

Section I: Applicant Information

A) Applicant Information – Company Receiving Benefit:

Project Name: 17 Long Avenue Building Renovation

Applicant Name: Iskalo 17 Long LLC

Applicant Address: 5166 Main Street

Applicant Address 2: _____

Applicant City: Williamsville Applicant State: NY Applicant Zip: 14221

Phone: (716) 633-2096 Fax: (716) 633-5776

Website: www.iskalo.com Email: dchiazza@iskalo.com

Federal ID #: [REDACTED] NAICS: 531120, 531110

State and Year or Incorporation/Organization: NYS - 2017

Will a Real Estate Holding Company be utilized to own the Project property/facility? Yes No

What is the name of the Real Estate Holding Company: Iskalo 17 Long LLC

Federal ID #: see above

State and Year or Incorporation/Organization: see above

List of stockholders members, or partners of Real Estate Holding Company

Paul B. Iskalo, Member 95%; David Chiazza, Member 5%

B) Individual Completing Application:

Name: David Chiazza

Title: Executive Vice President

Address: Same as above

Address 2: _____

City: Same as above State: Same as above Zip: Same as above

Phone: Same as above

Email: Same as above

C) Company Contact (if different from individual completing application)

Name: same as above
Title: _____
Address: _____
Address 2 : _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

D) Company Counsel:

Name of Attorney: Terrence M. Gilbride, Esq.
Firm Name: Hodgson Russ LLP
Address: 140 Pearl Street, Suite 100
Address 2 : _____
City: Buffalo State: NY Zip: 14202
Phone: (716) 848-1236 Fax: _____
Email: tgilbrid@hodgsonruss.com

E) Assistance being requested of the Agency (select all that apply):

- 1. Exemption from Sales Tax
- 2. Exemption from Mortgage Tax
- 3. Exemption from Real Property Tax (PILOT on value-added improvements)
- 4. Tax Exempt Financing *

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

F) Business Organization (check appropriate category)

- | | | | |
|---------------------|--------------------------|---------------------------|-------------------------------------|
| Corporation | <input type="checkbox"/> | Partnership | <input type="checkbox"/> |
| Public Corporation | <input type="checkbox"/> | Joint Venture | <input type="checkbox"/> |
| Sole Proprietorship | <input type="checkbox"/> | Limited Liability Company | <input checked="" type="checkbox"/> |

Type of Business: Iskalo 17 Long LLC is a single purpose entity that was formed to own the 17 Long Ave. property. Iskalo Development Corp. is a real estate development company which acts as the Manager for Iskalo 17 Long LLC.

Type of Ownership: Iskalo 17 Long LLC is a limited liability company

Year Established: 2017

State of Organization: NY

G) List all stockholders, members, partners with % of ownership greater than 20%:

Name	% of ownership
Paul B. Iskalo	[REDACTED]
David Chiazza	[REDACTED]

H) Applicant Business Description

Describe in detail company background, products, customers, good and services. Description is critical in determining eligibility: Iskalo Development Corp. is a real estate development company formed in 1986. Iskalo Development is a full-service development company that undertakes design, construction management, leasing and property management for its own account. Properties developed by Iskalo Development are typically owned by single-purpose entites (LLCs) that are managed by Iskalo Development. The Iskalo Development portfolio consists of properties development for a variety of uses including professional office, corporate office, light industrial, retail, apartments and hospitality. The properties comprising the Iskalo portfolio are all located in WNY. The tenant portfolio consists of local and national companies. Iskalo contracts with primarily local companies for the performance of construction and property maintenance services. With respect to 17 Long Ave, Iskalo proposes to complete the redevelopment (i.e. adaptive re-use) of the former supermarket commenced by the prior owner 30+ years ago to a professional/medical building. There are three existing medical tenants in the building however, the building has had sustained vacancy of 40% for many years and has had no reinvestment in thirty years.

Responses below are for Iskalo Development Corp.

Estimated % of sales within County: 100%

Estimated % of sales outside County but within New York State 0%

Estimated % of sales outside New York State but within the U.S 0%

Estimated % of sales outside of U.S 0%

(Percentage to equal 100%)

I) What percentage of your total annual supplies, raw materials and vendor services are purchased from firms in the Town of Hamburg? Include list of vendors, raw material suppliers and percentages for each. Provide supporting documentation including estimated percentage of local purchases. 80% +/-

*the Local Labor Area is defined in the Local Labor Policy attachment (**LIVE LINK TO POLICY**)

Section II: Project Description and Details

A) Project Location:

Municipality or Municipalities of current operations: Village of Hamburg

Will the Proposed Project be located within the Municipality, or Municipalities, identified above?

Yes No

In which municipality will the proposed project be located: same

Provide the property address of the proposed project:

Address : 17 Long Avenue, Hamburg NY

Will the completion of the Project result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state OR in the abandonment of one or more plants or facilities of the project occupant located within the State?

Yes No

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

Yes No

If Yes, you will need to complete **Section II (Q)** and **Section IV** of this Application.

