
APPLICATION FOR FINANCIAL ASSISTANCE

Oneida County Industrial Development Agency

584 Phoenix Drive
Rome, New York 13441-1405
(315) 338-0393 telephone
(315) 338-5694 fax

Shawna M. Papale, Executive Director

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

Please submit the original application and sixteen copies.

All applications must be submitted 10 days prior to meeting.

Griffiss Local Development Corporation Parcel F6B-1b

Name of Applicant

Number (to be provided by the agency)

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 sixteen copies with a check in the amount of \$500.00 made payable to: **Oneida County Industrial Development Agency**, 584 Phoenix Drive, Rome, New York 13441-1405, Attn.: Shawna M. Papale, Executive Director.

All information contained in this application will be treated confidentially, to the extent permitted by law. Be advised that any action brought before the OCIDA is public information. All agenda's for the OCIDA are issued prior to full agency meetings and posted in public domain

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: Griffiss Local Development Corporation

1(b) Principal Address: 584 Phoenix Drive
Rome, NY 13441

1(c) Telephone/Facsimile Numbers: Telephone: (315) 338-0393 Fax: (315) 338-5694

1(d) Email Address: sjdimeo@mvedge.org

1(e) Federal Identification Number: 16-1471446

1(f) Contact Person: Steven J. DiMeo, Authorized Representative

1(g) 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) Not-For-Profit Local Development Corporation

1(h) State of Organization (if applicable) ___New York_____

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:

<u>Name</u>	<u>Home Address</u>	<u>Social Security No.</u>	<u>Percentage of Ownership</u>
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Applicant is a not-for-profit local development corporation. There are no persons or entities which have "equity holdings" in Applicant. A list of the Applicant's officers and directors is annexed hereto as **Exhibit "A"**.

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.

N/A

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

Applicant holds a 99.99% membership interest in Cardinal Griffiss Realty, LLC ("CGR"). Therefore, CGR is a subsidiary of Applicant. CGR's address is 584 Phoenix Drive, Rome NY 13441. Although Applicant is not legally affiliated with Mohawk Valley EDGE, Mohawk Valley EDGE provides staff services to Applicant pursuant to a contract.

Applicant's Counsel and Accountant

3(a). Applicant's Attorney

Name/Title: Joseph E. Saunders , Esq.

Firm: Saunders Kahler, LLP

Address: 185 Genesee Street , Suite 1400
Utica, New York 13501-2194

Telephone/Fax: Telephone: (315) 733-0419 Fax: (315) 724-8522

3(b) Applicant's Accountant

Name/Title: Julianne Cardone
Firm: Mohawk Valley EDGE

Address: 584 Phoenix Drive
Rome, New York 13441

Telephone/Fax: Telephone: (315) 338-0393 Fax: (315) 338-5694

Business Description

4(a) Describe the nature of your business and principal products and/or services. Attach additional sheets if necessary.

The Applicant is the entity primarily responsible for the redevelopment of the former Griffiss Air Force Base, including that portion thereof known as the Griffiss Business and Technology Park. The Applicant is redeveloping the Griffiss Business and Technology Park in accordance with the Master Reuse Strategy for Griffiss AFB prepared by Hamilton, Robinowitz & Alschuler, Inc. (circa 1995).

Part II: Project Information

5(a) Explain your project in detail. This description should include explanation of all activities which will occur due to this project. Attach additional sheets if necessary.

The Applicant is requesting that the Agency undertake a project whereby it assists the Applicant in (i) the acquisition from the United States of America, by the through the Secretary of the Air Force (the "Air Force") of a 1.3+/- acre parcel of land known as "Parcel F6B-1b" located in the central portions of the former Griffiss AFB, and includes portions of the former ST-51 Building 100-Hydrant Fuel System, Building 131 (12,027 sf) and Outdoor Recreation Pavilion B5893 (476 sf), in the City of Rome, County of Oneida, New York, all to be used for the coordination of redevelopment efforts for the realigned Griffiss Air Force Base.

