

SQ1 Holdings LLC (SQ1)

Single-member LLC, owned by Lloyd Ploof

Project:

(1) Building Purchase: SQ1 organized to purchase and own facility at 170 Base Road in Oriskany, which will be leased to current tenant, Square One Coatings Services, LLC, which is also solely- owned by Lloyd Ploof.

(2) Equipment Purchase: New boiler and anodizing line, including installation involving all ancillary plumbing, heat exchangers, and electrical upgrades.

(3) Total Investment: **\$493,252**

Employment:

Current: **11 FTE/1 PTE**

New: **6 FTE**

Construction: **1**

Incentives Request: Sale/Leaseback

(1) Manufacturing PILOT based on 10 years of fixed PILOT payments.

Estimated Values: **\$ 52,254**

(2) Mortgage Recording Tax: **\$ 1,575**

(3) Sales Tax Exemption: **\$ 6,562**

SQ1 Breakout

70% of 175K:

175

122.5

33.33%

66.67%

Rates Per 1k of Assessment

Rates

2016 County of Oneida

\$ 9.541036 \$ -

2016 Whitestown

\$ 3.404168 \$ -

15-'16 Oriskany/Libr

\$ 28.5540890 \$ -

Total

\$ 41.4992930 \$ -

Annual Increase

1.02 \$ 42.3292789

Total

Exemption Year		Full	PILOT	Savings
1	\$ 42.329279	\$ 7,407.62	\$ 1,728.45	\$ 5,679.18
2	\$ 43.175864	\$ 7,555.78	\$ 1,763.01	\$ 5,792.76
3	\$ 44.039382	\$ 7,706.89	\$ 1,798.27	\$ 5,908.62
4	\$ 44.920169	\$ 7,861.03	\$ 1,834.24	\$ 6,026.79
5	\$ 45.818573	\$ 8,018.25	\$ 1,870.93	\$ 6,147.33
6	\$ 46.734944	\$ 8,178.62	\$ 3,816.69	\$ 4,361.93
7	\$ 47.669643	\$ 8,342.19	\$ 3,893.02	\$ 4,449.17
8	\$ 48.623036	\$ 8,509.03	\$ 3,970.88	\$ 4,538.15
9	\$ 49.595497	\$ 8,679.21	\$ 4,050.30	\$ 4,628.91
10	\$ 50.587407	\$ 8,852.80	\$ 4,131.30	\$ 4,721.49
Total Due:		\$ 81,111.41	\$ 28,857.1	\$ 52,254.32

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 along with a \$1,000 commitment fee; the \$1,000 commitment fee will be applied to closing fees.

Please submit the original and two (2) copies of the application, SEQR form and Cost/Benefit Analysis with the above fees. Please also deliver an electronic copy of all.

All applications must be submitted at least 10 days prior to meeting.

Lloyd Ploof

Name of Applicant

Number (to be provided by the agency)

Note to Applicant:

The information requested by this application 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 two copies with a check in the amount of \$1500.00 made payable to: **Oneida County Industrial Development Agency (OCIDA)**, 584 Phoenix Drive, Rome, New York 13441-1405, Attn.: Shawna M. Papale, Executive Director. \$1000 will be applied at closing against the IDA legal fees. In addition, an electronic version of the application (signed), SEQR form (signed), and Cost/benefit to spapale@mvedge.org.

Upon the submission of this application to OCIDA, this applicant becomes a public document. Be advised that any action brought before the OCIDA is public information. All agendas for OCIDA are issued prior to full agency meetings and posted in public domain. If there is information that the applicant feels is proprietary please identify as such and that information will be treated confidentially to the extent permitted by law.

By signing and submitting this Application, the Applicant acknowledges that it received a copy of the Uniform Tax Exemption Policy and the Oneida County IDA Penalty for Failure to Meet Employment Levels as 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. You will receive an engagement letter from the OCIDA legal counsel. You will be asked to sign the engagement letter acknowledging you will be responsible for all legal fees of OCIDA legal counsel and that you understand the process. Should you not close and legal services have been rendered by the OCIDA legal counsel, your company will be responsible for those costs.