SBL Number for Property upon which proposed project will be located: 109.09-6-24

What are the current real estate taxes on the proposed project site:

Town/Cty - \$12,901.87; Village - 14,763.59; School - \$26,253.64 (Combined Total \$53,263.64)

Assessed value of Land \$123,400 AV (\$301k FMV)

Assessed value of building(s) \$537,000 AV \$1.683m FMV

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

Land: \$ _____ Building: \$ _____

**If available, please include a copy of current tax bill.

Are Real Property Taxes current? Yes No. If no, please explain _____

Town/City/Village of Project Site: Hamburg School District of Project Site: Hamburg

Does the applicant or any related entity currently hold fee title to the Project site? Yes No

If no, indicate name of present owner of the project site: _____

Does applicant or related entity have an option/contract to purchase the Project site: Yes No

Describe the present use of the proposed project site: **Present use is medical office space. 40% of the building has had sustained vacancy. A portion of the vacant space is "raw", unimproved space.**

B) Please provide narrative of project and the purpose of the proposed project (new build, renovations, and/or equipment purchases). Identify specific uses occurring within the project. Describe any and all tenants and any/all end users. (This information is critical in determining project eligibility)

The project entails the comprehensive renovation of the existing 28,890 square foot building. The original construction of the building dates back approximately 90 years to its original use was manufacturing. The building was later converted for use as a supermarket. In the late 1980s, the prior owner to Iskalo undertook a conversion (i.e. adaptive re-use) of the building to a multi-tenant medical office building for the purpose of attracting complementary medical practices to better serve the Village and Town of Hamburg and surrounding communities. However, the building was never fully-occupied and a portion of the interior of the building was not improved and remains unfinished "raw" space.

There has been little, if any, reinvestment in the building since 1990. The building's appearance is outdated and 40% of its interior space has been vacant for many years (pre-dating purchase by Iskalo). Given the surge of redevelopment in the Village over the past 15 +/- years and the subject property's adjacency to historic Main Street, re-investment in the building is necessary (and overdue).

Iskalo's assessment of the market is that demand for quality medical/professional space exists but the 17 Long Ave. building does not meet the requirements of modern practices due to the obsolescence of the building. In addition to the raw, unfinished interior space, the exterior as well as the existing interior finishes in the building are sorely outdated and large portions of the building have minimal, if any, access to natural light which modern medical office space seeks to have. Thus, scope of improvements to be made to the building are comprehensive and include (a) complete exterior renovation including enlargement of existing windows and the addition of new windows to provide more natural light to the tenant suites, (b) replacement of the roof (which will require abatement of asbestos), (c) replacement of most of the mechanical units serving the building which are well-beyond their useful life, and (d) refinishing 100% of the building's interior common areas and existing vacant office suites.

Once complete, Iskalo would seek to lease the vacant space in the building for medical office and complementary medical related services in furtherance (and in completion of) the re-use plan for the building conceived more than 30 years ago.

Describe the reasons why the Agency's Financial Assistance is necessary, and how the Financial Assistance enables the company to undertake the Project to facilitate investment, job creation and /or job retention.

The cost of the proposed comprehensive building, together with the acquisition cost of the property, will approach \$200 per square foot of building. The resultant Tenant Occupancy Cost per square foot (i.e. Base Rent, RE Taxes and Operating Expenses) necessary to support this investment would be cost prohibitive but for the benefits that would

accrue from the assistance that would be provided by the Hamburg IDA via sales tax exemption on materials used in construction, mortgage tax and project-eligible PILOT. In addition to enabling the project to proceed as proposed, the assistance additional benefits to be derived from the Hamburg IDA's assistance for the project include (a) the contribution of the renovated building to the architectural/community character of the neighborhood, including historic Main Street; (b) attraction of new medical related tenancies thereby creating a "hub" of medical services serving the Village and Town of Hamburg as well as neighboring southtown communities; (c) an increase in both employment and visitation to the building which will naturally result in increased spin-off economic benefit for restaurants and other businesses located in the Village, and (d) an eventual increase in assessed valuation and resultant property tax revenue (upon expiration of the PILOT) from a fully-leased building.

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* No * As stated above, the project would likely not proceed as proposed but for Financial Assistance from the Agency.

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

If the incentives requested are not approved for the project, Tenant Occupancy Costs will be prohibitive and applicant will have to reconsider proceeding with the renovation, as proposed. Applicant would likely complete only those repairs and improvements (roof, mechanical system replacements) necessary for the building to operate as it has been for the foreseeable future though the building will likely continue to incur sustained high vacancy due to the undesirability of the available space in the building. Further, the benefits to the community cited in response to the prior question would not be fully realized.

Will Project include leasing any equipment: Yes No

If yes, please describe equipment and lease terms

Site Characteristics:

Will the project meet zoning/land use requirements at the proposed location? Yes No

Describe the present zoning/land use: CBD

Describe required zoning/land use, if different: _____

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

Is the proposed project located on a site where the known or potential presence of contaminants is complicating the development/use of the property? If yes, please explain.

