



Northern NY Power Proceeds Allocation Board

APPLICATION FOR NORTHERN NEW YORK ECONOMIC DEVELOPMENT FUND BENEFITS

NORTHERN NEW YORK POWER PROCEEDS ALLOCATION BOARD

Adopted January 25, 2017

PLEASE ENTER YOUR BUSINESS NAME HERE:

Refer Questions to: NNYPAB Staff at 315-764-6603 or PoweringBusiness@nypa.gov

NYPA Internal

Date Application Received: _

Application Tracking #:

Applicant Name:

APPLICATION CHECKLIST

Project name:			
Applicant name:			
	Indicate if attached or N/A		
Signed certification and completed application	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 1: Organizational Chart - ALL APPLICANTS	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 2: Commitment Letters/Term Sheets REQUIRED for all financial commitments noted	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 3: Responsibility Explanation – ALL APPLICANTS	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 4: Additional NY State Facilities (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 5: Existing Obligations (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 6: Developer Background (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 7: Photos & Drawings (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 8: Cost Estimates (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 9: Corporate Financial Information – ALL APPLICANTS	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 10: Business Plan and 5 Year Financial Projections REQUIRED IF LESS THAN 3 YEAR HISTORICAL FINANCIALS AVAILABLE	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 11: Personal Financial Statement (IF APPLICABLE)	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
Exhibit 12: Articles of Incorporation - ALL APPLICANTS	Y <input type="checkbox"/>	N <input type="checkbox"/>	N/A <input type="checkbox"/>
<u>Application Submission:</u> Please send one (1) electronic copy to PoweringBusiness@nypa.gov AND three (3) hard copies to the NNYPPAB office at: <div style="text-align: center;"> NNYPPAB St. Lawrence-Franklin D. Roosevelt Power Project PO Box 700, 830 Barnhart Island Road Massena, NY13662 </div>			

Acknowledgment and Certification:

This Application is subject to all applicable legal requirements, as well as the Board Procedures, and Board Policies Relating to Review of Applications for Fund Benefits ("Procedures and Policies") adopted by the Northern New York Power Proceeds Allocation Board ("Allocation Board" or "Board"), as may be amended by the Board from time to time. Please consult the Procedures and Policies when preparing this Application.

The Board reserves the right to: (1) reject any Application that is filed after any filing deadline prescribed by the Board, or that provides incomplete, inaccurate, or unresponsive information; and (2) require any Applicant to provide additional information in support of its Application.

This Application does not constitute a contract and is not intended to describe the terms and conditions applicable to any award of Fund Benefits. If the Applicant receives an award of Fund Benefits, the terms and conditions applicable to such award will be set forth in a written contract between the Applicant and the New York Power Authority ("NYPA") ("Fund Benefits Agreement").

The undersigned solemnly affirms that to the best of my knowledge, information and belief, the application is complete and that all statements, including all schedules, attachments and additional information submitted in connection herewith, are true and accurate. I hereby authorize the Allocation Board or its designee to order credit reports or other financial background information on any individual or entity, including those proposed as a guarantor, as may be necessary to assess the Applicant's request for Fund Benefits.

Signature		
Type Name		
Title		Date (mm/dd/YY)

Participation Opportunities for New York State Certified MWBEs

The Board and NYPA implement the provisions of New York State Executive Law Article 15-A and 5 NYCRR Parts 142-144 ("MWBE Regulations") for all State contracts as defined therein, with a value (1) in excess of \$25,000 for labor, services, equipment, materials, or any combination of the foregoing or (2) in excess of \$100,000 for real property renovations and construction.

Approval of funding, and funding itself, by NYPA, will be conditioned upon and subject to the following requirements:

1. Applicant agrees to fully comply and cooperate with NYPA in the implementation of New York State Executive Law Article 15-A. These requirements include contracting opportunities for MWBEs.
2. Applicant's demonstration of "good faith efforts" pursuant to 5 NYCRR §142.8 will be a part of these requirements. These provisions shall be deemed supplementary to, and not in lieu of, other applicable federal, state or local laws.

For purposes of providing meaningful participation by MWBEs on the project and achieving the project goals established herein, applicant should reference the directory of New York State Certified MWBEs found at the following internet address:
<https://ny.newnycontracts.com/>

Applicant is encouraged to contact the Office of Contractor and Supplier Diversity at Empire State Development ("ESD") at OCSD@ESD.NY.GOV to discuss additional methods of maximizing participation by MWBEs on the project.