If your project requires a public hearing, a representative of the applicant is required to be present. A date will be coordinated by the OCIDA legal counsel.

If you have questions how to calculate your company's IDA application fee please consult with the Memorandum to Companies Sale – Leaseback Transactions or please contact the IDA Executive Director.

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: Lloyd Ploof (SQ1 Holdings, LLC)

1(b) Principal Address: 8693 Maple Lane, Lee Center, NY 13363

1(c) Telephone/Facsimile Numbers: 315-335-2219

1(d) Email Address: lloyd@sq1plating.com

1(e) Federal Identification Number: 103-50-1523 SSN EIN 81-3686520

1(f) Contact Person: Lloyd Ploof

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
- Single-Member LLC (name and EIN below):

Name: Lloyd Ploof

EIN: 81-3686520

- DISC
- Other(specify) _____

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>Address</u>	<u>Percentage of Ownership</u>
Lloyd Ploof	8693 Maple Lane, Lee Center, NY 13363	100%

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.

Square One Coating Systems, LLC Owner, 100%

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:

NO

Applicant's Counsel and Accountant

3(a) Applicant's Attorney

Name/Title: Cecilia Fagan Polidori
Firm: _____
Address: 109 Park Ave., Herkimer, NY
Telephone/Fax: 315-866-2855
Email: _____

3(b) Applicant's Accountant

Name/Title: Ryan Siepiola
Firm: Feldman CPA
Address: 246 Genesee St., Utica, NY
Telephone/Fax: 315-732-5138
Email: _____

Business Description

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

Metal Finishing. Plating and Painting of manufactured parts for local and regional companies. Customers include, but are not limited to: Remington Arms, Bartell, Riverhawk, Indium, Manth Brownell, Bitzer Scroll, Ram Fabricating, RDR, RTD.

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.

Purchase of existing building that we are currently leasing, purchase and installation of a boiler, and purchase and installation of an additional finishing line (anodizing).

We are currently leasing the building for \$3000/month. Purchasing the building assures that we will stay in Oneida County and have guarantee of long term access of the site. It also reduces our monthly costs by more than \$700. This helps keep 12+ people fully employed currently and at least 5 others in the future.

Purchase and installation of the boiler accomplishes a couple things: It lowers our monthly operating costs by about \$2000 by eliminating at least 1/2 the electrical demand we now have. It allows us to install an additional production line, which we might otherwise have trouble installing because of currently being at near maximum electrical usage at the facility. The lower costs keep 1-2 people employed, and the addition of another finishing line will necessitate the hiring of 2-5 new people.

Reasons for Project

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

- Lower operating costs.
- Guarantee of not having to move our facility. Current owner has a strong desire to sell to someone.
- Reduction on dependency on electricity.
- Ability to expand production.
- Keep workers employed and hire additional workers.

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

Need financial help to undertake project. It is a relatively large project and we would probably not be able to do it without grants or loans.

6(c) 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 or No

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:

How will the Applicant's plans be affected or scaled back if Agency approval is not granted?

Will only purchase building at this time, and may not be able to do the other projects for many years.

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.

But, the project will assure that we don't move the facility out of Oneida County.

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 No

If yes, is the proposed project reasonably necessary to preserve the competitive position of the Applicant in its respective industry? Yes No

If yes, please provide a statement and evidence supporting the same. Include the name of all taxing jurisdictions in which the abandoned facility or plant lies, and whether Applicant has had any discussions with said taxing jurisdictions regarding the abandonment. Please provide as much detail as possible.

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) ? Yes No

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

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.

6(h) Check all categories best describing the type of project for all end users at project site (you may check more than one; if checking more than one indicate percentage of square footage the use represents):

- Manufacturing
- Industrial Assembly or Service
- Back office operations
- Research and Development
- Technology/Cybersecurity
- Warehousing
- Commercial or Recreational
- Retail
- Residential housing (specify) _____
- Pollution Control (specify) _____
- Environmental (e.g., Brownfield) (specify) _____
- Other (specify) _____

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 or _____ part of building
- Construction of a new building
- Acquisition of machinery and/or equipment
- Installation of machinery and/or equipment
- Other (specify) _____

6(j) Please indicate the financial assistance you are requesting of the Agency, and provide the estimated value of said assistance. Attach a sheet labeled Annual PILOT that shows the annual utilization of the Real Property Tax Abatement by year and by taxing jurisdiction.

