

Estimated Regular Taxes

		School District		Town		County		
		Equalization Rate:	0.82	Equalization Rate:	0.82	Equalization Rate:	0.82	
		Current Tax Rate/1000:	17.3555	Current Tax Rate/1000:	9.267200	Current Tax Rate/1000:	12.0136	
		PILOT Value	\$ 8,550,000	PILOT Value	\$ 8,550,000	PILOT Value	\$ 8,550,000	
PILOT %		PILOT rate	PILOT	PILOT rate	PILOT	PILOT rate	PILOT	Total PILOT
1	100%	14.52	\$124,113	7.75	\$66,272	10.05	\$85,912	\$276,297
2	100%	14.81	\$126,595	7.91	\$67,597	10.25	\$87,630	\$281,823
3	100%	15.10	\$129,127	8.06	\$68,949	10.45	\$89,383	\$287,459
4	100%	15.40	\$131,710	8.23	\$70,328	10.66	\$91,170	\$293,208
5	100%	15.71	\$134,344	8.39	\$71,735	10.88	\$92,994	\$299,072
6	100%	16.03	\$137,031	8.56	\$73,169	11.09	\$94,854	\$305,054
7	100%	16.35	\$139,771	8.73	\$74,633	11.32	\$96,751	\$311,155
8	100%	16.67	\$142,567	8.90	\$76,125	11.54	\$98,686	\$317,378
9	100%	17.01	\$145,418	9.08	\$77,648	11.77	\$100,659	\$323,726
10	100%	17.35	\$148,327	9.26	\$79,201	12.01	\$102,673	\$330,200
11	100%	17.70	\$151,293	9.45	\$80,785	12.25	\$104,726	\$336,804
12	100%	18.05	\$154,319	9.64	\$82,401	12.49	\$106,821	\$343,540
			\$1,664,615		\$888,843		\$1,152,258	\$3,705,716

	School	Town	County	Village	Total
Estimated 12 year Regular Taxes	\$1,664,615	\$888,843	\$1,152,258	\$0	\$3,705,716
Estimated 12 year PILOT Payments	\$659,342	\$352,064	\$456,401	\$0	\$1,467,807
Estimated 12 year Savings	\$1,005,273	\$536,779	\$695,857	\$0	\$2,237,909

Community Benefit PILOT

		School District		Town		County		
		Equalization Rate:	0.82	Equalization Rate:	0.82	Equalization Rate:	0.82	
		Base Tax Rate/1000:	17.3555	Base Tax Rate/1000:	9.267200	Base Tax Rate/1000:	12.013600	
		PILOT Value	\$ 8,550,000	PILOT Value	\$ 8,550,000	PILOT Value	\$ 8,550,000	
Exemption %	PILOT rate	PILOT	PILOT rate	PILOT	PILOT rate	PILOT	Total PILOT	
1 100%	14.52	\$0	7.75	\$0	10.05	\$0	\$0	
2 100%	14.81	\$0	7.91	\$0	10.25	\$0	\$0	
3 100%	15.10	\$0	8.06	\$0	10.45	\$0	\$0	
4 90%	15.40	\$13,171	8.23	\$7,033	10.66	\$9,117	\$29,321	
5 80%	15.71	\$26,869	8.39	\$14,347	10.88	\$18,599	\$59,814	
6 70%	16.03	\$41,109	8.56	\$21,951	11.09	\$28,456	\$91,516	
7 60%	16.35	\$55,909	8.73	\$29,853	11.32	\$38,700	\$124,462	
8 50%	16.67	\$71,283	8.90	\$38,063	11.54	\$49,343	\$158,689	
9 40%	17.01	\$87,251	9.08	\$46,589	11.77	\$60,396	\$194,235	
10 30%	17.35	\$103,829	9.26	\$55,441	12.01	\$71,871	\$231,140	
11 20%	17.70	\$121,034	9.45	\$64,628	12.25	\$83,781	\$269,443	
12 10%	18.05	\$138,887	9.64	\$74,161	12.49	\$96,139	\$309,186	
		\$659,342		\$352,064		\$456,401	\$1,467,807	

Attention Applicants:

On March 28, 2013, New York State established new recordkeeping, reporting, and recapture requirements for Industrial Development Agency ("IDA") projects that receive sales tax exemptions.

The new NYS sales tax recording and reporting requirements for IDAs include:

- ◆ Maintaining records of the amount of sales tax benefits provided to each project and making those records available to the State upon request.
- ◆ Reporting to NYS, within 30 days after providing financial assistance, the amount of sales tax benefits provided to the project.
- ◆ Posting on the internet and making available without charge copies of an IDA's resolutions and project agreements.