No. Shortly after Iskalo's acquisition of the property, residual petroleum contamination identified in the southeast corner fo the parking lot (originating from prior uses on the property) was remediated at Iskalo's expense. This residual contamination was discovered during Iskalo's due diligence investigation of the property prior to purchase. There are no other environmental conditions Iskalo is aware of that would complicate the proposed project.

Has a Phase 1 Environmental Assessment been prepared or will one be prepared with respect to the proposed project site? Yes No. If yes, please provide a copy.

C) Have any other studies or assessments been undertaken with respect to the proposed project site that indicate the known or suspected presence of contamination that would complicate the site's development? Yes No.

There are portions of the building, in particular, the roof, in which materials containing asbestos exist. These materials would be abated as part of the renovation.

If yes, please provide copies of the study.

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

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

Does or will the company or project occupant perform research and development activities on new products/services at the project location? Yes No ****Not at present***

If yes, please explain:

What percentage of annual operating expenses are attributed to the above referenced research and development activities?

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

Will customers personally visit the Project site for either of the following economic activities? If yes with respect to either economic activity indicated below, complete the retail determination contained in Section IV of the application.

Pease check any and all end users as identified below.

Retail Sales: Yes No – Maybe - ***The only retail sales we might anticipate would be a business tenancy engaged in the sale of durable medical equipment or something similar. Such use would likely consume a small portion of the building.**

Services: Yes No **(no business engaged in the sale of taxable services are anticipated to be tenants of the building)**

For purposes of this question, 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.

- | | | | |
|----------------------------------|-------------------------------------|---|-------------------------------------|
| Manufacturing | <input type="checkbox"/> | Back Office | <input type="checkbox"/> |
| Acquisition of Existing Facility | <input type="checkbox"/> | Retail <u>*(as previously noted)</u> | <input checked="" type="checkbox"/> |
| Housing | <input type="checkbox"/> | Mixed Use | <input type="checkbox"/> |
| Equipment Purchase | <input type="checkbox"/> | Facility for Aging | <input type="checkbox"/> |
| Multi-Tenant | <input checked="" type="checkbox"/> | Civic Facility (not for profit) | <input type="checkbox"/> |
| Commercial | <input checked="" type="checkbox"/> | Other _____ | <input type="checkbox"/> |

D) Project Information:

Estimated costs in connection with Project:

- | | | |
|---|---------------|------------------------------|
| 1. Land and/or Building Acquisition: | | \$ incurred in 2016 |
| (1.9 acres _____ acres __28,890 rentable square feet) | | |
| 2. New Building Construction: _____ square feet | | \$ _____-0-_____ |
| 3. New Building Addition(s): _____ square feet | | \$ _____-0-_____ |
| 4. Infrastructure Work | | \$ _____-0-_____ |
| 5. Building Shell Renovation (incl selective demo and asbestos abatement) | | \$ <u>2,599,999</u> |
| 6. Tenant Improvements (i.e. interior build-out) | | \$ <u>1,220,520</u> |
| 7. Manufacturing Equipment: | | \$ _____-0-_____ |
| 8. Non-Manufacturing Equipment (furniture, fixtures, etc.): | | \$ _____-0-_____ |
| 9. Soft Costs: (professional services, etc.): | | \$ <u>300,000</u> |
| 10. Other : _____ | | \$ _____ |
| | `Total Costs: | \$ <u>4,120,519</u> * |

***Costs inputted above include only those costs related to the proposed renovation project. The Total Costs line item above does not include costs incurred to date by applicant with respect to acquisition costs, acquisition closing costs, and clean-up of residual petroleum contamination in parking lot. The total project costs, including the preceding items together with the proposed renovation costs above, will total in excess of \$5.7 million.**

Project refinancing, estimated amount:
(for refinancing of existing debt only)

\$4,500,000

Have any of the above costs been paid or incurred as of the date of this application?

Yes No

If yes, describe the particulars:

Of the \$4,120,519 in anticipated Total Costs listed in response to question "D" above, only architectural/engineering costs have been incurred as of the date of this application.

Sources of Funds for Project Costs:

Bank Financing: \$ 4,500,000

Equity (excluding equity that is attributed to grants/tax credits): \$ 1,260,000*

Tax Exempt Bond Issuance (if applicable): \$ ____-0-____

Taxable Bond Issuance (if applicable): \$ ____-0-____

Public Sources (include sum total of all state and federal grants and tax credits): \$ ____-0-____

***Amount represents the total of current pre-renovation equity investment plus additional equity to be invested as part of the proposed renovation project**

Identify each state and federal grant/credit: **No state or federal grants are anticipated**

<hr/>	\$ _____
<hr/>	\$ _____
<hr/>	\$ _____
<hr/>	\$ _____

Total Sources of Funds for Project Costs: **\$ 5,760,000**

Has a financing preapproval letter or loan commitment letter been obtained? Yes No

Mortgage Recording Tax Exemption Benefit:

Estimated mortgage amount (sum total of all financing- construction and bridge). \$4,500,000