Assistance	Estimated Value
<input checked="" type="checkbox"/> Real Property Tax Abatement	\$ <u>52,254</u>
<input checked="" type="checkbox"/> Mortgage Tax Exemption	\$ <u>1575</u>
Amount of mortgage: \$ <u>157500</u>	
<input checked="" type="checkbox"/> Sales and Use Tax Exemption **	\$ <u>6562</u>
<input type="checkbox"/> Issuance by the Agency of Tax Exempt Bonds	\$ _____

**** 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 will include a covenant by the Applicant that the estimate, above, represents the maximum amount of sales and use tax benefit currently authorized by the Agency 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.**

Part III: Facility Information (if project that you are applying for is a housing project please also complete questions 7(m) through 7(q))

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

7(a) Street Address of Facility:

170 Base Road

7(b) City, Town and/or Village (list ALL incorporated municipalities):

Oriskany (Village of Whitestown)

7(c) School District:

Oriskany

7(d) Tax Map Number(s):

290.000-2-10

Attach copies of the most recent real property tax bills. Include copies for all taxing jurisdictions 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.)?

Manufacturing

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

Commercial

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. If there are infrastructure improvements (water, sewer, gas, electrical, etc.) please provide details along with who will carry out those improvements and who will fund them. ***Please be as specific as possible.***

14,000 SF, 47 year old, one story steel, concrete, and wood light manufacturing/office structure on slab on 5.5 acres with parking lot and 2 loading docks.

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

If yes, please describe the work in detail that has been undertaken to date, 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.

Has the Project received site plan approval from the planning department?

Yes No N/A

If Yes, please provide the Agency with a copy of the planning department approval along with the related SEQR determination. If no, please provide the status of approval:

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? 80 _____ years

7(l) Is the site in a former Empire Zone? Yes No

If yes, which Empire Zone: _____

Is project located in a Federal HUB Zone or distressed area: Yes No
Provide detail.

Part IV: Housing Project Questionnaire

Complete the following questions only if your project is a Housing Project. Please reference the Oneida County Industrial Development Agency Uniform Tax Exemption and Agency Benefits Policy Market Rate Rental Housing Development Initiatives. (Add additional pages as needed).

7(m) Describe the housing project to be constructed or renovated in detail (type of housing, number of units, etc.):

7 (n) Describe how you will change the current use of the facility or property being utilized for the project. To assist the IDA in their determination of an eligible vacant urban infill site project please provide an extensive explanation as well as photos of what is being removed or replaced with the new construction.

7 (o) Will the project have any impact on the existing infrastructure or upgrades to the current infrastructure (water, sewer, electrical, gas, etc.)? If yes please provide detail and who you are working with at the applicable organization.

7 (p) If your project is a multi-use facility please provide details of the project, project square footage breakdown of non-housing to housing usage, detail the job creation and retention associated with the non-housing component.

7 (q) Does the project provide a community benefit? If yes provide detail substantiating (reference the IDA policy).

Part V: Retail Project Questionnaire

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.

- A. Will any portion of the project (including that portion of the cost 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?

Yes or No. If the answer is yes, please continue. If no, proceed to next section.

For purposes of Question A, 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.

- B. What percentage of the cost of the Project will be expended on such facilities or property primarily used in making sales of goods or services to customers who personally visit the project? _____%. **If the answer is less than 33% do not complete the remainder of the retail determination and proceed to next section.**

If the answer to A is Yes AND the answer to Question B is greater than 33.33%, indicate which of the following questions below apply to the project:

1. Will the project be operated by a not-for-profit corporation Yes or No.

2. Is the Project location or facility likely to attract a significant number of visitors from outside Oneida County?

Yes or No

If yes, please provide a third party market analysis or other documentation supporting your response.

