**Application for Financial Assistance** 

Applicant Information	-4
Company Name: Darler lake Hospitality LLC  Address: City/Town: State: Zip: Barre 2001 GCEDC  Phone No.: Barre 344-0236  Fax No.: 344-0236  Economic  David Control  C	
Address: City/Town: State: _ Zip: Parks 200 & GCEDC	
Phone No.: 344-2100 Economic	
Email Address: Fed. Id. No.: 84-1620959 Development Center	r
Email Address: Fed. Id. No.: 3 1020   5	ł:
Contact Person: Shaw Park. DECEIVED	i
Principal Owners / Officers / Directors: (list owners with 15% or more in equity holdings with percentage ownership)	Ė
Names Tille Names Tille Harrish Party 3/1. April Shan 38-1. UL 2 9 2010	ŀ
Name & Tille	
Corporate Structure (attach schematic if Applicant is a subsidiary or otherwise affiliated with another entity)	
Form of Entity: ☐ C Corp ☐ S Corp ☐ Partnership V☐ ±LC ☐ LLP ☐ Sole Proprietorship ☐ Not for Profit	
If a corporation, partnership, limited liability company/partnership or Not for Profit:  What is the date of the establishment, Place of organization and, if a foreign organization, is the Applicant	
authorized to do business in the State of New York? Select	
Applicant's Counsel: Jordan Morgenstern e Fix Spincleman of 5 551.41	
Applicant's Counsel: Jordan Morgenstern & Fix Spindleman Bron'tz i Goldman  Name: Address: City/Town: State: _ Zip: State: Zip: \$2000	•
Phone No.: Fax No.:	
Project Information  A) Detailed Description of Project: Revolution of 1000 Colors  B) Location of Project / Project Address: 8250 Payla Road, Bulantin N	
A) Detailed Description of Project: Revolution of Moon of Moon of Marie N	K
AND THE RESERVE OF THE PARTY OF	
(not required it project is for equipment purchases only)	
D) Square footage of existing building S/F	
Square footage of new build WAS/F	
Total Square FootageS/F	
E) Project Employment Information: **Note: Please use full time equivalents, approximately Two part time is equivalent to one full time.	
E1) Current number of full time equivalent employees (prior to project):	
E2) Estimate how many full time/ part-time jobs will be retained as a result of this Project over the next three years:	
Eull Time (FT) 18 Part-Time (PT) 35 ** Total Full Time Equivalents (FTE) 35	
E3) What is the average estimated (annual) salary range of jobs to be retained to 4 to 4 to (all current market rates)	
(at current market rates) E4) Estimate how many full time/ part-time jobs will be created as a result of this Project over the	
next three years: <u>Full Time (FT)</u> <u>Part-Time (PT)</u> ** Total <u>Full Time Equivalents (FTE)</u>	
E5) What is the planned average hourly wage for the FTE jobs to be created \$ 8 - 10	
E6) What is the average estimated annual salary range of FTE jobs to be created \$\frac{15}{K}\to \$\frac{20}{K}\$.	
E7) What is the planned average annual benefits paid in \$\$ per FTE job to be created \$	
E8) Estimate how many construction jobs will be created by this project: 10	

· .	E9) Estimate average length of employment for each construction job for this Project: LL to C MonVM.  E10) Is the Project Commercial in nature (Sales Tax Generating for Community)? select YeS, \$20K  E11) What is the estimated annual total Sales Tax to be generated from this project at full build-out? \$20K  E12) Expected Break ground date for project (if any) (mo / year) 6 ct 8 ct 2016  E13) Expected timeframe for project to achieve full build-out? (in months) 6 to 8 monM.
	Detailed Company Info: (Confidential – will not be shared publicly) – information required in order to perform direct economic impact analysis as justification for GCEDC participation in this project
	E14) Current Annual Wages / Payroll (w/n Genesee County): \$
	E16) Average annual growth rate of annual wages: %_3_
	E17) Average annual growth rate of benefits costs: %1
	E18) Company Average Yearly Production Related Purchases (COGS / Inventory) from vendors within NYS (Gen County Ops): \$\frac{1}{2} \text{ (N)}
	E19) Company Average Yearly Non-Production Purchases (Supplies, Materials, Equipment) non-capitalized from vendors within NYS (Gen County Ops): \$ 500 \( \)
	FOO Company Average Applied Splee / Liea Tayes paid (Gen County Ons): \$ 2.30,000,000
	TO A Commend Droppethy Toyon Doid for current calendar year (Genesae Colinity (108) 18 1/5/1
	E22) Company Current Year Expected EB1 (Earnings B4 Taxes of Profit B4 Taxes) for Genesee County Ops. 4
	F23) Company expected average annual growth rate for EB1: %
	E24) Company Current Year Expected NYS Income Taxes paid for Genesee County Ops: \$ 1500.00

Next 5 years planned / conservative estimates for capital investment beyond this project (if available)