GENERAL APPLICATION AND TRACK EXPLANATIONS

All Applicants must:

1. Complete questions 1 - 81 (and questions 82 – 116 if applicable, as described).
2. Complete questions applicable to the particular Funding Track associated with the proposed project. **Note that the Board reserves the right to (a) reassign the Application to a different Track if it believes the project is more appropriately considered under such Track, and (b) require that additional information about an Applicant or a project be provided.**
3. Provide supplemental information, if applicable, required by Exhibits 1-12 at the end of this Application.
4. Ensure that the statement of “Sources and Uses” (Question #26) is reconciled such that fund sources are equal to fund uses.
5. Ensure that information provided in various parts of the application (e.g., the primary Application, Track questions, Exhibits) is consistent.

TRACK	TRACK DESCRIPTION	REQUIRED QUESTIONS
BUSINESS INVESTMENT	Business Investments are expenditures that, among other things, facilitate an employer's ability to create new jobs in New York State or retain jobs that are otherwise in jeopardy. Within the Business Investment Track, firm, long-term job commitments will be required of awardees; it is by underwriting these job commitments that the Allocation Board is best able to forecast the economic benefits of providing assistance to any particular project. Applicants will therefore be required to commit to the number of jobs at risk that will be retained by the proposed project, and/or the number of new jobs that will be created by the project, and the average salaries of each. It is also likely that Applicants under this track will be required to commit to specific capital investments for the project proposed.	Appendix A: Questions 82-85
INNOVATION/ ENTREPRENEUR DEVELOPMENT	Implementing a plan that brings new technologies and/or products to the marketplace, increases new startups in strategic industries and facilitates the commercialization of products that can lead to job growth in the Region.	Appendix B: Questions 86-90
TRAINING AND WORKFORCE DEVELOPMENT	Training and related programs that will provide the necessary skills to meet industry needs. Ideally, projects should focus on concentrations of underemployed and underrepresented populations in the Region and provide programs for those populations.	Appendix C: Questions 91-96

TOURISM MARKETING	These projects capitalize on the Region's natural assets to increase tourist traffic and revenues; develop a strategy that increases the amount of time each tourist spends in the Region; and raise the profile of the Region as a national and international destination.	Appendix D: Questions 97-102
AGRICULTURAL INVESTMENT	Focuses on augmenting the agricultural profile of the Region through projects that enhance local access to markets; create new agricultural products; improve productivity; create and implement Regional marketing strategies; establish connections between research and farming; create jobs and careers in agriculture; and increase the value of a Regional brand.	Appendix E: Questions 103-111
OTHER ELIGIBLE PROJECTS	This Track is for eligible projects that do not fit within one of the other Tracks. Examples of such projects include energy related projects, programs and services, studies, and research and development projects.	Appendix F: Questions 112-116

SUMMARY SHEET

1. APPLICANT:

2. PROJECT NAME:

3. CONTACT INFORMATION

Name:

Title:

Street Address:

Street Address:

City, State & Zip Code:

Phone:

Email:

4. PROJECT LOCATION

Name:

Street Address:

Street Address:

City, State, Zip:

County:

Senate District:

Assembly District:

5. TOTAL PROJECT COST: \$

6. ASSISTANCE REQUESTED: \$

7. Funding Track that is applicable (check one):

☐ Business Investment

☐ Innovation/Entrepreneur Development

☐ Training and Workforce Development

☐ Tourism Marketing

☐ Agricultural Investment

☐ Other Eligible Project (please describe)

BUSINESS INFORMATION

8.	Federal Employer Identification :	
9.	Product/Service/Activity provided by Applicant at project location:	
10.	NAICS code at project location:	
11.	Major customers:	
12.	Share (%) of Applicant's products/services sold in NY State:	%
13.	List primary suppliers and % of goods/services purchased in New York State ("NYS"):	
14.	Primary markets served:	500 Character Limit
15.	Major competitors and their locations:	
16.	Are Applicant's competitors making a competing product or offering a competing service in NYS?	<input type="checkbox"/> Yes <input type="checkbox"/> No

ENTITY FORM / CORPORATE OWNERSHIP

17. Please indicate the Applicant's Form

☐ Privately held for-profit business
"C" corp. ☐ "S" corp. ☐ LLC ☐ LP ☐ Sole proprietorship ☐ Other:

Please fill in Table 1 on the next page

☐ Publicly held for-profit business

☐ Not-for-profit corporation business
501(c)(3) ☐ 501(c)(4) ☐ Other:

Please complete Table 2 on the next page

18. Does any entity and its affiliates together own 50% or more of Applicant?

☐ YES ☐ NO

19. Is this a start-up company with no operating history?

☐ YES ☐ NO

If "Yes," Exhibit 10 is required.