3. Is the predominant purpose of the project to make available goods or services which would not, but for the project, be reasonably accessible to the residents of the municipality within which the proposed project would be located because of a lack of reasonably accessible retail trade facilities offering such goods or services?

Yes or No

If yes, please provide a third party market analysis that demonstrates that a majority of the project's customers are expected to come from outside of Oneida County and the project will not directly compete with existing businesses located in Oneida County.

4. Will the project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York?

Yes or No.

If yes, explain _____

5. Is the project located in a Highly Distressed Area? Yes or No

Part VI: 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: Jake Matthew Property, LLC

Address: 9634 River Rd., Marcy, NY 13403

Telephone: 315-235-3412

Balance of Mortgage: _____

Holder of Mortgage: _____

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.

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.

Lloyd Ploof owns 100% of the real estate company, SQ1 Holdings, LLC and 100% of the manufacturing company Square One Coating Systems, LLC.

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

8(f) Are you planning to use the entire proposed facility?
 Yes 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, including the square footage the Applicant will occupy:

<u>Name of Tenant</u>	<u>Floors Occupied</u>	<u>Square Feet Occupied</u>	<u>Nature of Business</u>
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8(g) Are any of the tenants related to the owner of the facility?
 Yes No
If yes, please explain.

8(h) Will there be any other users utilizing the facility?
 Yes No
If yes, please explain. Provide detail of the contractual arrangement including any financial exchange for the use of the site or property.

Part VII: Equipment

9(a) List the principal items or categories of equipment to be acquired as part of the project. If you are requesting sales tax exemption it is important to be as detailed as possible. (If a complete list is not available at time of application, as soon as one is available but prior to final authorizing resolution, please submit a detailed inventory of said equipment to be covered.) Attach a sheet if needed.

Boiler and all ancillary equipment, including, but not limited to: purchase, installation, piping, electrical, valves, solenoids, heat exchangers, controllers, pumps, ducts, etc.

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.
Anodizing line: Tanks plumbing electrical large DC rectifier bussing large chiller

9(c) What is the useful life of the equipment? 25 years

Part VIII: Employment Information

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

Construction Jobs ¹ _____

10(b) Estimate how many jobs will be created as a result of this project.

	Current # of jobs at proposed project location or to be relocated at project location	IF FINANCIAL ASSISTANCE IS GRANTED – project the number of FTE and PTE jobs to be RETAINED	IF FINANCIAL ASSISTANCE IS GRANTED – project the number of FTE and PTE jobs to be CREATED upon THREE Years after Project completion	Estimate number of residents of the Labor Market Area in which the Project is located that will fill the FTE and PTE jobs to be created upon THREE Years after Project Completion **
Full time (FTE)	11	11	6	6
Part Time (PTE)	1	1	0	0
Total ***	12	12	6	6

**For purposes of this question, please estimate the number of FTE and PTE jobs that will be filled, as indicated in the third column, by residents of the Labor Market Area, in the fourth column. The Labor Market Area includes the Counties of Oneida, Lewis, Herkimer, Madison and

*** 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 THREE year time period following Project completion. An FTE works 35 hours or more per week. Agency staff converts PTE jobs into FTE jobs by dividing the number of PTE jobs by two (2).

Salary and Fringe Benefits for Jobs to be Retained and Created:

Category of Jobs to be Retained and Created	Average Salary or Range of Salary	Average Fringe Benefits or Range of Fringe Benefits
Management	\$25,000-50,000	\$3500-5500
Administrative	\$25,000-35,000	\$2500-4500
Production	\$25,000-35,000	\$2500-4500
Independent Contractor	N/A	
Other		

Employment at other locations in Oneida County:

	Address	Address	Address
Full time			
Part Time			
Total			

Will any of the facilities described above be closed or subject to reduced activity?

Yes or No

**** If any of the facilities described above are located within the State of New York and you answered Yes to the question above you must complete Part I Question 6(e) of this Application.**

**** Please 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.**

10(c) Please list the NIC codes for the jobs affiliated with this project.

3471

Part IX: Estimated Project Cost and Financing

11(a) List the costs necessary for the construction, acquisition or renovation of the facility.