The proposed project is in furtherance of that certain (i) Economic Development Conveyance Agreement (the "EDC Agreement") entered into as of May 25, 2000 by and between the Agency and the United States of America, acting by and through the Secretary of the Air Force (with the concurrence of the Applicant), as the same has been amended from time to time, (ii) Memorandum of Understanding (the "MOU"), by and among the Applicant, the Agency, the County of Oneida, the City of Rome and the Town of Floyd dated January 12, 1999, as amended, and (iii) Service Fee Payment Agreement (the "SFPA") by and among the Applicant, the Agency, the County of Oneida, the City of Rome and the Rome City School District dated as of October 1, 2003.

Reasons for Project

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

The Applicant's corporate purpose and mission is to oversee and promote the redevelopment of the former Griffiss AFB, including that portion thereof known as the Griffiss Business and Technology Park. The proposed project would advance the Applicant's corporate purpose and mission.

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

The Agency's involvement is requested in order to facilitate the implementation of the EDC Agreement, the MOU and/or the SFPA. The Air Force requires that a governmental entity such as the Agency act as the "local redevelopment authority" in connection with this transaction.

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

Pursuant to the EDC Agreement, the Agency is to act as the "local redevelopment authority" to, among other things, accept conveyances from the Air Force of properties at the former Griffiss AFB, including Parcel F6B-1b.

Without the Agency's involvement, Parcel F6B-1b cannot be transferred thereby hindering the Applicant's efforts to effect the economic re-use and re-development of the former Griffiss AFB as contemplated by the EDC Agreement, the MOU and the SFPA.

6(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 **If yes**, please explain briefly.

N/A

Is the proposed project reasonably necessary to preserve the competitive position of the Applicant in its respective industry? [] Yes [] No **If yes**, please explain briefly.

N/A

6(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 [X] No **If yes**, please explain briefly the reason for the move.

6(f) Has the Applicant or any related entity previously secured financial assistance in Oneida County (whether through the Agency, the Empire State Development Corporation, or any other entity) ? [X] Yes [] No

If **yes**, please explain (indicate date of benefit, location of facility and outstanding balance).

Since its formation in 1994, the Applicant has secured financial assistance in terms of its funding from various sources including the Federal Government, the State of New York or one or more of its agencies and/or public benefit corporations.

- 6(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.

In the near future, the Applicant anticipates obtaining a \$620,000 loan and a \$220,000 loan from NBT Bank, National Association. The proceeds of such loans are to be used by the Applicant to refinance the cost of certain renovations recently made by the Applicant to Building 780 and Building 440 in the Griffiss Business and Technology Park.

- 6(h) 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): Redevelopment of that portion of the former Griffiss AFB known as Parcel F6B-1b may involve one (1) or more of the above "type of project" categories.

- 6(i) 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

[X] Other (specify): Redevelopment and re-use of that portion of the former Griffiss AFB known as Parcel F6B-1b may involve specific projects in all of the above categories.

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

Assistance	Estimated Value
[X] Real Property Tax Abatement	\$ ___ unknown _____
[X] Mortgage Tax Exemption	\$ ___ unknown _____
[X] Sales and Use Tax Exemption	\$ ___ unknown _____
[] Issuance by the Agency of Tax Exempt Bonds	\$ _____

Part III: Facility Information

Facility (Physical Information) If multiple locations please provide information on all.

7(a) Street Address of Facility: Parcel F6B-1b is located on Hangar Road, to the south of the Griffiss Airfield in the City of Rome, Oneida County, New York. To date, no street address has been assigned to Parcel F6B-1b.

7(b) City, Town and/or Village: Rome, NY

*(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.)*

7(c) School District: Rome City School District

7(d) Tax Account Number(s): Part of CTM #243.000-1-1.1

Attach copies of the most recent real property tax bills. Include copies for all taxing jurisdiction for the site/ facility that IDA assistance is being sought.

7(e) For what purpose was the facility site most recently used (i.e., light manufacturing, heavy manufacturing, assembly, etc.)?

The building has been vacant for an extended period of time.

7(f) Zoning Classification of location of the project:

Manufacturing complex, airfield and related services (when the property becomes subject to the City of Rome Zoning Ordinance)

- 7(g) Please describe in detail the facility to be acquired, constructed or renovated (including number of buildings, square footage, number of floors, type of construction,) and attach plot plans, photos or renderings, if available. **Please be as specific as possible.**

See attached map. Legal description, survey, and description of the facilities situate on the real property to follow, prior to Final Authorizing Resolution.