20. Does any individual and her/his immediate family members together own 20% or more of Applicant?

☐ YES ☐ NO

21. Does any individual and her/his immediate family members together own 50% or more of Applicant?

☐ YES ☐ NO

22. Is Applicant (or any owner of a 51% or greater interest) a NYS-certified Minority- or Women-owned Business Enterprise? ☐ YES

☐ NO

If Yes, provide name of M/WBE Certified entity:

23. Is there a relationship by virtue of common ownership or control between the Applicant and the vendor of any asset the Applicant intends to acquire as part of the project? ☐ YES ☐ NO If Yes, explain:

1,000 Character Limit

24. Is Applicant a public/government entity, or was it formed by such an entity? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

ENTITY FORM / CORPORATE OWNERSHIP Cont'd.

25. Please complete the following

TABLE 1: Owners of at least 5% of Applicant		
Name	Office Held (if any) or Type of Entity	Percent Ownership
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%

TABLE 2: Officers of Not-for-Profit Corporation		
Name	Office Held	Organizational Affiliation

PROJECT SOURCES AND USES - INSTRUCTIONS: See statement of sources and uses at the end of the application for an example of a completed spreadsheet. As Exhibit 2, Commitment Letters/Term Sheets, provide copies of commitment letters or term sheets for the funding sources listed above, if available.

26. Please complete the following information (project funding sources should equal project funding uses). Attach additional pages as necessary to provide the requested information.

Sources	Provider	Amount	Terms
Subject request for Fund Benefits		\$	
Senior debt		\$	
Subordinate debt		\$	
Total Other Sources: Committed (see below)		\$	
Total Other Sources: Potential (see below)		\$	
Corporate cash/line of credit/Related Entity loan		\$	
Additional cash equity contribution		\$	
Deferred developer fee		\$	
Other (specify)		\$	
Unidentified		\$	
	Total:	\$	
Other Sources: Committed			
Provider	Use of Funds		Terms
		\$	
		\$	
	Total:	\$	
Other Sources: Potential			
Provider	Use of Funds + Status of Request		Terms
		\$	
		\$	
	Subtotal:	\$	
	Allowance for rejection of funding requests from potential sources (in order to show balanced budget):	\$	
	Total:	\$	
Uses	Detail is Required	Cost	
Salaries & Wages		\$	
Rent/Lease		\$	
Supplies/Materials		\$	
Training		\$	
Planning/feasibility study costs (Be Specific)		\$	
Land acquisition		\$	
Acquisition of existing assets, including but not limited to buildings and M&E (Be Specific)		\$	
Demolition and Construction		\$	
Environmental remediation		\$	
Hard costs, inc. contingency		\$	
Infrastructure costs (Be Specific)		\$	
Machinery + Equipment (Be Specific)		\$	
Furniture, Fixtures + Equipment (Be Specific)		\$	

Soft costs, inc. contingency		\$	
Developer fee		\$	
Other (specify)		\$	
	Total:	\$	

PROJECT NARRATIVE

27. Summary project description: **Concisely** provide an overview of the project to be undertaken, including what will be planned, designed and/or constructed, service(s) to be performed, and the issues/opportunities to be addressed.

1,000 Character Limit

28. Projected economic benefits to St. Lawrence County and the State.

1,000 Character Limit

29. Asserted need: Why is the Applicant seeking Fund Benefits to support this project?

1,000 Character Limit

30. Has there been any announcement (press release, media reports, etc.) regarding this project? ☐ YES ☐ NO

31. Has any aspect of the project been started? If so, describe any activity showing how the project has been initiated, including, but not limited to:

- entering into or paying for any contracts, purchase offers, commitments, or other agreements for any project-related activities;
- business formation or incorporation directly related to the project;
- the project is required in order to fulfill a contract for which the Applicant was successful bidder, or to comply with a regulatory requirement.

1,000 Character Limit

32. Estimated project start date: (mm/dd/YY) **Estimated project completion date:** (mm/dd/YY)

33. Has the Applicant or any other person applied for Fund Benefits for any part of this project or a related project? ☐ YES ☐ NO
If yes, explain:

GENERAL PROJECT READINESS

34. Is the funding for the remaining project cost secured?

☐ YES ☐ NO If No, explain:

1,000 Character Limit

35. Does this project require a permit, approval or funding from any other governmental entity (federal, state or local)?

☐ YES ☐ NO

36. Does this project involve or require the adoption, amendment or variance of any local laws, ordinances, or resolutions?

☐ YES ☐ NO

a. If yes to either of these questions, please list the name of the government entity and the permit, approval, funding or other action sought; also, please provide the status of the request, any actions taken or anticipated to be taken by the government entity, and the date (actual or projected).

1,000 Character Limit

37. Does this project involve activities that may affect the environment by changing the use, appearance or condition of any natural resource or structure?

☐ YES ☐ NO If yes, please describe the anticipated environmental review(s) that will be conducted as part of this Project, and the status of any ongoing environmental review(s).