Amount of mortgage, if any, that would be subject to mortgage recording tax. \$4,500,000

Estimated Mortgage Recording Tax Exemption Benefit (product of mortgage amount as indicated above multiplied by .0075) \$33,750

Name of Lender (if known) Community Bank

Construction Cost Breakdown:

Total Cost of Construction: \$3,820,519 (This can be a calculation of sum 2,3,4,5, 7 in D (above))

Cost for materials: \$ 1,910,260 (assumed at 50% of Construction Cost)

% sourced in Town of Hamburg see note below %

% sourced in Erie County see note below %

% sourced in New York State see note below %

Note – The percent of materials to be sourced in NYS, Erie County and Town of Hamburg are not known at this time. Notwithstanding, applicant always first seeks to locally source all construction labor and materials purchases.

Gross amount of costs for goods and services that are subject to State and Local Sales and Use Tax – said amount to benefit from the Agency’s Sales and Use Tax Exemption Benefit:

\$ 1,910,260 (estimated at 50% of \$3,820,519 hard construction cost)

Estimated State and Local Sales Tax and Use Benefit (product of 8.75% multiplied by the figure above):

\$ 167,147

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

Real Property Tax Benefit:

Identify and describe if the Project will utilize a real property tax exemption benefit OTHER THAN the Agency’s PILOT benefit:

Response - Applicant is seeking a minimum of a Tier 1: Seven year PILOT pursuant to the Countywide Industrial Development Agency Uniform Tax Exemption Policy such that property taxes would continue to be paid, unabated, on the current assessed property value (i.e. Pre-Project Assessment) but any increase in assessment related to the renovation project (and subsequent leasing of vacant space) would be partially abated pursuant to the PILOT schedule.

E) For the proposed facility, please indicate the square footage for each of the uses outlined below:

	Square Footage	Cost	% of Total Cost of Project
Manufacturing			
Warehouse			
Research and Development			
Commercial			
Retail (medical related)	2,889	\$ 382,051	10% est.*
Office	26,001	\$3,438,467	90% est.
Specify Other			

***The retail use/tenancy shown in the table above is "worst case". Tenancy may end up as 100% office with 0% retail**

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

If you answered yes to the question above, what level of LEED certification do you anticipate receiving?

Provide estimate of additional construction cost as a result of LEED certification you are seeking

Will project result in significant utility infrastructure cost or uses: Yes No

F) What is your project timetable (Provide Dates):

1. Start Date: acquisition of equipment or construction of facilities: **Either fall 2021 or spring 2022**
2. Estimated completion date of project:
Shell Renovation - 5 months; Lease-up/Interior build-out - 18 months
3. Project Occupancy – estimated starting date of operations: Occupancy by existing tenants will continue unexpected. Occupancy of new tenants will occur subject to lease-up
4. Have construction contracts been signed? Yes No
5. Have site plans been submitted to the appropriate planning department?
 Yes No

Has the Project received site plan approval from the appropriate planning department? Yes * No

Following review by the Village of Hamburg's Architectural Review Committee and Planning Commission, the Village Board granted Site Plan and Architectural approval on July 6, 2021. Project is a Type II action. No SEQRA determination was required.

- G) Is the project necessary to expand project employment: Yes No
Is the project necessary to retain existing employment: Yes No

Employment Plan (Specific to the proposed project location):

	Current # of jobs at proposed 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 two 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 two years after Project completion
Full Time (FTE)	Existing - 20 +/- FTE	Existing – 20 +/- FTE	Existing – 20 +/- FTE New: 10 FTE	100%
Part Time (PTE)				
Total	Estimate 20 +/- FTE	Estimate 20 +/- FTE	Estimate 30 FTE	100%

*For purpose 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 Town of Hamburg and balance of Erie County as well as the following areas:

**By statute, Agency staff must project the number of FTE jobs that would be retained and created if the request for Financial Assistance is granted. Agency staff will project such jobs over the Two-year time period following Project completion. Agency staff converts 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: ***(Applicant does not have this information from existing tenants. Entries in table below are estimates. Applicant will be able to procure this information from new tenants should project be induced)**

Category of Jobs to be Retained and Created	#of employee created	Average salary for full time	Average fringe benefits for full time	Average salary for part time (if applicable)	Average Fringe Benefits for part time (if applicable)
Management	1	\$65k - \$75k	25-30%	n/a	n/a
Professional	4	\$65k - \$200k	25-30%	n/a	n/a
Administrative	5	\$40k - \$45k	25-30%	\$18 - \$22/hr	15%
Production					
Independent Contractor					
Other					

Employment at other locations in the Town of Hamburg or Erie County(provide address and number of employees at each location): ***Not applicable**

	Address	Address	Address
Full Time			
Part Time			
Total			

H) Will any of the facilities described above be closed or subject to reduced activity? Yes No **N/A**

I) Payroll Information -

Annual payroll at proposed project site: **Information not available to applicant**

Estimated average annual salary of jobs to be retained (full time): **Information not available to applicant**

