial Assist App 08 24 09

1

Name:	BOWARISO & Me Cutcheon
Addres	
Phone	
Fax No	1.: 344-1996
_	etailed Description of Project:
	Build a 40'x 100' Pole Barn
	Building for FASKNACL -
	wholesale (80%) + refric (20%)
	Distribution Business
Droing	t Code (for composition)
	t Code (for GCEDC's Use)
В)	Project Address: 5596 E. Mag St. Id - BATAVIR NY 14020
C)	Current Assessed Value of Property O vacant land being Separated (not required if project is for equipment purchases only)
D)	Are utilities on Site:
	Water X Electric Gas Sanitary/Storm Sewer
E)	Present legal owner of site
F)	Zoning of Project Site: Current: Om Proposed:
G)	Are any variances Needed:
H)	Principal Use of Project upon completion: wholesale Business
1)	Will the Project result in the removal of a facility of the Applicant from one area of the State of New York to another?
	Will the Project result in the removal of a facility of another proposed occupant of the Project from one area of the State of New York to another area of the State of New York? Yes XF No
	Will the Project result in the abandonment of one or more facilities located in the State of New York?
1)	Current Employment a. At Project Location: Full time Part time Full Time Equivalents b. At Previous Genesee County Location (if applicable): Full time Part time FTE 3
(1)	Estimate how many jobs will be retained as a result of this Project over the next three years: 3
(2)	What is the average estimated salary range of jobs to be retained took - 45 K w/ serefits

2.

L1)	Estimate how many full time/ part-time jobs will be created as a result of this Project over the next three years: Full Time (FT) Part-Time (PT) /					
**Note:	An FTE is the				 raging Part-Time positio	ns into full time positions,
The Tota	J ETE calculat	ing would = FT + DT	converted to ETE's - T	ntal ETE		to title fall title positions,
L2) L3) L4)	What is the planned average hourly wage for the FTE jobs to be created					
M)	Estimate how many construction jobs will be created by this Project: 4 Estimate average length of employment for each construction job for this Project: 4 Months					
N) O) P) Q)	What is the estimated annual total Sales Tax to be generated from this project at full build-out? <u>16d</u> Expected Break ground date for project (If any) <u>Dec 15, 2009</u> (mo / year)					
R)	Estimated Policy Land and Building Cos	rolect Costs / Project C	(Purchase V	alue of land and/or b		nsion construction
Building Cost \$ //opto (New Building Construction cost or Existing building expansion cost or Existing building expansion cost or Exist				print fees)		
	Other Tot, Cap Inv	s //o, page Amount on this Pro	describe: 0.5 (Sum all line oject? \$ //0,00	s above)		
S) Detai	iled Compa	ny Info: (Confident	ial — will not he char	ed publický – info	rmation required in cost — FASTENAL	order to perform direct
			Genesee County):		. , 5, 5, 6, 7	
S2) Cur	rent Annual	Benefits Paid (w/n G	enesee County): \$			
S3) Ave	rage annual	growth rate of annu	al wages: % o	:		
S4) Ave	rage annual	growth rate of bene	fits costs: % D			
S5) Cun County		pected annualized F	ull Time Equivalent	(FTE) Employees	before impacts from t	his project (Genesee
S6) Nex	d 5 vears pla	nned / conservative	estimates for capita	l investment bevor	nd this project (if avail	able)
	ear 1	Year 2	Year 3	Year 4	Year 5]
\$		\$	\$	\$	\$	·
		*	<u> </u>]
S7) Company Average Yearly Production Related Purchases (COGS/Inventory) from vendors within NYS (Gen County Ops): \$ \$\textit{\textit{O}}\$ 75 D						
S8) Ave	erage annual	growth rate of produ	action related purcha	ises: % Ø		
S9) Con within N	mpany Avera IYS (Gen Co	ge Yearly Non-Prod unty Ops): \$	uction Purchases (S イク の	upplies, Materials,	Equipment) non-cap	italized from vendors
S10) Average annual growth rate of non-production related purchases: %						
S11) Company Average Annual Sales / Use Taxes paid (Gen County Ops): \$ 750						
S12) Company Average annual growth rate of Sales / Use Taxes (Genesee County Ops): % ToD						
S13) Company Planned Property Taxes Paid for current calendar year (Genesee County Ops): \$						
S14) Company Annual PILOT payments made for current calendar year (Genesee County Ops) excluding this project: \$						

(at current market rates) ______ to ____?