- 7(h) Has construction or renovation commenced? Yes No

NA

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: _____

- 7(i) Will the construction or operation of the facility or any activity which will occur at the site 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.

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

Important: please attach Environmental Assessment Form to this Application.

- 7(k) What is the useful life of the facility? Unknown ____ years

- 7(l) Is the site in an Empire Zone? Yes No

If yes, which Empire Zone: _____

Is the business Empire Zone certified at this location: Yes No

Attached a copy of the last Business Annual Report filed. If not certified, explain why not:

Is the business Empire Zone certified at this location: [] Yes [] No

Attached a copy of the last Business Annual Report filed. If not certified, explain why not:

Facility (Legal Information)

8(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: United States of America, acting by and through the Secretary of the Air Force

Address: c/o Air Force Real Property Agency
2261 Hughes Avenue, Suite 121
Lackland AFB, Texas 78236-9821
Attn: Ms. Joan Johnson

Telephone: (210) 395-9488

Balance of Mortgage: N/A

Holder of Mortgage: N/A

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.

See: EDC Agreement

8(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.

8(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.

8(d) Will the title owner of the facility/ property also be the user of the facility?
[] Yes [] No. If no, please explain.

The title holder will be the Agency. The Agency, as lessor, will lease the facility to the Applicant, as lessee.

8(e) Is the Applicant currently a tenant in the facility? [] Yes [X] No

8(f) Are you planning to use the entire proposed facility? [] Yes [X] 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:

<u>Name of Tenant</u>	<u>Floors Occupied</u>	<u>Square Feet Occupied</u>	<u>Nature of Business</u>
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Applicant anticipates that some portion of the facility may be sub-leased and/or sold to third parties.

8(g) Are any of the tenants related to the owner of the facility?

[] Yes [X] No

If yes, please explain

8(h) Will there be any other users other than the applicant to the IDA be utilizing the facility?

[] Yes [X] No

If yes, please explain. Provide detail of the contractual arrangement including any financial exchange for the use of the site or property.

Equipment

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

Unknown at present

9(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. Attach a sheet if needed.

N/A

9(c) What is the useful life of the equipment?

N/A

Part IV: Employment Information

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

Construction Jobs ___ unknown _____

Permanent Jobs to be created by Project at Applicant's facility ___ unknown _____

Permanent Jobs to be retained by Project at Applicant's facility ___ unknown _____

10 (b) What is the applicant entity's current level of employment in Oneida County at the time of application.

At location to be assisted with the requested IDA benefits ___ N/A _____

Other locations in Oneida County ___ N/A _____

Part V: Estimated Project Cost and Financing

11(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	0
Acquisition of Building(s)	0
Renovation Costs	0
New Construction of Buildings	0
Machinery and Equipment (other than furniture costs)	0
Fixtures	0
Installation Costs	0
Fees (other than your own broker and legal fees)	0
Legal Fees (IDA legal fees, Applicant legal fees)	unknown
Architectural/Engineering	0
Interest on Interim Financing	0
Other (specify)	0
Subtotal	unknown

Agency Fee¹ unknown
 Commitment Fee _____

Total Project Cost unknown _____

¹See Attached Fee Schedule (Page 19) for Agency Fee amount to be placed on this line

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

None

Real Estate Taxes

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

Tax Acct #	Part of Current Assessed Value (Land)	Part of Current Assessed Value (Building)	Real Estate Taxes
Part of 243.000-1-1.1	\$7,541,445	\$54,573,935	Exempt

12(b) Address of Receiver of Town and/or Village Taxes:

City of Rome
 Receiver of Taxes, Rome City Hall,
 198 North Washington Street, Rome NY 13440
 Attn: City Treasurer

12(c) Address of Receiver of School Taxes:

Rome City School District
 District Treasurer
 409 Bell Road
 Rome, NY 13440

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

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

Financial Information

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

If yes, please provide details.

13(b) Has the Applicant received a commitment letter for said financing?
[] Yes [] No N/A

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

13(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 Oneida 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 as well as tax benefits received with the action of the OCIDA.
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 Oneida 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.