Estimated average annual salary of jobs to be retained (part time): **Information not available to applicant**

Estimated average annual salary of jobs to be created (full time): estimated range from **\$37,500 - \$200,000**

Estimated average annual salary of jobs to be created (part time): **(see table above)** _____

Estimated salary range of jobs to be created:

From (Full Time) see above to (Full Time) see above

From (Part Time) see above to (Part Time) see above

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

Yes No

If yes, please explain and identify out-of-state locations investigated:

What competitive factors led you to inquire about sites outside of New York State

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

Yes No* **Not specifically for this project but applicant is contacted frequently by other locales and economic development agencies to make investment in their communities.**

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

Do you anticipate in applying for any other assistance for this project? Yes No

If yes what type of assistance (Historic Tax Credits, 485-a, Grants, Utility Loans, Energy Assistance, Workforce Training)

Section III: facility Type – Single or Multi-Tenant

Is this a Single Use Facility or a Multi-Tenant Facility? **Property is a Multi-Tenant Facility**

For Single Use Facility

Occupant Name

Address

Contact Person

Phone

Fax

E-Mail

Federal ID #

SIC/NAICS Code

Multi-Tenant Facility (to be filled out by developer)

Please explain what market conditions support the construction of this multi-tenant facility

Applicant is an experienced, full-service commercial real estate development company with properties located throughout WNY, including Hamburg. Based upon our internal marketing data, including inquiries received by applicant for medical space in Hamburg, applicant is confident that sufficient market demand exists for absorption of the remainder of the building.

Have any tenant leases been entered into for this project?

Yes. There are three existing tenants in the building and approximately 10,200 square feet of space would be available once renovation is complete (about 35% of the building)

If yes, please fill out a tenant form in section VII, for each tenant.

Section IV: Tenant Information

Village Pediatrics and Pediatric Rheumatology – Pediatric practice

North American Dental Real Estate, LLC (Westermeier Martin) – dental practice

Brummite Dale Wilson - dermatologist

Section V: Environmental Questionnaire

General Background Information

Address of Premises. 17 Long Ave, Hamburg NY

Name and Address of Owner of Premises. Iskalo 17 Long LLC

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

Fully improved property including building and paved/impervious surfaces.

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

Original building dates back approximately 90 years. Later uses include a supermarket prior to conversion to medical office space around 1990.

Describe all known former uses of the Premises.

Past uses on the property include manufacturing, grocery store and medical office space

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

Yes...there are three existing medical office tenants in the building

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

Village Pediatrics and Pediatric Rheumatology – Pediatric practice

North American Dental Real Estate, LLC (Westermeier Martin) – dental practice

Brummite Dale Wilson - dermatologist

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

As noted in response to an earlier question, residual petroleum contamination was discovered in the southeast corner of the parking lot during applicant's due diligence investigations prior to purchase of the property. Applicant undertook remediation of this contamination shortly following its purchase of the property. Applicant is unaware of the existence of any other contamination.

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

See response above

Remind me to upload this attachment at the end of application.

Has the Premises or any part of it ever been the subject of any enforcement action by any federal, state or local government entity, or does the preparer of this questionnaire have knowledge of: a) any current federal, state or local enforcement actions; b) any areas of non-compliance with any federal, state or local laws, ordinances, rules or regulations associated with operations over the past 12 months?. **NO**

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

Has there been any filing of a notice of citizen suit, or a civil complaint or other administrative or criminal procedure involving the Premises? **NO**

If yes, describe in full detail.

Solid And Hazardous Wastes And Hazardous Substances

Does any activity conducted or contemplated to be conducted at the premises generate, treat or dispose of any petroleum, petroleum-related products, solid and hazardous wastes or hazardous substances? **NO**

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

Have any federal, state or local permits been issued to the Premises for the use, generation and/or storage of solid and hazardous wastes? **NO**

If yes, please provide copies of the permits.

Remind me to upload this attachment at the end of application.

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

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

Does or is it contemplated that there will occur at the Premises any accumulation or storage of any hazardous wastes on-site for disposal for longer than 90 days? **NO**

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

Discharge Into Waterbodies

Briefly describe any current or contemplated industrial process discharges (including the approximate volume, source, type and number of discharge points). Please provide copies of all permits for such discharges. **NONE**

Remind me to upload this attachment at the end of application.

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

Storm water is presently generated from roof and parking lot run-off. Proposed project will not alter this existing condition. Sanitary discharge will be typical for office use. No special permits with respect to the property are required for existing storm water sources and sanitary discharge.

Remind me to upload this attachment at the end of application.

Is any waste discharged into or near surface water or groundwaters? **NO**

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

Air Pollution

Are there or is it contemplated that there will be any air emission sources that emit contaminants from the Premises? **NO**

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

Are any of the air emission sources permitted?

If yes, attach a copy of each permit.

Remind me to upload this attachment at the end of application.

Storage Tanks

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

None the applicant is aware of after having undertaking an all appropriate inquiry investigation.

Remind me to upload this attachment at the end of application.