Acquisition of Land	_____
Acquisition of Building(s)	\$210,000
Renovation Costs	_____
New Construction of Buildings	_____
Machinery and Equipment (other than furniture costs)	\$206514
Fixtures	_____
Installation Costs	\$47029
Fees (other than your own broker and legal fees)	\$7500
Legal Fees (IDA legal fees, Applicant legal fees)	\$12,000
Architectural/Engineering	\$5209
Interest on Interim Financing	_____
Other (specify)	_____
Subtotal	\$488252
Agency Fee¹	\$5000
Total Project Cost	\$493252

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

11(b) Sources of Funds for Project Costs:

Bank Financing:	\$ 350,657 (75% of equip, bldg)
Equity (excluding equity that is attributed to grants/tax credits)	\$ 45,000
Tax Exempt Bond Issuance (if applicable)	\$ _____
Taxable Bond Issuance (if applicable)	\$ _____
Public Sources (Include sum total of all state and federal grants and tax credits)	\$ _____
Identify each state and federal grant/credit:	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Sources of Funds for Project Costs:	\$ _____

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 Map #	Current Assessed Value (Land)	Current Assessed Value (Building)	Real Estate Taxes
290.000-2-10	\$ 41,100	\$133,900 TTL\$175,000	\$7265

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

8539 Clark Mills Road, Whitesboro, NY 13492

12(c) Address of Receiver of School Taxes:

8539 Clark Mills Road, Whitesboro, NY 13492

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

If yes, please provide details.

Preliminary contact with both NBT Bank in Rome, NY and Adirondack Bank in Utica, NY.

13(b) Has the Applicant received a commitment letter for said financing?

Yes No

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. As you begin completing the form and have questions, please call the IDA office.

REPRESENTATIONS AND CERTIFICATION BY APPLICANT

The undersigned requests that this Application be submitted for review to the Oneida County Industrial Development Agency (the "Agency") and its 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 Agency. Failure to provide such reports as provided in the transaction documents will be an Event of Default under the Lease (or Leaseback) Agreement between the Agency and Applicant. In addition, a Notice of Failure to provide the Agency with an Employment Report may be reported to Agency board members, said report being an agenda item subject to the Open Meetings Law.
- 3. Absence of Conflict of Interest.** The Applicant has consulted the Agency website of the list of the Agency 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 (if none, state "none"):
- 4. Hold Harmless.** Applicant hereby releases the Agency and its members, officers, servants, agents and employees 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 Agency has disclosed that the actions and activities of the Agency 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.
6. The Applicant acknowledges that the Agency is subject to New York State's Freedom of Information Law (FOIL). Applicant understands that all Project information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.
7. The Applicant acknowledges that it has been provided with a copy of the Agency's recapture policy (the "Recapture Policy"). The Applicant covenants and agrees that it fully understands that the Recapture Policy is applicable to the Project that is the subject of this Application, and that the Agency will implement the Recapture Policy if and when it is so required to do so. The Applicant further covenants and agrees that its Project is potentially subject to termination of Agency financial assistance and/or recapture of Agency financial assistance so provided and/or previously granted.
8. The Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if Financial Assistance is provided for the proposed Project:

§ 862. Restrictions on funds of the agency. (1) No funds of the agency shall be used in respect of any project if the completion thereof would 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, provided, however, that neither restriction shall apply if the agency shall determine on the basis of the application before it that the project is reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the state or is reasonably necessary to preserve the competitive position of the project occupant in its respective industry.

9. The Applicant confirms and acknowledges that the owner, occupant, or operator receiving Financial Assistance for the proposed Project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations.
10. The Applicant confirms and acknowledges that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of any Financial Assistance and the reimbursement of an amount equal to all or part of any tax exemption claimed by reason of the Agency's involvement the Project.
11. The Applicant confirms and hereby acknowledges that as of the date of this Application, the Applicant is in substantial compliance with all provisions of Article 18-A of the New York General Municipal Law, including, but not limited to, the provision of Section 859-a and Section 862(1) of the New York General Municipal Law.
12. 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.