Year 1	Year 1 Year 2		Year 4	Year 5	
0 \$	0\$	() <b>\$</b>	<i>O</i> \$	<i>(</i> ) \$	

Is the company delinquent in the payment of any state or municipal property taxes?	No	select
Is the company delinquent in the payment of any income tax obligation?	$\mathcal{M} \circ$	select
Is the company delinquent in the payment of any loans?	NO	select
is the company currently in default on any of its loans?	MO	select
Are there currently any unsatisfied judgments against the company?	No	select
Are there currently any unsatisfied judgments against any of the company's principal	s? Mo	select
Has the company ever filed for bankruptcy?		select
Have any of the company's principals ever personally filed for bankruptcy or in any w sought protection from creditors?	ay	select

If the answer to any of the questions above is "Yes," please provide additional comments in the space below and on additional pages if necessary.

### **Estimated Project Costs / Project Capital Investment:**

Mortgage Amount on this Project?

(New Building Construction cost or Existing building expansion construction **Building Cost** (Purchase Value of land and/or building incl. engineering, architect and blue print fees) Land and Building (\$ Value of Production Equipment - not sales taxable) **Production Equipment** \$ \_\_\_\_ (\$ Value of sales taxable equip = Furniture/Fixtures, Computers, Lockers...) \$  $1 \cdot 5$  describe:  $\underline{M} \in \mathcal{M} \cup \mathcal{M} \subset \mathcal{M} \cup \mathcal{M} \subset \mathcal{M} \cup \mathcal$ Other Equipment Other \$\_\_\_\_\_\_\_(Sum all lines above) Tot. Cap Invest: describe: 1025,000 = 00. \$1025,000 = 00. Note: **Total Amount Financed** 

#### Representations by the Applicant

The Applicant understands and agrees with the Center as follows:

#### Please initial each item where indicated

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 Center, except as otherwise provided by collective bargaining agreements, 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 with 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) ("JPTA") in which the Project is located. Applicant's Initials First Consideration for Employment - 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 Center, except as otherwise provided by collective bargaining agreements, where practicable, the Applicant will first consider persons eligible to participate in JTPA programs who shall be referred by the JPTA Entities for new employment opportunities created as a result of the Project. Applicant's Initials 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 tax 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 by the Applicant and all consultants or subcontractors retained by the Applicant. Applicant's Initials 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. ☐ / Applicant's initials 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, officers, and employees of the Center. No member, officers or employee of the Center has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described: Applicant's Initials Comments: 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. B) Failure of the Applicant to file appropriate Sales Tax and Employment reports will result in the revocation of tax benefits and (Applicant Signature)

(Applicant Signature)

(Print Name)

Title

Company Name

(250 Park Road)

(250 Park Road)

(270 Park Road) require repayment of benefits previously claimed. This Application should be submitted along with the items listed in Exhibit A to: Genesee County Economic Development Center One Mill Street Batavia, New York 14020 (Attn: President & Chief Executive Officer)

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 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 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 Signature)

- hangsake

Trivienian

Kant Para Lance Hospitality LLC

Title

Company Name

Sworn to before me this

201 - hilis

lotary Public

Sharon A. LaFarnara
Notary Public, State of New York
License # 01LA5088008
Qualified in Genesee County
My Commission Expires Nov. 10 2013

# SHORT ENVIRONMENTAL ASSESSMENT FORM for UNLISTED ACTIONS Only PART 1 - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION:	
6.1 1(66E61 E661)	
Municipality  4. PRECISE LOCATION: Street Address and Road Intersections, Pro	County
4. PRECISE LOCATION: Street Address and Road Intersections, Pro	militarity and the state of the
5. IS PROPOSED ACTION: New Expansion Modifi	cation/alteration
6. DESCRIBE PROJECT BRIEFLY:	;
	. •
7. AMOUNT OF LAND AFFECTED:	
7. AMOUNT OF LAND AFFECTED.	
Initially acres Ultin	nately acres
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING C	OR OTHER RESTRICTIONS?
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? (C	noose as many as apply.)  ☐ Park/ Forest/ Open Space ☐ Other (describe)
Residential Industrial Commercial Agriculture	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING	, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL
AGENCY (Federal, State or Local)	If yes, list agency name and permit / approval:
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY V	ALID PERMIT OR APPROVAL?
☐ Yes ☐ No If yes, list agency name and permit / approval:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERM	IT / APPROVAL REQUIRE MODIFICATION?
Yes No I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS	TRUE TO THE REST OF MY KNOW! FDGE
Applicant / Sponsor Name Date	TRUE TO THE DEGT OF MIT RECORDED .
Applicant openior name	
Signature:	

