



## Onondaga County Industrial Development Agency

# Application

Return to:

Mary Beth Primo  
Executive Director, OCIDA  
421 Montgomery Street, 14<sup>th</sup> Floor  
Syracuse, New York 13202  
Phone: 315-435-3770  
Fax: 315-435-3669  
Email: [mprimo@ongov.net](mailto:mprimo@ongov.net)

# ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

## INSTRUCTIONS

1. Fill in all blanks, using “none”, “not applicable” or “N/A” where the question is not appropriate to the Project, which is the subject of this Application (the “Project”). If you have any questions about the way to respond, please call the Agency at (315) 435-3770.
2. If an estimate is given as the answer to a question, put “(est.)” after the figure or answer, which is estimated.
3. If more space is needed to answer any specific question, attach a separate sheet.
4. When completed, return this application by mail or fax to the Agency at the address indicated on the cover page of this Application. A signed application may also be submitted electronically in PDF format to the Executive Director, Mary Beth Primo at (mprimo@ongov.net), however the application will not be considered by the Agency until the application fee has been received.
5. The Agency will not give final approval for this Application until the Agency receives a completed NYS Full Environmental Assessment Form concerning the Project, which is the subject of this Application. The form is available on [syracusecentral.com](http://syracusecentral.com).
6. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the Agency (with certain limited exceptions) are open to public inspection and copying. If the Applicant feels that there are elements of the Project which are in the nature of trade secrets which, if disclosed to the public or otherwise widely disseminated, would cause substantial injury to the Applicant’s competitive position, this Applicant may identify such elements in writing and request that such elements be kept confidential in accordance with Article 6 of the Public Officers Law.
7. The Applicant will be required to pay the Agency Application fee and, if accepted as a project of the agency, all administrative fees as stated in Section III (H) of the Application, as well as legal fees of the Agency.
8. A complete application consists of the following:
  - A. The Application
  - B. Appendix I – Employment Plan, Parts 1 and 2
  - C. Appendix II –Local Access Agreement
  - D. Attachment IB -- Corporate schematic, if a subsidiary
  - E. Attachment II A – Preliminary or Existing Plans and Sketches
  - F. Attachment IIO -- Corporate Financial Information
  - G. Attachment IIP – NYS Full Environmental Assessment Form
  - H. A check payable to the Agency in the amount of \$500.00

**It is the policy of the Agency that any project receiving benefits from the Agency will utilize 100% of local contractors and local labor for the construction period of the project unless a waiver is granted in writing by the Agency.**

## ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

Please answer all questions by filling in the blanks. Use attachments as necessary.

### I. APPLICANT INFORMATION

DATE: \_\_\_\_\_

<b>Company Name:</b>					
<b>Mailing Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>Phone:</b>			<b>Fax:</b>		
<b>Contact Person:</b>					
<b>Email Address:</b>					
<b>FED ID Number:</b>					

**A. Principal Owners/Officers/Directors:** List owners with 15% or more in equity holdings with percentage ownership.

Name	% Ownership	Address	Phone

**B. Corporate Structure:** Attach schematic if Applicant is a subsidiary or otherwise affiliated with another entity.

Form of Entity:

Corporation Name of State Incorporated \_\_\_\_\_

Partnership  General  Limited  
 Number of general partners \_\_\_\_\_  
 Number of limited partners \_\_\_\_\_

Limited Liability Company/Partnership  
 Number of members: \_\_\_\_\_

Sole Proprietorship

If a corporation, partnership, or limited liability company/partnership:

What is the date of establishment? \_\_\_\_\_

Place of organization \_\_\_\_\_ and,

If a foreign organization, is the Applicant authorized to do business in the State of New York?  Yes  No  N/A

**C. Applicant's Counsel**

Name:					
Firm:					
Mailing Address					
City:		State:		Zip:	
Phone:		Fax:			

**D. Applicant's Accountant**

Name:					
Firm:					
Mailing Address					
City:		State:		Zip:	
Phone:		Fax:			

**II. PROJECT INFORMATION**

A. Describe the proposed acquisitions, construction or reconstruction, including buildings, site improvements and equipment. Also, indicate square feet by usage (e.g., office, laboratory, manufacturing), and type of construction. Attach a copy of preliminary plans or sketches, and/or floor plan of existing facility.