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

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

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

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

Remind me to upload this attachment at the end of application.

Have there been any PCB spills, discharges or other accidents at the Premises? **None that applicant is aware of**

If yes, relate all the circumstances.

Do the Premises have any asbestos containing materials? **Yes**

If yes, please identify the materials. **There are materials in the existing roof (patching tar, flashing, skylight caulk etc.) that are asbestos containing. These ACM will be abated as part of the proposed renovation project.**

Section VI: Inter-Municipal Move Determination

The Agency is required by state law to make a determination that, if completion of a Project benefiting from Agency Financial Assistance results in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the project occupant located within the state, Agency Financial Assistance is required to prevent the project occupant from relocating out of the state, or is reasonably necessary to preserve the project occupant's competitive position in its respective industry.

Will the Project result in the removal of an industrial or manufacturing plant of the Project occupant from one area of the state to another area of the state? Yes No

Will the Project result in the abandonment of one or more plants or facilities of the Project occupant located within the state? Yes No

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

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

Within New York State: Yes No

Within Erie County: Yes No

*If yes to either question, please explain: _____

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

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

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

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

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

Section VII: Adaptive Reuse Projects

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

What is the age of the structure (in years)? Approximately 90 years

Has the structure been vacant or underutilized for a minimum of 3 years? (Underutilized is defined as a minimum of 50% of the rentable square footage of the structure being utilized for a use for which the structure was not designed or intended) – Building has had sustained vacancy of 35+% for many years (but not more than 50%). A portion of the building interior is raw and unimproved. Entire building has had no reinvestment for thirty + years.

If vacant, number of years vacant. Building has had vacancy of 35%+ for more than 5 years.

If underutilized, number of years underutilized. Response – 5 to 10 years

Describe the use of the building during the time it has been underutilized: As a converted, multi-tenant office building.

Is the structure currently generating insignificant income? (Insignificant income is defined as income that is 50% or less than the market rate income average for that property class) - Yes – NOI as of YE 2020 was \$96,500. Annual NOI (post-renovation, full lease-up) is anticipated to be 2+ times 2020 NOI.

If yes, please provide dollar amount of income being generated, if any See response above

If apartments are planned in the facility, please indicate the following: N/A

Does the site have historical significance?

Are you applying for either State/Federal Historical Tax Credit Programs?

If yes, provide estimated value of tax credits

Briefly summarize the financial obstacles to development that this project faces without agency or other public assistance. Please provide the agency with documentation to support the financial obstacles to development (you will be asked to provide cash flow projections documenting costs, expenses and revenues with and without agency and other tax credits included indicating below average return on investment rates compared to regional industry averages)

Remind me to upload this attachment at the end of application

Briefly summarize the demonstrated support that you intend to receive from local government entities. Please provide agency with documentation of this support in the form of signed letters from these entities.

Remind me to upload this attachment at the end of application.

Please indicate other factors that you would like HIDA to consider such as: structure or site presents significant public safety hazard and or environmental remediation costs, site or structure is located in a distressed census tract, structure presents significant costs associated with building code compliance, site has historical significance, site or structure is presently delinquent in property tax payments.

Section VIII Senior Citizen Rental Housing Projects

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

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

If yes, please answer the following questions. If no, please proceed to the next section of this application.

Projects applying for tax incentives under the Senior Citizen Rental Housing program will be evaluated based upon the answers you supply to the following criteria based questions. **Please note that approval of Senior Citizen Rental Housing project incentives does not require that all of the following criteria be met, but rather this information will be considered by the Agency's Board when the project is presented for Board approval.**

Has the project received written support from the city, town or village government in which it is located?

Describe the location of the project as it relates to the project's proximity to the town / village / city center or to a recognized hamlet.

Is the project consistent with the applicable municipal master plan?

If yes, please provide a narrative identifying the master plan (by name) and describing how the project aligns with the plan details

Does the project advance efforts to create a walkable neighborhood and community in proximity to important local amenities and services?

If yes, please provide a narrative describing the walkable nature of the project including access seniors would have to specific neighborhood amenities.

Has a market study shown that there is a significant unmet need in the local community or specific neighborhood where seniors are unable to find appropriate housing opportunities?

Is the project located in an area (defined as a 1 – 5 mile radius of the project site) where there are significant local resident populations that are at or below the median income level?

If yes, please describe how you made this determination based upon census tract and other relevant third party data.

Does the project provide amenities that are attractive to seniors and differentiates the project from standard market rate housing?

If yes, please describe these amenities (examples may include: community rooms, social / recreational activity areas, senior-oriented fixtures and safety amenities, security systems, call systems, on site medical services)

Are there impediments that hinder the ability to conventionally finance this project and /or negatively impact the project's return on investment?

If yes, please briefly summarize the financial obstacles to development that this project faces without agency or other public assistance. Please provide the agency with documentation to support the financial obstacles to development (you

will be asked to provide cash flow projections documenting costs, expenses and revenues with and without agency and other tax credits included indicating below average return on investment rates compared to regional industry averages)

Remind me to upload this attachment at the end of application.