## Complete the Coastal Assessment Form before proceeding with this assessment.

PART I	- IMPACT ASSESSMENT (To be completed by Lead Agency)				
A. DOE	S ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF				
☐ Yes	☐ No L ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative				
declaration	on may be superseded by another involved agency.				
Yes No C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if le					
C1 C1	Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion,				
	drainage or flooding problems? Explain briefly:				
YES					
C2.	Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:				
YES	Production agricultural and an action of the second				
	the black of the black of the standard and analysis of Evaluin briefly				
C3.	Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:				
TES					
C4.	A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:				
YES					
C5.	Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:				
YES	Glowit, Subsequent development, or related adminion medy as so managed and property of the control of the contr				
C6.	Long term, short term, cumulative, or other effects not identified in C1 - C5? Explain briefly:				
YES					
C7.	Other impacts (including changes in use of either quantity or type of energy? Explain briefly:				
YES					
D 14(1)	L THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A				
CRITIC	AL ENVIRONMENTAL AREA (CEA)? If yes, explain briefly:				
☐ Yes					
·	THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? If yes				
E. IS explain:					
Yes					
PART I	II - DETERMINATION OF SIGNIFICANCE (To be completed by Agency) INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise				
	significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring;				
	(c) duration: (d) irreversibility: (e) geographic scope; and (f) magnitude. If necessary, add attachments of reference				
	supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been				
	identified and adequately addressed. If question d of part ii was checked yes, the determination of significance must evaluate the potential impact 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 adverse impacts which MAY occur.				
	Then proceed directly to the FULL EAF and/or prepare a positive declaration.				
	Check the box if you have determined, based on the information and analysis above and any supporting				
	documentation, that the proposed action WILL NOT result in any significant adverse environmental impacts AND				
	provide, on attachments as necessary, the reasons supporting this determination.				
Name of	Lead Agency				
Haille U	a Louis Angolinoy				
Date					
Print or	Type Name and Title of Responsible Officer in Lead Agency				
	Signature of Responsible Officer in Lead Agency Signature of Preparer (if different from responsible officer)				
	Signature of Responsible Officer in Lead Agency Signature of Preparer (if different from responsible officer)				

# To be completed / calculated by GCEDC

)	Type of Pro	oject:	☐ Attraction ☐ Infrastructure		xpansion Vorkforce	□ Retention		
,	Offerings:	⊠ SLB □ RLF / Loa	☐ Bond an ☐ Consu		Grant EZ B.A.	☐ EZ Certification☐ EZ Consulting	□ zcc	
	<u>Estimated</u>	Financial Ass	istance to be prov	ded via GC	EDC partici	oation – subject to GCE	DC Board Appro	oval
	1)	Estimated Sal	es Tax Exemption (8	3%)	\$ 60000	!		
	•		rtgage Tax Exemptio		\$ <u>12813</u>			
	•		perty Tax Abatemer		\$ <u>18810</u>	!		
	4)	Estimated Tot	al Tax Savings (1+3	):	\$ <u>91623</u>	<u> </u>		
	5)	Estimated Tax	c-Exempt Interest Co	st Savings	\$	(via Tax-Exempt Bond)		
	6)	Empire Zone I	Benefits		\$			,
		Grant e or name of grant	()		\$	-	•	
	•	Land Sale Sul	bsidy		\$			
	9)	Estimated total	al Company Savings	(4+5+6+7+8	3): \$ <u>91623</u>			
	10	) Benefited Pr	oject Amount		\$	(the capital investment directly relat	ed to the benefits receive	d)
	11	) Bond Amour	nt		\$	-		
	12	) Mortgage An	nount		\$ <u>10250</u>	000		
	13	) GCEDC Rev	olving Loan Fund		\$	-		
		) Loan Secure urce of loan (			\$	-		
)	15	) Total Amoun	t Financed / Loan F	unds Secure	d \$ <u>10250</u> (12+13+14			·
	Proposed	PILOT structu	ire: Standard PILOT	- 60% abatem	ent on the inc	remental increase in assess	ed value	
Fees t	o be Paid by	the Applicant	<u>:</u>					
throug design realisti to tax	h direct intera lated GCEDC ic capital inves incentives – a	ction between partner entity.	the Applicant and G The GCEDC will co f this project stated .5% fee on the value	iCEDC. A 1 ollect its part in this applic	.25% fee ap <sub>l</sub> icipation fee ation. If bon	Il collect a 1% fee if this to blies if this project was re at the time of closing, band d financing is being enables. (Should the actual cos	terred to GCEDC sed upon the co oled through GCE	rrom a npany provided DC in addition
Genes	Beach, LLP see County E able filing or	\$ 8000 conomic Deve recording fe	elopment Center)	egal services <b>Applicant n</b>	required in nay be requ	connection with the fina uired to pay additional	ncial assistance l out-of-pocket	provided by the <b>expenses and</b>
**Fin	ancial ince	entives are	public informat	ion and w	vill be rele	eased to the media	upon board a	pproval**
				(A	oplicant Sigr	nature)	***	_
				(Pr	int Name)			
				Titl	<u></u> е			
<i>)</i>				Co	 mpany Nam	e		