38. Does the project require review pursuant to the State Environmental Quality Review Act (SEQRA)? (For information about SEQRA, visit <http://www.dec.ny.gov>.) ☐ YES ☐ NO If yes, what is the status?

1,000 Character Limit

If yes, then provide a copy of the SEQRA review documents, e.g. Environmental Assessment Form, Negative Declaration, or Draft and Final Environmental Impact Statements and Statement of Findings.

39. Does the project involve:

- Demolition or rehabilitation of a structure(s) more than 50 years old? ☐ YES ☐ NO
- Ground disturbing activities, demolition or rehabilitation of a structure(s) or new construction on or contiguous to a site listed in or eligible for listing in the State or National Registers of Historic Places, or National Historic Landmarks? ☐ YES ☐ NO

If yes to either of the above, the project requires consultation with the State Historic Preservation Office (SHPO). (For more information, visit <http://nysparks.state.ny.us/shpo>.) If the project requires SHPO consultation, what is the status?

1,000 Character Limit

40. In consideration of your preceding responses, can the project proceed immediately following a signed incentive proposal allocating the requested award amount?

☐ YES ☐ NO If No, explain: 500 Character Limit

PROJECT CHARACTERISTICS AND READINESS (*pertains only to projects involving site, building, infrastructure, construction*)

41. Does Applicant currently own the project site in question?

☐ YES ☐ NO If no, describe how and when the Applicant plans to acquire the site:

1,000 Character Limit

42. Will the applicant own the project site upon project completion? ☐ YES ☐ NO If no, explain:

1,000 Character Limit

43. Will the Applicant own the project upon completion? ☐ YES ☐ NO If no, explain:

1,000 Character Limit

44. Will the Applicant operate the project? ☐ YES ☐ NO If no, explain:

1,000 Character Limit

45. If Applicant currently leases or intends to lease the site, what are the terms of the lease?

1,000 Character Limit

46. Does the project require a zoning change or variance, site plan, special permit, subdivision, or other planning or zoning approval (including historic preservation)?

☐ YES ☐ NO If yes, what is the status of the approval?

1,000 Character Limit

47. Is the project on land that may be environmentally contaminated or has a Phase 1 Environmental Site Assessment been performed?

☐ YES ☐ NO If yes, is there any contamination and what are the plans for remediation, if any?

1,000 Character Limit

PROJECT CHARACTERISTICS AND READINESS (pertains only to projects involving site, building, infrastructure, construction), cont'd

48. Has an architect been engaged?

☐ YES ☐ NO If yes, provide name and firm:

a. Which drawings have been prepared? ☐ None ☐ Schematics ☐ Design ☐ Construction

49. Has a construction manager and/or general contractor been selected?

☐ YES ☐ NO If yes, specify which and name firms:

50. Attach copies of third party estimates for project costs as Exhibit 8, Cost Estimates.

☐ Attached ☐ Not Available

51. List all other federal, state and local permits or approvals required for the project:

	Agency Name	Permit Name	Status
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

ALIGNMENT WITH REGIONAL ECONOMIC DEVELOPMENT COUNCIL STRATEGIES AND PRIORITIES

Please complete this section to allow the Board to consider the extent to which the proposed project is consistent with the strategies and priorities identified by the North Country Regional Economic Development Council ("NCREDC"). For additional information on the NCREDC, please go to <http://regionalcouncils.ny.gov/content/north-country>. Note: The fact that a project is not consistent with these strategies and priorities will not disqualify it from consideration.

52. Will the project support international trade with, or international investment in the region from, Canada?

☐ Yes ☐ No If yes, please explain.

1,000 Character Limit

53. Will the project support innovative entrepreneurs and small business start-ups or expansions?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

54. Is the proposed project a priority project, or will it support a priority project, identified by the NCREDC?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

55. Will the project leverage private investment to advance regional tourism?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

56. Will the project advance or diversify the agricultural industry's presence in the region?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

57. Will the project result in the production or use of clean energy? ☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

58. Will the project result in the creation of new jobs, or capital investments that will lead to new jobs?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

59. Does the project support any current strategies and priorities identified by the NCREDC that are not listed above?

☐ YES ☐ NO If yes, please explain.