5. The applicant acknowledges that the OCIDA has disclosed that the actions and activities of the OCIDA are subject to the Public Authorities Accountability Act signed into law January 13, 2006 as Chapter 766 of the 2005 Laws of the State of New York.

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.

Griffiss Local Development Corporation
(Applicant)

By: Steven J. DiMeo
Name: Steven J. DiMeo
Title: Authorized Represented

Date: Oct 11, 2011

If the application has been completed by or in part by other than the person signing this application for the applicant please indicate who and in what capacity:

By: _____

Name: _____

Title: _____

Date: _____

Return the original and sixteen copies of the application with a check in the amount of \$500.00 made payable to: **Oneida County Industrial Development Agency**, 584 Phoenix Drive, Rome, New York 13441-1405, Attn.: Shawna M. Papale, Executive Director.

Agency Fee Schedule

Commitment Fee: \$1,000 – due following the initial inducement but prior to scheduling of the public hearing; this amount is non-refundable if the applicant fails to close on the project before the IDA. Upon closing with the IDA this amount is applied to the legal closing fees.

Bond Fees: ½ of 1% of total bond amount

IDA Agency Fee: PILOT, Mortgage Recording Exemption, Sales Tax Exemption:

- Up to a \$1.0 Million project - \$5,000
- Above \$1.0 Million project up to \$10.0 Million project – ½ of 1% of total project cost.
- Above \$10.0 Million project – ½ of 1% of total project cost up to \$10.0 Million plus incremental increase of ¼ of 1% of total project above \$10.0 Million.

Agency Counsel fee:

Set by Bond/Transaction Counsel based upon the nature and complexity of the transaction. This applies to bond and non-bond transactions (leasebacks, sale-leasebacks, etc).

Agency Counsel fees in Bond and non bond transactions will not normally exceed the greater of (a) 2% of the Bond amount or project costs or (b) a minimum is in customary transactions \$6,500 to \$8,500.

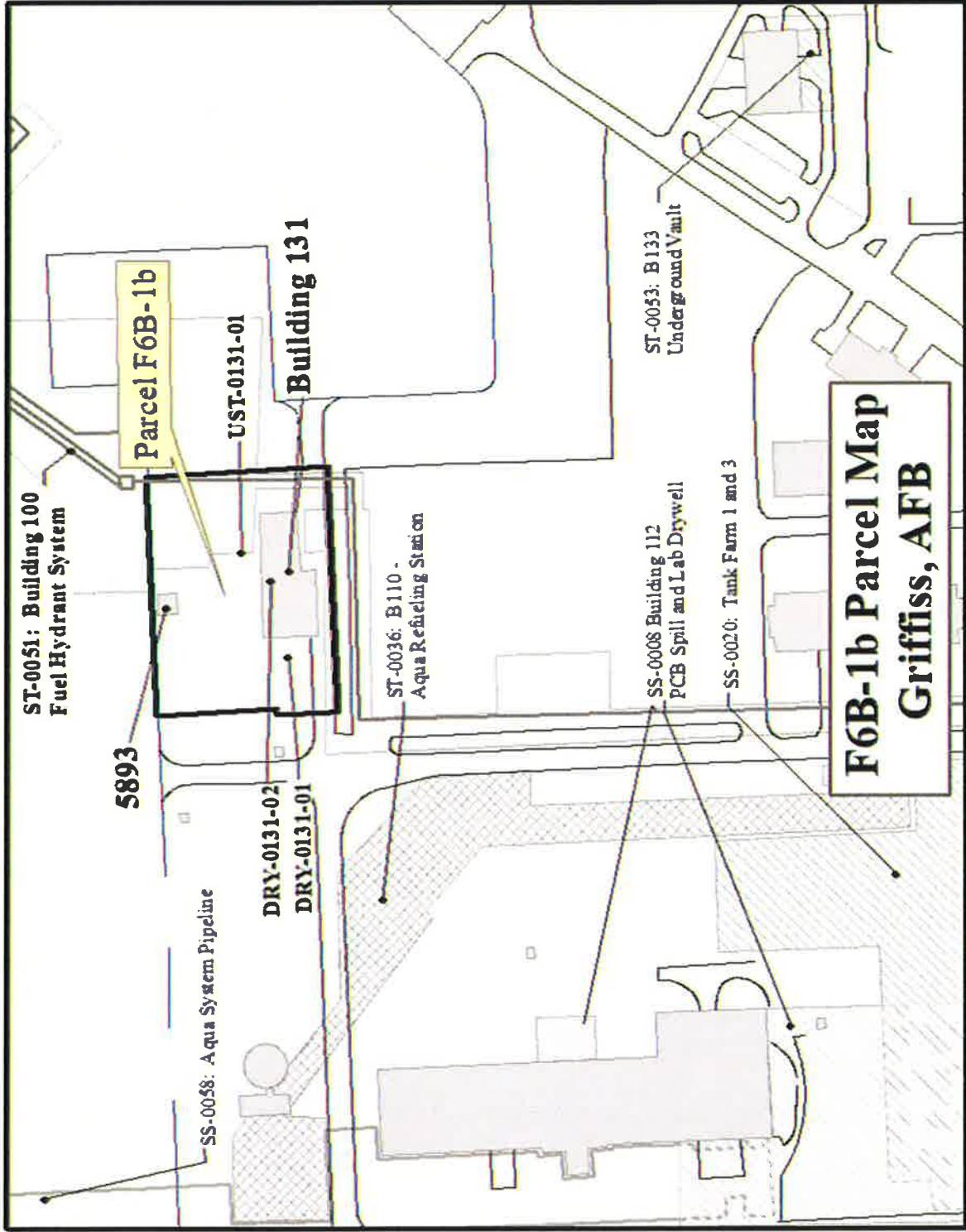
Annual Fee:

For the term in which the property remains in the IDA's name, an annual lease payment is due in the amount of \$500. This amount is due on the anniversary date of the first date of the month in which the IDA documents were executed. For annual fees not paid and delinquent, a late charge of \$50 per month will be levied until such time the fee plus late charges are paid.

Other fees:

For an IDA property which requires follow up action – a 1/8 of one percent of the total reissuance, redemption, new or revised mortgage, refinancing, spreading agreement or other transaction requiring action of the IDA shall be 1/8 of one percent of total project amount for a minimum payment to the IDA of \$500.

Revised 4-26-11



**ONEIDA COUNTY INDUSTRIAL DEVELOPMENT AGENCY
 COST/BENEFIT ANALYSIS
 Required by §859-a(3) of the
 New York General Municipal Law**

Name of Applicant: GLDC

Description of Project: F6B-1B Transfer

Name of All Sublessees or Other Occupants of Facility:

Principals or Parent of Applicant:

Products or Services of Applicant to be produced or carried out at facility:
Redevelopment of the Former GAFB to the GBTP

Estimated Date of Completion of Project:
on going

Type of Financing/ Structure:

<u>_____</u>	Tax-Exempt Financing
<u>_____</u>	Taxable Financing
<u>_____</u>	Sale/ Leaseback
<u>X</u>	Other: Lease Leaseback

Type of Benefits being Sought by Applicant:

<u>_____</u>	Taxable Financing
<u>_____</u>	Tax-Exempt Bonds
<u>X</u>	Sales Tax Exemption on Eligible Expenses Until Completion
<u>X</u>	Mortgage Recording Tax Abatement
<u>X</u>	Real Property Tax Abatement

Project Costs

Land		
Existing Building		
Existing Bldg. Rehab	0	Building 131 if rehabed - 400,000
Demo		
Construction of New Building		
Addition or Expansion		
Engineering/ Architectural Fees		
Equipment		
Legal Fees (Bank, Bond, Transaction, Credit Provider, Trustee)	10000	either or still unknown
Finance Charges (Title Insurance, Environmental Review, Bank Commitment Fee, Appraisal, Etc.)		
Agency Fee		
Other (provide detail) Demo		300,000 if demo'd
TOTAL COST OF PROJECT	10000	

Assistance Provided by the Following:

EDGE Loan:	
MVEDD Loan:	
Grants - Please indicate source & Amount:	
Other Loans - Please indicate source & Amount:	