B. Location of Project, including city, town or village within which it is located. Attach a map showing location of project:

C. Utilities on Site:

Water: Yes No  
Gas: Yes No

Electric: Yes No  
Sanitary/Storm Sewer: Yes No

D. Initial owner, operator or manager of the Project (land, building, improvements and/or personal property)

If other than Applicant, by what means will the site be acquired for this Project:

E. Zoning of Project Site: Current Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

F. Are any variances needed: Yes No

If Yes, describe:

G. Principal use of Project upon completion:

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H. 1. Will the completion of the Project result in the removal of a plant or facility of the Project Occupant from one area of the State of New York to another area of the State of New York? Yes No

2. Will the completion of the Project result in the abandonment of one or more plants or facilities of the Project Occupant located in the State of New York? Yes No

3. If any answer to questions 1 or 2 above is yes, is the Project reasonably necessary to discourage the Project Occupant from removing such other plant or facility to a location outside the State of New York? Yes No

If any answer to questions 1 or 2 above is yes, is the Project reasonably necessary to preserve the competitive position of the Project occupant in its respective industry? Yes No

4. Will the Project include facilities or primarily used in making retail sales to customers who personally visit such facilities? Yes No

If yes, will the cost of these facilities exceed one-third of the total project cost? Yes No

I. Estimate how many new full-time equivalent (FTE)<sup>1</sup> jobs will be created or retained as a result of this Project:

Construction: \_\_\_\_\_ Existing: \_\_\_\_\_ New: \_\_\_\_\_

J. Payroll & Employment Information

1. Annual Payroll

Present	
First Year After Completion of Project	
Second Year After Completion of Project	

2. Employment Plan – Complete Appendix I

<sup>1</sup> One FTE equals 1 employee working 35 hours or more, or 2 or more employees working a total of 35 hours

K. Estimated Project Costs. Give an accurate estimate of the following costs:

Land:	
Building Construction:	
Site Work:	
Legal Fees: (other than Company's Attorneys)	
Engineering Fees:	
Financial Charges:	
Machinery & Equipment:	
Agency Fee:	
Other (Specify):	
Estimated Total Cost:	

L. Financial Assistance being applied for:

		<u>Estimated Value</u>
<input type="checkbox"/>	Real Property Tax Abatement	
<input type="checkbox"/>	Mortgage Tax Exemption	
<input type="checkbox"/>	Sales and Use Tax Exemption	
<input type="checkbox"/>	Issuance by the Agency of Tax Exempt Bonds	
<input type="checkbox"/>	Green Building PILOT Tax Credit	
<input type="checkbox"/>	NYS Pass-thru Grant <sup>2</sup>	

M. Cost Benefit Analysis:

<u>Costs = Financial Assistance</u>		<u>Benefits = Economic Development</u>	
Estimated Sales Tax Exemption		FTEs (Jobs) Created	
Estimated Mortgage Recording Tax Exemption		FTEs(Jobs) Retained	
Estimated Property Tax Abatement		Private Funds Invested	
Estimated Interest Savings IRB Issue		State and Federal Funds Invested	
		Other Funds Invested	

<sup>2</sup> Such as grant funds from the New York State Environmental Investment Program

N. Project Schedule:

Give an estimate of the project completion date. \_\_\_\_\_

O. Company Financial Information Attachment:

1. Copies of two most recent financial statements
2. Copy of most recent Annual Report
3. If available, sales, income projection for future years

P. Environmental Information

1. The Agency must make a determination of environmental significance for the project. A completed NYS Full Environmental Assessment Form must be submitted.

Q. Local Access Policy

1. The Agency requires all projects to use local contractors and labor. A draft Local Access Report must be submitted with the Agency application and with each request for a sales tax exemption certificate. A fully completed Report must be submitted at the time of Project Closing.

**III. REPRESENTATIONS BY THE APPLICANT**

The Applicant understands and agrees with the Agency as follows:

- A. Job Listings. In accordance with Section 858-b(2) of the New York General Municipal Law, the Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the Project will be listed with the New York State Department of Labor Community Services Division (the "DOL") and with the administrative entity (collectively with the DOL, the "WIA") of the service delivery area created by the Workforce Investment Act of 1998 in which the Project is located.
- B. First Consideration for Employment. In accordance with Section 858-b (2) of the New York General Municipal Law, the Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, where practicable, the Applicant will first consider persons eligible to participate in WIA programs who shall be referred by the WIA Entities for new employment opportunities created as a result of the Project.