1,000 Character Limit

ALIGNMENT WITH PROCEEDS CRITERIA

60. In all likelihood will the project take place if the Applicant does not receive an award of Fund Benefits? ☐ YES ☐ NO If no, explain:

1,000 Character Limit

61. Will the project result in new capital investment in the State by the Applicant?
☐ YES ☐ NO If yes, explain:

1,000 Character Limit

62. Will the project result in the creation of new permanent or temporary jobs in St. Lawrence County? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

63. Will the project result in the retention of permanent jobs in St. Lawrence County that would otherwise be lost in the absence of an award? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

64. Is the Applicant willing to commit to the creation or retention of permanent jobs? ☐ YES ☐ NO If no, explain:

1,000 Character Limit

65. Is the Applicant at risk of closing or curtailing facilities or operations in St. Lawrence County or other parts of the State in the absence of an award? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

66. Is the Applicant at risk of relocating facilities or operations out of St. Lawrence County or other parts of the State in the absence of an award? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

67. Is the Applicant at risk of losing a significant number of jobs in St. Lawrence county and other parts of the State, in the absence of an award? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

68. Explain the significance of the project to the economy of the St. Lawrence County in which the project is located and the surrounding area:

1,000 Character Limit

ALIGNMENT WITH PROCEEDS CRITERIA, cont'd

69. If this project entails the construction, expansion or rehabilitation of facilities, is the applicant willing to commit to implement tangible investments in energy efficiency measures as a condition to receiving an award of Fund Benefits? ☐ YES ☐ NO If yes, explain:

1,000 Character Limit

70. If Applicant has other NYS locations, will operations at those locations be affected (positively or adversely) as a result of receiving an award of Fund Benefits?

☐ YES ☐ NO If yes, explain:

1,000 Character Limit

GOVERNMENT AND OTHER SUBSIDIES/ASSISTANCE

SALES TAX EXEMPTIONS

71. Has Applicant received, or does Applicant expect to receive, a Sales Tax Exemption Certificate or a sales tax refund?

☐ YES ☐ NO

If yes, please provide the expected value of the total exemption or refund \$ and the years it will be valid .

PROPERTY TAX ABATEMENTS

72. Will the project receive property tax abatement through §485-b, §485-e, or a PILOT through an industrial development agency?

☐ YES ☐ NO

If yes, please provide the schedule of the annual savings over the term.

Year	Annual Savings	Other Information

OTHER GOVERNMENT SUBSIDIES/ASSISTANCE

73. Please provide the following information for any additional local, state or federal government subsidy/assistance applicant has applied for to support the project and current status of application:

Source	Type of Subsidy	Annual Savings	Term

GOVERNMENT AND OTHER SUBSIDIES/ASSISTANCE, cont'd

OTHER SUBSIDIES/ASSISTANCE

74. Please provide the following information for any additional form of subsidy/assistance applicant has applied for to support the project and current status:

Source	Type of Subsidy	Annual Savings	Term

RESPONSIBILITY

INSTRUCTIONS: If the answer to any question below is Yes, please explain as Exhibit 3, Responsibility Explanation.

75. Has the Applicant, any senior manager or principal of the Applicant, or any affiliate of the Applicant ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any such charges pending?

☐ YES ☐ NO

76. Has the Applicant or any affiliate been cited for a violation of federal, State or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or any other operating practices?

☐ YES ☐ NO

77. Is the Applicant or any affiliate delinquent on any NYS, federal or local tax obligations or has it been delinquent on any such tax obligations within the last 5 years?

☐ YES ☐ NO

78. Has the Applicant or any affiliate ever been involved in bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?

☐ YES ☐ NO

79. Has the Applicant or any affiliate ever settled a debt with a lending institution for less than the full amount outstanding?

☐ YES ☐ NO

80. Are there any outstanding judgments or liens pending against the Applicant or any affiliate other than liens in the normal course of business?

☐ YES ☐ NO

81. Is the Applicant or any affiliate presently the subject of any litigation, or is any litigation threatened, which may have a material adverse effect on their financial condition or the project?

☐ YES ☐ NO

APPENDIX A – BUSINESS INVESTMENT TRACK

BUSINESS INVESTMENT TRACK – EMPLOYMENT COMMITMENTS

INSTRUCTIONS: This section must be completed by Business Investment Applicants. Such Applicants will be required to achieve/maintain employment commitments for a stated period as provided for in any Fund Benefits Agreement. This section may also be completed by other Applicants to support the merits of their project.

82. Please complete the following:

Committed Employees*			
	Applicant		Average Annual Wage
Project location 1	Current Baseline	Projected Commitment	\$
Project location 2 (if applicable)	Current Baseline	Projected Commitment	\$
Project location 3 (if applicable)	Current Baseline	Projected Commitment	\$
Project location 4 (if applicable)	Current Baseline	Projected Commitment	\$
Total:	Current Baseline	Projected Commitment	

*A successful Applicant's employment commitments will be specified in its Fund Benefits Agreement. Generally, employment commitments will need to be met through the total number of full-time permanent positions held by: (1) individuals employed by the Applicant at the project ("Applicant Employees"); and (2) individuals who are contractors (or are employed by contractors of the Applicant) and who are assigned to work exclusively for the Applicant at the project for a minimum of 35 hours per week for not less than four consecutive weeks providing services that could otherwise be provided by a full-time employee ("Contract Employees"). Applicant Employees and Contract Employees are collectively referred to as "Committed Employees." The number of Committed Employees may not include individuals employed on a part-time basis (less than 35 hours per week); provided, however, that two permanent employees each working at least 20 hours but not more than 35 hours per week shall be counted as one Committed Employee.