Company Information

Existing Jobs
Created Jobs (over three years)
Retained Jobs

0
0
0

Average Salary of these Positions

0
0
0

est
based on overall park average
est

Earnings Information for Oneida County

Average Salary of Direct Jobs for Applicant
Average of County Indirect Jobs
Average of Construction Jobs

48000
25000
32000

Note: \$1,000,000 in construction expenditures generates 22 person - years of employment
Construction Person Years of Employment:

0

Calculation of Benefits (3 Year Period)

Direct Jobs

Total Earnings		Revenues	
Created	0	Created	0
Existing	0	Existing	0

Indirect Jobs

Created	0
Existing	0

Construction - only one year

Person Years	0
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TOTALS Calculation of Benefits (3 Year Period)

0

TAXABLE GOODS & SERVICES

	Spending Rate	Expenditures	State & Local Sales Tax Revenues
Direct Jobs			
Created	36%	0	0
Existing	0.36	0	0
Indirect Jobs			
Created	0.36	0	0
Existing	0.36	0	0
Construction - only one year			
Person Years	0.36	0	0
TOTAL TAXABLE GOODS & SERVICES		0	0

Local (3 year) real property tax benefit (assuming 60% of jobs existing and created own a residence) with an average assessment of \$80,000 and the remainder of jobs existing created pay real property taxes through rent based on an average assessment per apartment of \$50,000.

Tax Rate for School District where facility is located: _____

Tax Rate for Municipality where facility is located: _____

Tax Rate for County: _____

Real Property Taxes Paid: 53.53

COSTS:

Real Property Taxes Abated on Improvements Only: Part of larger parcel property in name of IDA from Air Force


Mortgage Tax Abated (1.0%) (40% of the construction and Rehab costs times the NYS & Local Sales tax)

Estimated Sales Tax Abated During Construction Period (8.75%)

NOTE: If there is a tax-exempt financing of all or a portion of the project cost, there is a neutral cost/benefit because of lower interest rates by reason of exclusion of interest from gross income of bondholders for purposes of Federal and State income taxes. Taxable financing carries the same cost/benefit for State Income Tax purposes. Such cost/benefits cannot be quantified.

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 Griffiss Local Development Corporation	2. PROJECT NAME Parcel F6B-1b
3. PROJECT LOCATION: Municipality City of Rome County Oneida	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) Parcel F6B-1b is located on Hangar Road, to the south of the Griffiss Airfield in the City of Rome, Oneida County, New York. To date, no street address has been assigned to Parcel F6B-1b. It includes portions of the former ST-51 Building 100-Hydrant Fuel System, Building 131 (12,027 sf) and Outdoor Recreation Pavilion B5893 (476 sf)	
5. PROPOSED ACTION IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: Conveyance of the parcel designated F6B-1b from the Air Force to Oneida County Industrial Development Agency, who will in turn lease it to the Griffiss Local Development Corporation.	
7. AMOUNT OF LAND AFFECTED: Initially <u>1.3 +/-</u> acres Ultimately <u>1.3 +/-</u> acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? Describe: <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: <u>Griffiss Local Development Corporation</u> Date: <u>Nov 1, 2011</u> Signature: 	

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

PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)

A. DOES 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

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration 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 legible)

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:
 NA

C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:
 NA

C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:
 NA

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:
 NA

C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:
 NA

C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:
 NA

C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:
 NA

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)?
 Yes No If Yes, explain briefly:

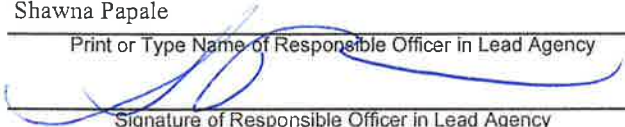
E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
 Yes No If Yes, explain briefly:

PART III - 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 or 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 this 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.

Oneida County Industrial Development Agency <hr/> Name of Lead Agency Shawna Papale <hr/> Print or Type Name of Responsible Officer in Lead Agency  <hr/> Signature of Responsible Officer in Lead Agency	Nov 1, 2011 <hr/> Date Executive Director <hr/> Title of Responsible Officer <hr/> Signature of Preparer (if different from responsible officer)
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