

CATTARAUGUS COUNTY CAPITAL RESOURCES CORPORATION

APPLICATION FOR FINANCIAL ASSISTANCE TAX EXEMPT BONDS

Cattaraugus County Capital Resources Corporation
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Eligibility Questionnaire - Applicant Background Information

Answer all questions. Use "None" or "Not Applicable" where necessary.

Applicant Information-company receiving benefit:

Applicant Name: _____

Applicant Address: _____

City/Town: _____ State: _____ Zip: _____

Phone: _____

Website: _____ E-mail: _____

Business Organization (check appropriate category):

Corporation

Not for Profit 501c3

Public Corporation

Other (specify) _____

Year Established: _____ State in which Organization is established: _____

Benefits Requested (select all that apply):

1. Tax Exempt Financing

Yes or No

2. Exemption from Mortgage Tax

Yes or No

Applicant Business Description:

Describe in detail applicant background, history and services provided: _____

What percentage of your total annual supplies, raw materials and vendor services are purchased from firms in Cattaraugus County _____ %

Describe vendors within Cattaraugus County for major purchases: _____

Individual Completing Application:

Name: _____

Title: _____

Address: _____

City/Town: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Company Contact (if different from individual completing application):

Name: _____
Title: _____
Address: _____
City/Town: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Company Counsel:

Name of Attorney: _____
Firm Name: _____
Title: _____
Address: _____
City/Town: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Eligibility Questionnaire - Project Description & Details

Address of Proposed Project Facility: _____
City/Town: _____ School District: _____
Current Address (if different): _____
City/Town: _____ State: _____ Zip: _____

Does the Applicant or any related entity currently hold fee title or have an option/contract to purchase the Project site? Yes or No If No, indicate name of present owner of the Project site:

Describe the present use of the proposed Project site (vacant land, existing building, etc.):

Provide narrative and purpose of the proposed project (new build, renovations) square footage of existing and new construction contemplated and/or equipment purchases. Identify specific uses occurring within the project. Describe any/all tenants and any/all end users. Add additional pages if necessary.

If tax exempt or taxable bonds are being requested indicate what bonds will be used for:

Describe the reasons why the CCCRC financial assistance is necessary, and the effect the Project will have on the Applicant’s operations. If refinancing an existing bond or loan indicate potential savings:_____

Site Characteristics:

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

Describe the present zoning/land use: _____

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

Has a project related site plan approval application been submitted to the appropriate planning department? Yes or No

If Yes, include the applicable municipality’s and/or planning department’s approval resolution, the related State Environmental Quality Review Act (“SEQR”) “negative declaration” resolution, if applicable, and the related Environmental Assessment Form (EAF), if applicable.

If No, list the CCCRC as, or ensure that the CCCRC is listed as, an “Involved Agency” on the related EAF that will be submitted to the appropriate municipality and/or planning department for site plan approval and provide to the EAF to the lead agency and to the CCCRC.

If No, because site plan approval is not otherwise required, complete and submit the EAF along with this Application to the CCCRC.

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

Project Type:

Select Project Type for all end users at project site (check any and all end users as identified below)

(You may check more than one)

- | | | | |
|----------------------------------|--------------------------|-----------------|--------------------------|
| Acquisition of Existing Facility | <input type="checkbox"/> | Student Housing | <input type="checkbox"/> |
| Assisted Living | <input type="checkbox"/> | Mixed Use | <input type="checkbox"/> |
| Multi-Tenant | <input type="checkbox"/> | Senior Housing | <input type="checkbox"/> |
| Civic Facility (not for profit) | <input type="checkbox"/> | Educational | <input type="checkbox"/> |
| Facility for Aging | <input type="checkbox"/> | Medical | <input type="checkbox"/> |

1. Start date: acquisition of equipment or construction of facilities: _____
2. Estimated completion date of project: _____
3. Project occupancy – estimated starting date of occupancy: _____

Estimated costs in connection with Project:

Bank Financing \$ _____
 Equity (excluding equity that is attributed to grants/tax credits) \$ _____
 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 source and amount
 _____ \$ _____
 _____ \$ _____
 Total Sources of Funds for Project Costs: \$ _____

Have you secured financing for the project? Yes or No

If Yes, specify, Bank, underwriter, etc.

Mortgage Recording Tax Exemption Benefit: Amount of mortgage(s), if any that would be subject to mortgage recording tax:

Mortgage Amount (include sum total of construction/permanent/bridge financing): \$ _____

Estimated Mortgage Recording Tax Exemption Benefit (product of mortgage amount as indicated above 1% \$ _____)

Is the project necessary to expand project employment? Yes or No

Is project necessary to retain existing employment? Yes or No

Employment Plan (Specific to the proposed project location):

	Current # of jobs at proposed project location or to be relocated at project location	If financial assistance is granted – project the number of FT and PT jobs to be retained	If financial assistance is granted – project the number of FT and PT jobs to be created upon 24 months (2 years) after Project completion	Estimate number of residents of the Labor Market Area in which the project is located that will fill the FT and PT jobs to be created upon 24 months (2 years) after project completion **
Full time (FT)				
Part Time (PT)				
Total ***				

** The Labor Market Area includes the Counties of Cattaraugus, Erie, Allegany, Chautauqua and Wyoming. For purposes of this question, estimate the number of FT and PT jobs that will be filled, as indicated in the third column, by residents of the Labor Market Area, in the fourth column.