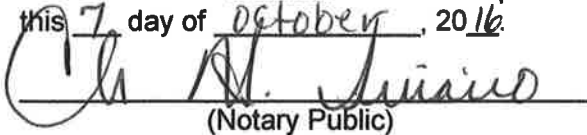
STATE OF NEW YORK)
COUNTY OF ONEIDA) ss.:

LLOYD PLOOF, being first duly sworn, deposes and says:

1. That I am the PRESIDENT (Corporate Office) of SQUARE ONE COATING SYSTEMS, LLC (Applicant) and that I am duly authorized on behalf of the Applicant to bind the Applicant.
2. That I have read the attached Application, I know the contents thereof, and that to the best of my knowledge and belief, this Application and the contents of this Application are true, accurate and complete.


(Signature of Officer)

Subscribed and affirmed to me under penalties of perjury
this 7 day of October, 2016.


(Notary Public)

CHRIS H. SIRIANO
Notary Public, State of New York
No. 01SI6196843
Qualified in Oneida County
My Commission Expires Nov. 17, 2016

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 application and two copies with a check in the amount of \$1500.00 made payable to: **Oneida County Industrial Development Agency (OCIDA)**, 584 Phoenix Drive, Rome, New York 13441-1405, Attn.: Shawna M. Papale, Executive Director. \$1000 will be applied at closing against the IDA closing fee. In addition, please send an electronic version of the application (signed), SEQR form (signed), and Cost/benefit to spapale@mvedge.org.

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 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.

Transaction Counsel/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).

Transaction Counsel/Agency Counsel fees for bond transactions typically will not exceed 2% of the bond amount or project costs. Transaction Counsel/Agency Counsel fees for a sale-leaseback/lease-leaseback transaction are typically \$8,500 to \$10,000 if no commercial financing is involved or \$10,000 to \$12,000 if commercial financing is involved. You will receive an engagement letter with a quote based upon the scope of your project.

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. The first payment is due at closing and subsequent payments are due each January 1. 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:

If Applicant requests the IDA enter into subsequent transactions following closing (i.e., a facility refinance), the IDA will charge a closing fee equal to 1/8 of one percent of the total reissuance, redemption, new or revised mortgage, refinancing, spreading agreement or other transaction with a minimum payment due of \$500. Applicant will also be responsible to pay any legal fees the IDA incurs in connection with said transaction.

Revised 7-12-16

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

**TO BE ATTACHED TO AND MADE PART OF APPLICATION TO THE
OCIDA**

NAME OF APPLICANT: Lloyd Ploof

DESCRIPTION OF PROJECT: Purchase Building/ Expand

**NAME OF ALL SUBLESSEES OR
OTHER OCCUPANTS OF FACILITY:** N/A

PRINCIPALS OR PARENT OF APPLICANT: N/A

**PRINCIPALS OF ANY SUBLESSEE
OR OCCUPANT:** N/A

PRODUCT/SERVICES: Metal Finishing

ESTIMATED DATE OF COMPLETION OF PROJECT: Jun. 2017

TYPE OF FINANCING/STRUCTURE:

- Tax-Exempt Financing
- Taxable Financing
- Sale/Leaseback
- Other _____

TYPES OF BENEFITS RECEIVED:

- ____ Taxable Financing
- ____ Tax-Exempt Bonds
- ____ Sales Tax Until Completion Date
- ____ Mortgage Tax Abatement
- ____ Real Property Tax Abatement

PROJECT COSTS – CAPITAL INVESTMENT

- Land _____ Cost per Acre _____
- Existing Building _____
- Rehab of Existing Building _____
- Construction of New Building _____ Cost per Sq Ft. _____
- Addition or Expansion _____ Cost per Sq Ft. _____
- Engineering and Architectural Fees _____
- Equipment _____ Cost per Sq Ft. _____
- Legal Fees
 Bank, Bond, Transaction, Company,
 Credit Provider, Trustee _____
- Finance Charges
 Title Insurance, Environmental
 Review, Bank Commitment Fee,
 Appraisals, etc. _____
- Agency Fee _____