- S15) Company Current Year Expected EBT (Earnings B4 Taxes or Profil B4 Taxes) for Genesee County Ops: \$ ©
- S16) Company expected average annual growth rate for EBT: %
- S17) Company Current Year Expected NYS Income Taxes paid for Genesee County Ops: \$ 8 \(\nu \nu \)

"U" and "V" to be completed / calculated by GCEDC

U)	Estimated Financial Assistance to be provided via	GCEDC participation - subject to GCEDC Board Approval
	1) Estimated Sales Tax Exemption (8%)	\$ 5600
	2) Estimated Mortgage Tax Exemption (1.25%)	\$\2\75
	3) Estimated Property Tax Abatement	\$ 29,662
	4) Estimated Total Tax Savings (1+3):	\$ 36,454
	5) Estimated Tax-Exempt Interest Cost Savings	\$ (via Tax-Exempt Bond)
	6) Estimated total Company Savings (4+5):	\$3/ ₂ (8)?
e san ere	Describe nature of Property Tax Abatement (PILO)	The substitute of the substitu
	Proposed PILOT structure:	piux (60%)
	fee applies if this project was referred to GCEDC free will collect its participation fee at the time of closing investment costs of this project stated in this applic GCEDC in addition to tax incentives – an addition (Should the actual costs exceed those estimates by Harris Beach, LLP \$ \(\) \(\) \(\) \(\) \(\) \(\) (Estimates the financial assistance provided by the Genesee Commay be required to pay additional out-of-pocket.	al 0.5% fee on the value of bond financing applies. more than 25%, an additional fee will apply.) ated fee for legal services required in connection with
Repres	sentations by the Applicant	
Job Lis understa otherwis Project with the by the fe Applican First Co Law, the except a consider	will be listed with the New York State Department of administrative entity (collectively with the DOL, the " ederal job training partnership act(Public Law 97-300 nt's Initials onsideration for Employment - In accordance with	where indicated ew York General Municipal Law, the Applicant ancial Assistance from the Center, except as wemployment opportunities created as a result of the Labor Community Services Division (the "DOL") and JTPA Entities") of the service delivery area created b) ("JPTA") in which the Project is located. Section 858-b(2) of the New York General Municipal ct receives any Financial Assistance from the Center, ments, where practicable, the Applicant will first no shall be referred by the JPTA Entities for new

Annual Sales Tax Fillings - In accordance with Section 874(8) of the General Municipal Law, the Applicant understands and agrees that, if the Project receives any sales fax exemptions as part of the Financial Assistance from the Center, 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, an Annual Report of Sales and Use Tax Exemptions (Form ST-340) by the last day of February following applicable calendar year (with a copy to the Genesee County Economic Development Center), describing the value of all sales tax exemptions claimed

Employment Reports - The Applicant understands and agrees that, if the Project receives any Financial Assistance from the Center, the Applicant agrees to file, or cause to be filed, with the Center, on quarterly basis, copies of form NYS-45-MN Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Returns filed with the Department of Labor applicable to the project site.

GCEDC Reports - The Applicant understands and agrees that, if the Project receives any Financial Assistance from the Center, the Applicant agrees to file, or cause to be filed with the Center, a certified Annual Project Report (to be mailed to the Applicant) due by the last day of January following applicable calendar year.

Applicant's Initials

Absence of Conflicts of Interest - The Applicant has received from the Center a list of the members	s, officers,
and employees of the Center. No member, officers or employee of the Center has an interest, wheth	er direct or
indirect, in any transaction contemplated by this Application, except as hereinafter described: \(\frac{1}{2} \). \(\frac{1}{2} \). \(\frac{1}{2} \).	Applicant's
	(

The Applicant and the individual executing this Application on behalf of the Applicant acknowledge that:

- A) The Center 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.
- Failure of the Applicant to file appropriate Sales Tax and Employment reports will result in the revocation of tax benefits and require repayment of benefits previously claimed.