If the Applicant has NY State-based facility in addition to the project location(s) identified above, please attach a list as Exhibit 4 Additional NY State Facilities. The list should include each major location, facility address and number of Applicant Employees and Contract Employees.

83. Of the Committed Employees located in NY State, what share (%) are NY State residents? %

84. Employees committed by applicant at project location (Enter employee quantities in the table below; year 1 is the year in which the project commences.)

Committed Employees

Baseline Committed Employees, not at risk
 Baseline Committed Employees, at risk
 Committed Employees to be added
 Total Committed Employees at Year End

Current	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7

85. At-risk positions: If any positions counted above are "at risk" of being lost or moved out of state, please explain:

1000 Character Limit

APPENDIX B – INNOVATION/ENTREPRENEUR TRACK

INNOVATION/ENTREPRENEUR TRACK ONLY

INSTRUCTIONS: *This section must be completed by Innovation/Entrepreneur Applicants.*

- 86.** Summarize total New York State small business entrepreneur assistance/investment track record, including volume, typical profile of portfolio companies, typical structure of investment, typical participation and oversight of each portfolio company, typical compensation structure for Applicant, co-investments secured, follow-on investments made, and overall performance.

1,000 Character Limit

- 87.** Summarize expected or typical outcomes, including investment returns, job creation, creation of tax revenue and business launch or expansion outcomes.

1,000 Character Limit

- 88.** Describe the current target markets (industries or geographic areas) in which the Applicant has particular focus and the Applicant's view of the current state of those geographic areas, sectors or industries. (narrative)

1,000 Character Limit

- 89.** Describe the Applicant's deal sourcing strategy and process. Describe how many equity investments are typically evaluated each year by the Applicant and, of these, how many commitments are made. Discuss how regional resource partners are used for sourcing and making investments (universities, incubators, angel networks, etc.).

1,000 Character Limit

- 90.** Describe the Applicant's capacity to source, evaluate, and finalize investments in seed stage companies in the region. Describe the specific outreach and deal sourcing plan the Applicant would employ to identify potential investments.

1,000 Character Limit

APPENDIX C – TRAINING/WORKFORCE DEVELOPMENT TRACK

TRAINING/WORKFORCE DEVELOPMENT TRACK ONLY

INSTRUCTIONS: This section must be completed by Training/Workforce Development Applicants.

91. Fully describe the training that will be provided to participants under this project.

1000 Character Limit

92. Identify the sector or industry cluster to which the Applicant business belongs. If the Applicant is a training provider, please see the "Help Section" below.

HELP SECTION:

For example, health care, advanced manufacturing, clean energy, transportation, construction, etc. For training providers, please indicate the sector of the business for whom the training is being provided.

1000 Character Limit

93. Describe, identify, and document a compelling need for the proposed training, including the nature of the skills assessment performed, the results of the assessment, and the current state of the business, industry and economy that dictate the need for training; and provide full descriptions of every course.

1000 Character Limit

94. Describe the occupational skills to be acquired and how they are transferable.

HELP SECTION

Occupational training is defined as instruction conducted in an institutional or worksite setting designed to provide individuals with or upgrade them in the technical skills and information required to perform a specific job or group of jobs. Transferable skills are recognized industry-wide or across multiple industries.

1000 Character Limit

95. Identify the anticipated outcomes of the program including: how proposed training will positively impact the business, the percentage of trainees who will receive an industry recognized credential or certification upon completion, a description of the credential/certification, the percentage of participants to be retained after training.

1000 Character Limit

96. Please provide any historical data that shows the placement rates in jobs as a direct result of the training they received and please provide future projections for job placement as a direct result of the training they will receive.

1000 Character Limit

APPENDIX D – TOURISM/MARKETING TRACK

TOURISM MARKETING TRACK ONLY

INSTRUCTIONS: *This section must be completed by Tourism/Marketing Applicants.*

97. Can you provide evidence or research of consumer demand for your project?

☐ YES ☐ NO If yes, please provide.

1000 Character Limit

98. What types of tourists/travelers are you hoping to reach through your project?

1000 Character Limit

99. Describe how your project is tourism-driven.

1000 Character Limit

100. Summarize your marketing message/concept for this project.

1000 Character Limit

101. How does your project distinguish itself from others in the marketplace?

1000 Character Limit

102. Describe the estimated impact of your project on the number of visitors to the region and/or the amount visitors spend.