TOTAL COST OF PROJECT _____

- Job Revolving Fund Loan _____
- Other Grants or Loans _____

COMPANY INFORMATION

Existing Jobs	<u>11</u>
Created Jobs (Year 3)	<u>6</u>
Retained Jobs	<u>11</u>

EARNINGS INFORMATION

County Spec Average Direct Jobs	<u>\$23,270</u>
County Spec Average Indirect Jobs	<u>\$25,000</u>
County Spec Average Construction Jobs	<u>\$32,000</u>

MULTIPLIER INFORMATION

Indirect Job Rate 2.5

Sales Tax Rate (8.75%)

Mortgage Tax Rate (1%)

Assumed Real Property Tax Rate Per Thousand for Municipality where project is located: \$41.50

Assumed Real Property Assessment of facility where IDA assistance is being sought: \$175,000

Assumed NYS Income Tax rate on earnings 4.25%: _____

Note: \$1,000,000 in construction expenditures generates 15 person – years of employment

CALCULATION OF BENEFITS (3 – YEAR PERIOD)

NYS PERSONAL INCOME TAX RECEIVED

	<u>Total Earnings</u>	<u>Revenues</u>
Direct Jobs		
Created	_____	_____
Existing	_____	_____
Indirect Jobs		
Created	_____	_____
Existing	_____	_____
Construction		
Person Years	_____	_____
TOTALS	_____	_____

TAXABLE GOODS AND SERVICES

	<u>Spending Rate</u>	<u>Expenditures</u>	<u>State and Local Sales Tax Revenues</u> <small>(Expenditure Column x .0625)</small>
Direct Jobs			
Created <small>(total earnings for direct jobs created x .36)</small>	36.0%	_____	_____
Existing <small>(total earnings for direct jobs existing x .36)</small>	36.0%	_____	_____
Indirect Jobs			
Created <small>(total earnings for indirect jobs created x .36)</small>	36.0%	_____	_____
Existing <small>(total earnings for indirect jobs existing x .36)</small>	36.0%	_____	_____
Construction			
Person yrs. <small>(total earnings for construction person yrs. x .36)</small>	36.0%	_____	_____
Totals	_____	_____	_____

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

Real Property Taxes Paid \$ _____

COSTS

Real Property Taxes Abated on Improvements
Only (3-year period) \$ _____

Mortgage Tax Abated \$ _____

Estimated Sales Tax Abated During Construction Period
\$ _____

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.

Please complete either a Short Form EAF or a Long Form EAF and consult with your project engineer or architect if you have any questions which form is appropriate for your project.

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: Purchase of Building at 170 Base Rd., Oriskany. Installation of Boiler and additional production line.			
Project Location (describe, and attach a location map): 170 Base Road, Oriskany, NY			
Brief Description of Proposed Action: Currently leasing building that Square One Coating Systems, LLC is in. Want to buy. Also, want to install boiler to heat finishing solutions instead of electric heaters currently in use. Currently pay over \$4000 month in electric. Can reduce that by more than 1/2. Lastly, purchase and install an anodizing on aluminum line as 4th production line.			
Name of Applicant or Sponsor: Lloyd Ploof-Square One Coating Systems, LLC- SQ1 Holdings, LLC		Telephone: 315-790-5921 E-Mail: lloyd@sq1plating.com	
Address: 8693 Maple Lane			
City/PO: Lee Center		State: NY	Zip Code: 13363
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		5.5 acres	
b. Total acreage to be physically disturbed?		0 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		5.5 acres	
4. Check all land uses that occur on, adjoining and near the proposed action. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: The boiler will be brand new and energy efficient. _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ Building already connects to MV Water and Oneida Co. POTW	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES Existing building. No increase in Storm Water discharge from that which was here for last 30 years. _____			

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____ _____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ Current owner had some remediation done when he purchased the building. Have requested Phase I and Phase II documents from current owner. _____ _____</p>	<p>NO</p> <p><input type="checkbox"/></p>	<p>YES</p> <p><input checked="" type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>LLOYD FLOOR</u> Date: <u>10-7-16</u> Signature: <u><i>Cheryl Floor</i></u></p>		