(Applicant)

Name: Title:

This Application should be submitted with:

A) A \$250 Application fee to:

Genesee County Economic Development Center

One Mill Street

Batavia, New York 14020

(Attn: President & Chief Executive Officer).

A certificate of insurance as follows:

1. Worker's Compensation Insurance (Center named as additional insured).

ON

- 2. General Liability Insurance with limits not less than \$1,000,000 per occurrence /accident and a blanket excess liability not less than \$3,000,000 (Center named as additional insured).
- 3. Insurance against loss/damage by fire, lightning or other casualties with a uniform standard extended coverage endorsement in an amount not less than the full replacement value of the Facility. (Center named as named insured).

The GCEDC encourages the use of Genesee County contractors/suppliers and asks that they be allowed to bid your project!

Hold Harmless Agreement

Applicant hereby releases Genesee County Economic Development Center and the members, officers, servants, agents and employees thereof(the "Center") from, agrees that the Center shall not be liable for and agrees to indemnify, defend and hold the Center harmless from and against any and all liability arising from or expense incurred by (A) the Center'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 Center, (B) the Center's acquisition, construction and/or installation of the Project described therein and (C) any further action taken by the Center 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 negotilations, 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 Center or the Applicant are unable to reach final agreement with the respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Center, its agents or assigns, all costs incurred by the Center in the processing of the Application, including attorneys' fees, if any.

(Applicant)

Brian

Workule

Name:

Title:

owner

Sworn to before me this

IXX C

Notary Public

Christina M. Treeso

Majory Public, State of New York

Christing in General County

Commission Embres October 29, 20 (

Prior to the closing of this transaction applicant shall deliver the following documentation (where applicable to project) to GCEDC's legal counsel

- 1. Insurance Certificates please see the following page for the exact coverage requirements.
- 2. Certificate of Incorporation/Articles of Organization together with all amendments or restatements thereto.
- 3. By-Laws/Operating Agreement together with any amendments thereto
- Good Standing Certificate(s) issued by the State of Incorporation/Organization of the Company AND New York State.
- 5. Resolutions of the Board of Directors/Members of the Company approving the Project.
- 6. List of all Material Pending Litigation of the Company.
- List of all Underground Storage Tanks containing Hazardous Materials at the Project.
- 8. List of all Required Environmental Permits for the Project.
- 9. Legal Description of the Project Premises.
- Name and title of Person signing on behalf of the Company.
- 11. Copy of the proposed Mortgage (if any).
- 12. Company's Federal Tax ID Number (EIN).
- 13. Tax Map Number of Parcel(s) comprising the Project.

A copy of this list should be provided to applicant's legal Counsel

ş., .

INSURANCE COVERAGE

- 1. Requirements. The Company shall maintain or cause to be maintained insurance against such risks and for such amounts as are customarily insured against by businesses of like size and type paying, as the same become due and payable, all premiums in respect thereto, including, but not necessarily limited to:
- (a) (i) Insurance against loss or damage by fire, lightning and other casualties, with a uniform standard extended coverage endorsement, such insurance to be in an amount not less than the full replacement value of the Project, exclusive of excavations and foundations, as determined by a recognized appraiser or insurer selected by the Company or (ii) as an alternative to the above requirements (including the requirement of periodic appraisal), the Company may insure the Project under a blanket insurance policy or policies covering not only the Project but other properties as well.
- (b) Workers' compensation insurance, disability benefits insurance, and each other form of insurance which the Agency or the Company is required by law to provide, covering loss resulting from injury, sickness, disability or death of employees of the Company who are located at or assigned to the Project.
- (c) Insurance against loss or losses from liabilities imposed by law or assumed in any written contract and arising from personal injury and death or damage to the property of others caused by any accident or occurrence, with limits of not less than \$1,000,000 per accident or occurrence on account of personal injury, including death resulting therefrom, and \$1,000,000 per accident or occurrence on account of damage to the property of others, excluding liability imposed upon the Company by any applicable workers' compensation law; and a blanket excess liability policy in the amount not less than \$3,000,000, protecting the Company against any loss or liability or damage for personal injury or property damage.
- Additional Provisions Respecting Insurance. (a) All insurance required by Section 4(a) hereof shall name the Agency as a named insured and all other insurance required by Section 4 hereof shall name the Agency as an additional insured. All insurance shall be procured and maintained in financially sound and generally recognized responsible insurance companies selected by the Company and authorized to write such insurance in the State. Such insurance may be written with deductible amounts comparable to those on similar policies carried by other companies engaged in businesses similar in size, character and other respects to those in which the Company is engaged. All policies evidencing such insurance shall provide for (i) payment of the losses of the Company and the Agency as their respective interest may appear, and (ii) at least thirty (30) days' prior written notice of the cancellation thereof to the Company and the Agency.
- (b) All such policies of insurance, or a certificate or certificates of the insurers that such insurance is in force and effect, shall be deposited with the Agency on the date hereof. Prior to expiration of any such policy, the Company shall furnish the Agency evidence that the policy has been renewed or replaced or is no longer required by this Agent Agreement.