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

Category of jobs to be retained and/or created	# of employees retained and/or 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					
Professional					
Administrative					
Production					
Independent Contractor					
Other					

Employment at other locations in Cattaraugus County, if applicable: (provide address and number of employees at each location):

Address	Full Time	Part Time	Total

Payroll Information:

Annual Payroll at proposed project site upon project completion \$ _____
 Estimated average annual salary of jobs to be retained (full time) \$ _____
 Estimated average annual salary of jobs to be retained (part time) \$ _____
 Estimated average annual salary of jobs to be created (full time) \$ _____
 Estimated average annual salary of jobs to be created (part time) \$ _____
 Estimated salary range of jobs to be created
 From (full time) \$ _____ To (full time) \$ _____
 From (part time) \$ _____ To (part time) \$ _____

Representations, Certifications and Indemnification

_____ (name of CEO or other authorized representative of Applicant) deposes and says that he/she is the _____ (title) of _____ (name of corporation or other entity) named in the attached Application (the "Applicant"), that he/she has read the foregoing Application and knows the contents thereof, and hereby represents, understands, and otherwise agrees with the Cattaraugus County Capital Resources Corporation (CCCRC) and as follows:

A. Local Labor Workforce Certification Reports: The Applicant understands and agrees that, if the project, as described within this Application, receives any Financial Assistance from the CCCRC then the Applicant agrees to file, or cause to be filed, with the CCCRC Local Labor Workforce Certification Reports, at least quarterly, regarding the use of local labor working on the project site during and through the construction period to confirm use of all local labor residing in Cattaraugus, Erie, Niagara, Chautauqua, Cattaraugus and/or Alleghany Counties.

B. The Applicant and/or the owner, and their successors and assigns, hereby release, defend and indemnify the CCCRC 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 CCCRC, resulting from or arising out of any inquiries and/or environmental assessments, investigations and audits performed on behalf of the Applicant and/or the owner pursuant hereto, including the scope, level of detail, contents or accuracy of any 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.

C. Hold Harmless Provision: The Applicant acknowledges and agrees that the Applicant shall be and is responsible for all costs of the CCCRC incurred in connection with any actions required to be taken by the CCCRC in furtherance of the Application including the CCCRC's reasonable costs of general counsel and/or the CCCRC'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 CCCRC shall not be liable for and agrees to indemnify, defend, and hold the CCCRC harmless from and against any and all liability arising from or expense incurred by: (i) the CCCRC's examination and processing of, and action pursuant to or upon, the Application, regardless of whether or not the Application or the proposed project described herein or the tax exemptions and other assistance requested herein are favorably acted upon by the CCCRC; (ii) the CCCRC's acquisition, construction and/or installation of the proposed project described herein; and (iii) any further action taken by the CCCRC 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. This obligation includes an obligation to submit an CCCRC Fee Payment to the CCCRC in accordance with the CCCRC fee policy effective as of the date of this Application.

D. By executing and submitting this Application, the Applicant covenants and agrees to pay the following fees to the CCCRC and the CCCRC's general counsel and/or the CCCRC's bond/transaction counsel, the same to be paid at the times indicated:

- (i) a non-refundable \$1,000 application and publication fee (the "Application Fee");
- (ii) Unless otherwise agreed to by the CCCRC an amount equal to one percent (1.00%) of the CCCRC bond issuance (.50% if refinance).

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

E. 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, then, upon the presentation of an invoice, Applicant shall pay to the CCCRC, its agents, or assigns all reasonable costs incurred by the CCCRC in furtherance of the Application, up to that date and time, including but not necessarily limited to, fees of the CCCRC's general counsel and/or the CCCRC's bond/transaction counsel.

F. The Applicant acknowledges and agrees that all payment liabilities to the CCCRC and the CCCRC's general counsel and/or the CCCRC's bond and/or transaction counsel as expressed in Sections D and E are obligations that are not dependent on final documentation of the transaction contemplated by this Application.

G. The cost incurred by the CCCRC and paid by the Applicant, the CCCRC'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.

H. The Applicant acknowledges that the CCCRC 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.**

I. The Applicant and the individual executing this Application on behalf of Applicant acknowledge that the CCCRC 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.

(Name of corporation or entity)

(Name of officer)

(Title)

NOTARY

Sworn to before me this ___ day of _____, 20__

(Signature)