1000 Character Limit

APPENDIX E – AGRICULTURAL INVESTMENT TRACK

AGRICULTURAL INVESTMENT TRACK ONLY

INSTRUCTIONS: *This section must be completed by Agricultural Applicants.*

103. Please explain how this project will result in increased access to Agricultural Markets.
1,000 Character Limit

104. Please describe any new products this project will allow to come to market.
1,000 Character Limit

105. Please describe any new efficiency process this project will create.
1,000 Character Limit

106. Please explain how this project will increase production.
1,000 Character Limit

107. Please explain how this project will reduce cost.
1,000 Character Limit

108. Please describe how this project creates a marketing strategy profiling local foods that will result in increased sales across the industry sector in the Region.
1,000 Character Limit

109. Please explain how this project will connect local growers to research that will improve growing techniques, processing, packaging and distribution, the creation of new products, and/or the creation of links to new markets.
1,000 Character Limit

110. Please explain how this project will promote new careers in agriculture in NNY.
1,000 Character Limit

111. Please explain how this project will create and or promote a Regional brand in Agricultural markets.
1,000 Character Limit

APPENDIX F – OTHER ELIGIBLE PROJECTS TRACK

OTHER ELIGIBLE PROJECTS TRACK ONLY

INSTRUCTIONS: This section must be completed by Applicants proposing a project that does not fall with any of the other Tracks, such as energy related projects, programs and services; studies; and research and development.

Applicants should not use this Track if the project fits into one or more of the other Tracks. Applicants under this Track are strongly encouraged to provide the type of information requested under other Tracks if such information will help describe the benefits of the proposed project (such as job creation).

112. Please describe why the proposed project does not fit into one of the other Tracks provided for in this Application.
1,000 Character Limit

113. Please summarize the project outcomes expected (i.e., financial results, opportunities presented, description of the finished product, impact on productivity, other benefits achieved, as appropriate). If there is job impact associated with your project, please complete questions 83-86 above.
1,000 Character Limit

114. Identify the sector or industry cluster to which the Applicant business belongs.
1000 Character Limit

115. If the project an energy-related project, please indicate the specific benefits to be achieved.
1000 Character Limit

116. If this project involves the undertaking of a study, please indicate how the results of the study will be used in order to derive benefits.
1000 Character Limit

EXHIBIT 1

Organizational Chart

Please provide an organizational chart depicting the Applicant, its corporate owners or members, subsidiaries and affiliates, and the relationships among them.

EXHIBIT 2
Commitment Letters/Term Sheets

Please provide copies of commitment letters or term sheets for the funding sources indicated on the Sources and Uses Section of this Application.

EXHIBIT 3

Responsibility Explanation

Check here if ☐ Not Applicable

If the answer to any question in the Responsibility section is "Yes," please explain here.

EXHIBIT 4

Additional NY State Facilities

Identify all of the Applicant's NY State facilities, in addition to the project locations identified in the Business Investment Track - Employment Commitments Track questions, section of this Application. Include each major location, facility address and number of Applicant Employees and Contract Employees.

EXHIBIT 5

Existing Obligations

If Applicant is currently subject to any job creation, employment level, capital expenditure or other obligations resulting from other public (federal, state or local) or private funding programs, provide a detailed explanation of the obligations and programs.

EXHIBIT 6

Developer Background

**Provide individual and corporate resumes of developer and development entities
(projects developed, projects under management, etc.)**

EXHIBIT 7

Photos & Drawings

Attach relevant photographs and drawings

EXHIBIT 8

Cost Estimates

Attach copies of third party estimates for project costs.

EXHIBIT 9

Corporate Financial Information

**Provide the following information for: (1) Applicant, (2); any person/entity owning 50% or more of the Applicant; and (3) any person/entity providing a third-party job commitment on which the Applicant seeks to rely for support of its project.
(Applicants that are publicly held companies need not provide this information.)**

- Three (3) years of most recent financial statements
 - Must include balance sheet, income statement and statement of cash flows
 - If financial statements are not audited, signed tax returns for the same three (3) year period must be provided
- Internally-prepared year-to-date financial statements dated no older than 90 days prior to application submission

EXHIBIT 10

Business Plan and 3-Year Financial Projections

If the proposed project or Applicant is a start-up company, please provide personal financial statements as per Exhibit 11 and a business plan that includes an explanation of: (1) the Applicant's product or service; (2) current and future size of market; (3) the Applicant's current market share or potential future market share illustrating how increased market share can be achieved; (4) three-year financial projections (income statement, cash flow statements and balance sheets); and, (5) management team members bios.

EXHIBIT 11

Personal Financial Statement

Provide the following information for any individual owning 20% or more of the Applicant, or any group of immediate family members together owning 20% or more of the Applicant.