Will the project target (and maintain during the incentive period) a minimum 50% occupancy rate of senior citizens whose income is at or below 60-80% of the median income for Erie County?

If yes, please describe provide a narrative citing key facts that substantiate this finding.

Section IX: Retail Determination

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

- 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 No Maybe *** Though the building is anticipated to be occupied by professional/medical office tenants, there is the possibility of a medical related tenancy that is engaged in the sale of "hard" goods such as durable medical equipment. This type of use would not be anticipated to exceed 10%-15% of the building area.**

***If yes, please complete the retail questionnaire supplement below . If no, proceed to Section X**

For purposes of Question A, the term "retail sales" means (i) sales by 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? **Likely 0% but no more than 10-15%**. If the answer is **less than 33%** do not complete the remainder of the retail determination.

If the answer to Question 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 No
2. Is this Project location or facility likely to attract a significant number of visitors from outside the economic development region (Erie, Niagara, Allegheny, Chautauqua and Cattaraugus counties) in which the project will be located? Yes 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? Are services provided at proposed project site needed because of a lack of reasonably accessible retail trade facilities offering such goods or services? Yes No

**if yes, please provide-market analysis supporting your response.*

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 No

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

Section X: Estimate of Real Property Tax Abatement Benefits and Percentage of Project Costs Financed from Public Sector Sources

Section X of this Application will be (i) completed by Agency Staff based upon information contained with the Application, and (ii) provided to the Applicant for ultimate inclusion as part of this completed Application.

PILOT Estimate Table Worksheet:

Dollar Value of New Construction and Renovation Costs	Estimated New Assessed Value of Property Subject to IDA*	County Tax Rate/1000	Local Tax Rate (Town/City/Village)/1000	School Tax Rate/1000

*Apply equalization rate to value

PILOT year	% Payment	County PILOT Amount	Local PILOT Amount	School PILOT Amount	Total PILOT	Full Tax Payment w/o PILOT	Net Exemption
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total:							

*Estimates provided are based on current property tax rates and assessment values

Percentage of Project Costs Financed from Public Sector Table Worksheet:

Total Project Cost	Estimated Value of PILOT	Estimated Value of Sales Tax Incentive	Estimated Value of Mortgage Tax Incentive	Total of Other Public Incentives (Tax Credits, Grants, ESD Incentives, etc.)

Calculate %

(Est. PILOT + Est. Sales Tax + Est. Mortgage Tax + Other)/Total Project Costs: _____%

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

Section X: Estimate of Real Property Tax Abatement Benefits and Percentage of Project Costs Financed from Public Sector Sources

Section X of this Application will be (i) completed by Agency Staff based upon information contained with the Application, and (ii) provided to the Applicant for ultimate inclusion as part of this completed Application.

PILOT Estimate Table Worksheet:

Dollar Value of New Construction and Renovation Costs	Estimated New Assessed Value of Property Subject to IDA*	County Tax Rate/1000	Local Tax Rate (Town/City/Village)/1000	School Tax Rate/1000
\$4,120,519	\$763,000	9.47424	27.08	38.97

*Apply equalization rate to value

PILOT is a five-year freeze on current assessed value

PILOT year	% Payment	County PILOT Amount	Local PILOT Amount	School PILOT Amount	Total PILOT	Full Tax Payment w/o PILOT	Net Exemption
1		\$6385.64	\$18,251.09	\$26,263.64	\$50,900.36	\$57,621.63	\$6,721.26
2		\$6385.64	\$18,251.09	\$26,263.64	\$50,900.36	\$57,621.63	\$6,721.26
3		\$6385.64	\$18,251.09	\$26,263.64	\$50,900.36	\$57,621.63	\$6,721.26
4		\$6385.64	\$18,251.09	\$26,263.64	\$50,900.36	\$57,621.63	\$6,721.26
5		\$6385.64	\$18,251.09	\$26,263.64	\$50,900.36	\$57,621.63	\$6,721.26
6		\$7,228.85	\$20,661.10	\$29,731.68	\$57,621.63	\$57,621.63	0
7							
8							
9							
10							
Total:		\$31,928.19	\$91,255.45	\$131,318.18	\$254,501.81	\$288,108.14	\$33,606.32

*Estimates provided are based on current property tax rates and assessment values

Percentage of Project Costs Financed from Public Sector Table Worksheet:

Total Project Cost	Estimated Value of PILOT	Estimated Value of Sales Tax Incentive	Estimated Value of Mortgage Tax Incentive	Total of Other Public Incentives (Tax Credits, Grants, ESD Incentives, etc.)
\$5,760,000	\$33,606	\$167,147	\$33,750	

Calculate %

(Est. PILOT + Est. Sales Tax + Est. Mortgage Tax + Other)/Total Project Costs: 6 %