- C. Annual Sales Tax Filings. In accordance with Section 874(8) of the New York General Municipal Law, the Applicant understands and agrees that, if the Project receives any sales tax exemptions as part of the Financial Assistance from the Agency, in accordance with Section 874(8) of the General Municipal Law, the Applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the Applicant and all consultants or subcontractors retained by the Applicant.
- D. Annual Employment Reports and Outstanding Bonds. The Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the Agency, on an annual basis, reports regarding the number of people employed at this project site. The applicant also understands and agrees to provide on an annual basis any information regarding bonds, if any, issued by the Agency for the project that is requested by the Comptroller of the State of New York.
- E. Recapture of Tax Abatements/Exemptions. The Applicant understands and agrees that the benefits received from tax abatements/exemptions shall be subject to recapture in accordance with the Agency's tax exemption policy.
- F. Local Labor and Contractor Policy. The applicant understands and agrees that local labor and contractors must be used for the construction of the Project, as stated in the Agency Local Access Policy. (Appendix II). The Applicant further understands that the Local Access Agreement form must be completed and included at the time of application, with each request for a sales tax exemption form and at the time of project closing.
- G. Absence of Conflicts of Interest. The Applicant has received from the Agency a list of the members, officers and employees of the Agency. No member, officers or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described:

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- H. Fees. This Application should be submitted with a non-refundable \$500.00 Application Fee to the Onondaga County Industrial Development Agency, 421 Montgomery Street, Syracuse, New York 13202 (Attn: Mary Beth Primo, Executive Director).

The Agency will collect a 1% (.01) administrative fee at the time of closing, based on the value of the bonds issued, or, if no bonds are issued, the estimated cost of the project listed in Section K. For manufacturing projects under \$10 million and for Library Association projects, the fee will be .75% (.0075) of the bond amount of project cost.

The Applicant and the individual executing this Application on behalf of the Applicant acknowledge that the Agency will rely on the representations made herein when acting on this Application and hereby represent that the statements made herein do not contain any untrue statement of a material fact and do not omit to state a material fact necessary to make the statements contained herein not misleading.

\_\_\_\_\_  
(Name of Applicant Company)

By: \_\_\_\_\_

Name:

Title:

Date:

IV HOLD HARMLESS AGREEMENT

Applicant hereby releases Onondaga County Industrial Development Agency and the members, officers, servants, agents and employees thereof (the "Agency") from, agrees that the Agency shall not be liable for and agrees to indemnify, defend and hold the Agency harmless from and against any and all liability arising from or expense incurred by (A) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the Application or the Project described therein or the tax-exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project, including without limiting the generality of the foregoing, all causes of action and attorneys' fees and any other expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing. If, for any reason, the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable or specified period of time, to take reasonable, proper or requested action, or withdraws, abandons, cancels or neglects the Application, or if the Agency or the Applicant are unable to reach final agreement with the respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in the process of the Application, including attorneys' fees, if any.

\_\_\_\_\_  
(Name of Applicant Company)

By:

\_\_\_\_\_

Name:

Title:

Date:

STATE OF NEW YORK)  
COUNTY OF \_\_\_\_\_) ss.:

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me, the undersigned, a notary public in and for the said State, personally appeared satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual or the person upon behalf of which the individual acted, executed this instrument.

\_\_\_\_\_

Notary Public

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY  
APPENDIX I  
EMPLOYMENT PLAN  
PART 1

Company Name				
Address				
City		ST		Zip
Type of Business				
Contact				
Phone		Email		

Please complete the following chart describing your projected employment plan following receipt of financing.

Current and Planned Full Time Occupations in Company	Current Number Full Time Jobs Per Occupation	Estimated Number of Full Time Jobs After Completion of the Project		
		1 year	2 year	3 year

Are the employees of your firm currently covered by a collective bargaining agreement?

Yes       No      If yes, Name and Local \_\_\_\_\_

Indicate whether labor pool in Onondaga County is adequate to fill new jobs.

Yes       No      If no, explain:

Under current law, an IDA must consider such things as job creation and job retention when approving projects.

By: \_\_\_\_\_

Name:

Title:

Date:

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION  
**APPENDIX I**  
**EMPLOYMENT PLAN**  
**PART 2**

*(Enter Company Name in three (3) places below and sign by a Company Officer)*

In consideration of the benefits provided by the Onondaga County Industrial Development Agency, \_\_\_\_\_, project beneficiary, agrees to cause any new employment opportunities created in connection with industrial or commercial projects financed by the proceeds of such obligations to be listed with the New York State Department of Labor Community Services Division (DOL) and with the CNY Works.