- Personal Financial Statement (see next page)
- Tax return for the most recent tax year
- Biographical information or resume
- Bank reference information
 - Bank name
 - Contact name
 - Contact telephone and fax numbers

PERSONAL FINANCIAL STATEMENT

As of _____

Name:	Business Phone:
Residence Address:	Residence Phone:
City, State, & Zip Code:	
Business Name of Applicant/Borrower:	

ASSETS (Omit Cents)	LIABILITIES (Omit Cents)
Cash on hand & in Banks \$	Accounts Payable \$
Savings Accounts \$	Notes Payable to Banks and others (Describe in Section 2) \$
IRA or Other Retirement Account \$	Installment Account (Auto) Mo Payment \$
Accounts & Notes Receivable \$	Installment Account (Other) Mo. Payments \$
Life Insurance-Cash Surrender Value Only \$ (Complete Section 8)	Loan on Life Insurance \$
Stocks and Bonds \$ (Describe in Section 3)	Mortgages on Real Estate \$
Real Estate \$ (Describe in Section 4)	Other Personal Property \$ (Describe in Section 4)
Automobile-Present Value \$	Unpaid Taxes \$ (Describe in Section 6)
Other Personal Property \$ (Describe in Section 5)	Other Liabilities \$ (Describe in Section 7)
Other Assets \$	Total Liabilities \$
	Net Worth \$
	Total \$

(Describe in Section 5)	
Total \$	

Section 1. Source of Income	Contingent Liabilities
Salary \$	As Endorser or Co-Maker \$
Net Investment Income \$	Legal Claims & Judgments \$
Real Estate Income \$	Provision for Federal Income \$
Other Income (Describe below)* \$	Tax Other Special Debt \$

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.
 Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)			
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased	\$	\$	\$
Original Cost	\$	\$	\$
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance	\$	\$	\$
Amount of Payment per Month/Year	\$	\$	\$
Status of Mortgage			

Section 5. Other Personal Property and Other Assets.
(Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes.
(Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities.
(Describe in detail.)

Section 8. Life Insurance Held.
(Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize NNYPAB to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution.

Signature:	Date:	Social Security Number:
Signature:	Date:	Social Security Number:

EXHIBIT 12

Articles of Incorporation

Please provide a copy of the Applicant's articles of incorporation.

Sample Statement of Sources & Uses			
Sources	Provider	Amount	Terms
Subject request for Fund Benefits		\$ 300,000	
Senior debt	Bank A	\$ 1,500,000	10 yrs, 20 yr amort @ 7%
Subordinate debt	Loan Fund B	\$ 500,000	10 yrs, 20 yr amort @ 12%
Total Other Sources: Committed (see below)		\$ 300,000	
Total Other Sources: Potential (see below)		\$ 235,000	
Corporate cash/line of credit/Related Entity loan		\$ -	
Additional cash equity contribution		\$ 315,000	
Deferred developer fee		\$ -	
Other (specify)		\$ -	
Unidentified			
	Total:	\$ 3,150,000	
Other Sources: Committed			Terms
Provider	Use of Funds		
Local Loan Fund	hard costs	\$ 100,000	5 yrs, amortizing, 5%
Foundation Grant	land acquisition	\$ 100,000	grant
Municipal Grant	environmental remediation	\$ 100,000	grant
	Total:	\$ 300,000	
Other Sources: Potential			Terms
Provider	Use of Funds + Status of Request		
Foundation A	historical preservation; answer expected 12/09	\$ 100,000	
Foundation B	environmental remediation; answer expected 9/09	\$ 100,000	
Foundation C	streetscape improvements; status unknown	\$ 100,000	
	Subtotal:	\$ 300,000	
	Allowance for rejection of funding requests from potential sources (in order to show balanced budget):	\$ -	
	Total:	\$ 300,000	
	Allowance for rejection of funding requests from potential sources (in order to show balanced budget):	\$ (65,000)	
	Total:	\$ 235,000	
Uses	Explanation	Cost	
Planning/feasibility study costs (specify)			
Land acquisition		\$ 100,000	
Acquisition of existing assets (specify)			
Demolition			
Environmental remediation		\$ 500,000	
Hard costs, inc. contingency		\$ 2,000,000	
Infrastructure costs (specify)		\$ -	
Machinery + Equipment (specify)		\$ 500,000	
Furniture, Fixtures + Equipment (specify)		\$ -	
Soft costs, inc. contingency		\$ -	
Developer fee		\$ 50,000	
Other (specify)		\$ -	
	Total:	\$ 3,150,000	

Sample Job Commitment Spreadsheet

Full-time Permanent Employees

	Current	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Current baseline employment, not at risk	75	75	75	75	75	75	75	75
Current employment at risk	25	25	25	25	25	25	25	25
New jobs to be added over Current Year		25	50	75	50	25	25	25
Total Permanent Employment at Year End	100	125	150	175	150	125	125	125