- F. The Applicant and/or the owner, and their successors and assigns, hereby release, defend and indemnify the Agency from any and all suits, causes of action, litigations, damages, losses, liabilities, obligations, penalties, claims, demands, judgments, costs, disbursements, fees or expenses of any kind or nature whatsoever (including, without limitation, attorneys', consultants', and experts' fees) which may at any time be imposed upon, incurred by or asserted or awarded against the Agency, resulting from or arising out of any inquiries and/or environmental assessment, audit, inspection or investigation report completed hereunder and/or the selection of the environmental consultant, engineer or other qualified person to perform such assessments, investigations, and audits.
- G. Hold Harmless Provision: The Applicant acknowledges and agrees that the Applicant shall be and is responsible for all costs of the Agency incurred in connection with any actions required to be taken by the Agency in furtherance of the Application including the Agency's costs of general counsel and/or the Agency's bond/transaction counsel whether or not the Application, the proposed Project it describes, the attendant negotiations, or the issue of bonds or other transaction or agreement are ultimately ever carried to successful conclusion and 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: (i) the Agency's examination and processing of, and action pursuant to or upon, the Application, regardless of whether or not the Application or the proposed Project describes herein or the tax exemptions and other assistance requires herein are favorably acted upon by the Agency; (ii) the Agency's acquisition, construction, and/or installation of the proposed Project described herein; and (iii) any further action taken by the Agency with respect to the proposed Project including, without limiting the generality of the foregoing, all causes of action and attorney's fees and any other expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing. Applicant hereby understands and agrees, in accordance with Section 875(3) of the New York General Municipal Law and the policies of the Agency that any New York State and local sales and use tax exemption claimed by the Applicant and approved by the Agency, any mortgage recording tax exemption claimed by the Applicant and approved by the Agency, and/or any real property tax abatement claimed by the Applicant and approved by the Agency, in connection with the Project, may be subject to recapture and/or termination by the Agency under such terms and conditions as will be established by the Agency and the Applicant. The Applicant further represents and warrants that the information contained in this Application, including without limitation information regarding the amount of the New York State and local sales and use tax exemption benefit, the amount of the mortgage recording tax exemption benefit, and the amount of the real property tax abatement, if and as applicable, to the best of the Applicant's knowledge, is true, accurate and correct.
- H. This obligation includes an obligation to submit an Agency Fee Payment to the Agency in accordance with the Agency Fee policy effective as of the date of this Application
- I. By executing and submitted this Application, the Applicant covenants and agrees to pay the following fees to the Agency and the Agency's general counsel and/or the Agency's bond/transaction counsel, the same to be paid at the times indicated:
- a. A non-refundable \$500 application and publication fee (the "Application Fee");
 - b. A \$500 expense deposit for the Agency's Counsel Fee Deposit
 - c. Unless otherwise agreed to by the Agency, an amount equal to one percent (1%) of the total project costs.

d. All fees, costs and expenses incurred by the Agency for (1) legal services, including but not limited to those provided by the Agency's general counsel and/or the Agency's bond/transaction counsel, thus note that the Applicant is entitled to receive a written estimate of fees and costs of the Agency's general counsel and the Agency's bond/transaction counsel; and (2) other consultants retained by the Agency in connection with the proposed project, with all such charges to be paid by the Applicant at the closing.
LINK TO FEE SCHEDULE

- J. If the Applicant fails to conclude or consummate the 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 Applicant is unable to find buyers willing to purchase the bond issue requested, or if the Applicant is unable to facilitate the sale/leaseback or lease/leaseback transaction, then, upon the presentation of an invoice, Applicant shall pay to the Agency, its agents, or assigns all actual costs incurred by the Agency in furtherance of the Application, up to that date and time, including but not necessarily limited to, fees of the Agency's general counsel and/or the Agency's bond/transaction counsel.
- K. The Applicant acknowledges and agrees that all payment liabilities to the Agency and the Agency's general counsel and/or the Agency's bond and/or transaction counsel as expressed in Sections H and I are obligations that are not dependent on final documentation of the transaction contemplated by this Application.
- L. The cost incurred by the Agency and paid by the Applicant, the Agency's general counsel and/or bond/transaction counsel fees and the processing fees, may be considered as a cost of the Project and included in the financing of costs of the proposed Project, except as limited by the applicable provisions of the Internal Revenue Code with respect to tax-exempt bond financing.
- M. 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.
- N. The Applicant acknowledges that it has read and understands of the LINK Agency's Policy for Termination of Agency Benefits and Recapture of Agency Benefits Previously Granted (the "Termination and Recapture Policy"). The Applicant covenants and agrees that it fully understands that the Termination and Recapture Policy is applicable to the Project that is the subject of this Application and that the Agency will implement the Termination and 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.
- O. 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. Restriction 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 are 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

- P. 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.
- Q. 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 any amount equal to all or part of any tax exemption claimed by reason of the Agency's involvement in the Project.
- R. 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.
- S. The Applicant and the individual executing this Application on behalf of Applicant acknowledge that the Agency and its counsel will rely on the representations and covenants made in this Application when acting hereon and hereby represents 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.
- T.
1. That I am the Executive Vice President of Iskalo Development Corp. (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.



David Chiazza, EVP
(Signature of Officer)