617.20

Appendix C State Environmental Quality Review

SHORT ENVIRONMENTAL ASSESSMENT FORM For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)
1. APPLICANT/SPONSOR BUW Properties LLC Fastural
3. PROJECT LOCATION:
Municipality county GENESEE
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)
4. PRECISE LOCATION (Street address and road infersections, prominent landmarks, etc., or provide map) Corner of Rt 5(5)6 Froposed Action is:
5. PROPOSED ACTION IS: New Expansion Modification/alteration
Build HOX100' Polé Barn for Retail Use
7. AMOUNT OF LAND AFFECTED: Initially
8. WILL, PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? Yes No If No, describe briefly
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? Residential Industrial Commercial Agriculture Park/Forest/Open Space Other Describe:
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? Yes Yes, list agency(s) name and permit/approvals:
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? Yes No If Yes, list agency(s) name and permit/approvals:
IN the process
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? ☐ Yes ☐ No
Applicant/sponsor name: 13 RIAN WORM Date: 10-30-09
Signature: Du Clary

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

OVER

TAKE II INFACT ASSESSMENT (TO be completed by Feath	i Agency)
A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 6	617.4? If yes, coordinate the review process and use the FULL EAF.
WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR L declaration may be superseded by another involved agency. Yes No	JNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative
C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED W C1. Existing air quality, surface or groundwater quality or quantity, noise to potential for erosion, drainage or flooding problems? Explain briefly:	
No	
C2. Aesthetic, agricultural, archaeological, historic, or other natural or cult	iural resources; or community or neighborhood character? Explain briefly:
C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habit	iats or threatened or endangered species? Explain briefly:
NO	and of the transfer of the tra
C4. A community's existing plans or goals as officially adopted, or a change in	n use or intensity of use of land or other natural resources? Explain briefly:
C5. Growth, subsequent development, or related activities likely to be indu	uced by the proposed action? Explain briefly:
l wi	
C6. Long term, short term, cumulative, or other effects not identified in C1	I-C5? Explain briefly:
C7. Other impacts (including changes in use of either quantity or type of e	energy)? Explain briefly:
D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHAENVIRONMENTAL AREA (CEA)? Yes X No If Yes, explain briefly:	ARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL
E IN THESE OF METHODS INCOMES OF SOUTH	
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO Yes No If Yes, explain briefly:	POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
effect should be assessed in connection with its (a) setting (i.e. urbai geographic scope; and (f) magnitude. If necessary, add attachment sufficient detail to show that all relevant adverse impacts have been id	ngency) e whether it is substantial, large, important or otherwise significant. Eact n or rural); (b) probability of occurring; (c) duration; (d) Irreversibility; (e ts or reference supporting materials. Ensure that explanations contair dentified and adequately addressed. If question D of Part II was checked of of the proposed action on the environmental characteristics of the CEA
Check this box if you have identified one or more potentially large or significant EAF and/or prepare a positive declaration.	gnificant adverse impacts which MAY occur. Then proceed directly to the FULL
Check this box if you have determined, based on the information and ar NOT result in any significant adverse environmental impacts AND pro	nalysis above and any supporting documentation, that the proposed action WILL by idea on attachments as necessary, the reasons supporting this determination
Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)