\_\_\_\_\_, project beneficiary, also agrees to report to the Onondaga County Industrial Development Agency on or before March 1 of each year on the status of employment opportunities filed with DOL, including the number of new employment opportunities created, the number listed and the number filled for the year ending the prior December 31.

\_\_\_\_\_, project beneficiary, further agrees that, to the extent practical and feasible, and subject to the requirements of any existing collective bargaining agreement, shall fill at least ten percent of new employment opportunities with persons eligible for service under the Workforce Investment Act.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Company: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

**ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION**

**Appendix II - Local Access Policy & Agreement**

In absence of a waiver permitting otherwise, every project seeking the assistance of the Onondaga County Industrial Development Agency (Agency) must use local general contractors, sub-contractors and labor for one-hundred percent (100%) of the construction of new, expanded, or renovated facilities. The project's construction or project manager need not be a local company. All projects of the Agency will be subject to monitoring by the Agency. Noncompliance may result in the revoking and/or recapture of all benefits extended to the project by the Agency. Local Labor is defined as laborers permanently residing in the State of New York counties of Cayuga, Cortland, Herkimer, Jefferson, Madison, Oneida, Onondaga, Oswego, Tompkins and Wayne. Local (General/Sub) Contractor is defined as a contractor operating a permanent office in the State of New York counties of Cayuga, Cortland, Herkimer, Jefferson, Madison, Oneida, Onondaga, Oswego, Tompkins and Wayne. The Agency may determine on a case-by-case basis to waive the local access policy for a project or for a portion of a project where consideration of warranty issues, necessity of specialized skills, significant cost differentials between local and non-local services or other compelling circumstances exist.

In consideration of the extension of financial assistance by the Agency, \_\_\_\_\_ (the Company) understands the Local Access Policy and agrees to complete Appendix II of the Agency application at the time of application to the Agency and as part of a request to extend the valid date of the Agency's tax-exempt certificate for the \_\_\_\_\_ project. The Company understands an Agency tax-exempt certificate is valid for 90 days effective the date of project inducement and extended for 90 day periods thereafter upon request by the Company. The Company further understands any request for a waiver to this policy must be submitted in writing and approved by the Agency before a tax-exempt certificate is issued or extended.

Company				General Contractor							
Representative for Contract Bids and Awards				Contact							
Address				Address							
City		ST		Zip		City		ST		Zip	
Phone		Fax		Phone		Fax					
Email				Email							
Project Address				Construction Start Date							
City		ST		Zip		Occupancy Date					

**PROJECT COMPONENTS<sup>3</sup>**

<b>Item</b>	<b>Contactor (Sub)</b>	<b>Address</b>	<b>Email</b>	<b>Phone</b>	<b>Amount</b>
Site work/Demolition					
Foundation and footings					
Building					
Masonry					
Metals					
Wood/casework					
Thermal /moisture proof					
Doors, windows, glazing					
Finishes					
Electrical					
HVAC					
Plumbing					
Specialties					
Machinery & Equipment					
Furniture and Fixtures					
Utilities					
Paving					
Landscaping					

<sup>3</sup> Please use additional pages if necessary to provide a complete list of contractors.

**Onondaga County Industrial Development Agency**  
Appendix II - Local Access Agreement/Contract Access Report  
Signature Page

I agree to the conditions of this agreement and certify all information provided regarding the construction and employment activities for the project as of \_\_\_\_\_, (date) is complete, true and correct.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Company: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Title: \_\_\_\_\_

## ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

### **Application Attachments Listing**

Attachment I B: Corporate schematic, **if applicant is a subsidiary**

Attachment II A: Preliminary Plan & Sketches for new facility or floor plan for existing facility

Attachment II O: Corporate Financial Information<sup>4</sup>

Attachment II P: NYS Full Environmental Assessment Form

Attachments II Q: Local Access Agreement

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<sup>4</sup> The Agency is required to respond to Freedom for Information Law requests. If the Applicant feels that there are elements of the Project which are in the nature of trade secrets which, if disclosed to the public or otherwise widely disseminated, would cause substantial injury to the Applicant's competitive position, this Applicant may identify such elements in writing and request that such elements be kept confidential in accordance with Article 6 of the Public Officers Law OCIDA Form 08 09