The statute now requires IDAs to recapture NYS sales tax benefits when:

- ◆ The project was not entitled to receive those benefits;
- ◆ The exemptions exceed the amount authorized, or are claimed for unauthorized property or services; and
- ◆ The project operator failed to use property or services in the manner required by its IDA agreements.

What this means for OCIDA projects:

- ◆ **Please ensure that you provide a realistic estimate; the new regulations require OCIDA to recapture any benefit that exceeds the amount listed in a company's application. Therefore, please provide a realistic estimate of the sales tax exemption your company anticipates receiving.**
- ◆ Projects subject to recapture must remit payment within 20 days of OCIDA's request.
- ◆ All project agreements and resolutions will now be publicly available on OCIDA's website (<http://syracusecentral.com/idameetingmaterials.aspx>).



ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION INSTRUCTIONS

1. Fill in all blanks, using "none", "not applicable" or "not available" 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 below. A signed application may also be submitted electronically in PDF format to the Agency Secretary, Honora Spillane at hspillane@ongov.net. **An 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 at <http://syracusecentral.com/Economic-Development-Services-Industrial-Development-Agency.aspx>.
6. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the OCIDA (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 must identify such elements in writing and request that such elements be kept confidential. In accordance with Article 6 of the Public Officers Law, the OCIDA may also redact personal, private, and/or proprietary information from publicly disseminated documents.
7. The Applicant will be required to pay the Agency Application fee and, if accepted as a project of the agency, all administrative and legal fees as stated in Section V (H) of the Application.
8. A complete application consists of the following eight items:
 - ◆ The Application
 - ◆ Employment Plan - Appendix A.
 - ◆ Conflict of Interest Statement - Appendix B
 - ◆ Local Access Agreement - Appendix C
 - ◆ Description of project, Site Plans/Sketches, and Maps if necessary
 - ◆ NYS Full Environmental Assessment Form
 - ◆ A check payable to the Agency in the amount of \$1000
 - ◆ A check payable to Gilberti Stinziano Heintz & Smith, P.C. in the amount of \$2,500

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.

Return to:

Julie Cerio
Executive Director, OCIDA
333 W. Washington Street, Suite 130
Syracuse, NY 13202
Phone: 315-435-3770
Fax: 315-435-3669

Onondaga County Industrial Development Agency Application

I. Applicant Data

A. Contact Information

Company Name:	Syracuse Apartments, LLC			
Mailing Address:	415 E Brighton Avenue			
City:	Syracuse	State:	New York	Zip: 13210
Phone:	(435) 214-7431	Fax:		
Contact Person:	Michael Augustine			
Email Address:	maugustine@homesteaddp.com			
Industry Sector:	Real Estate Development			

B. Will the Applicant be the Project Beneficiary (i.e. project tenant/company)

☒ Yes

☐ No

C. Principal Stakeholders

List principal owners/officers/directors owning 5% or more in equity holdings with percentage ownership. Public companies should list corporate officers.

Name	% Ownership	Business Address	Phone	Email
Columbus Pacific Properties, LTD.	62%	429 Santa Monica Blvd., Suite 600 Santa Monica, CA 90401	(310) 295-2580	tanya@columbuspacific.com
GAT 7393, LLC	38%	415 E Brighton Ave Syracuse, NY 13210	(315) 343-6485	COTADevelopment@yahoo.com

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

☐ Corporation

☐ Private

☐ Public

Date and Location of
Incorporation/Organization

May 6, 2015 Delaware

☐ Partnership

☐ General

☐ Limited

If a foreign corporation, is the
Applicant authorized to do
business in the State of New
York?

☐ Not For Profit

☐ Sole Proprietorship

☒ Limited Liability Company/Partnership

E. Applicant's Counsel

Name:	Christopher A. Andreucci			
Firm:	Harris Beach PLLC			
Mailing Address:	99 Garnsey Road			
City:	Pittsford	State:	New York	Zip: 14534
Phone:	(585) 419-8606	Fax:	(585) 419-8815	
Email Address:	candreucci@harrisbeach.com			

F. Applicant's Accountant

Name:	Roobina Baghoomians			
Firm:	CBIZ MHM, LLC			
Mailing Address:	10474 Santa Monica Blvd, Suite 200			
City:	Los Angeles	State:	California	Zip: 90025
Phone:	(310) 268-2066	Fax:	(310) 268-2001	
Email Address:	rbaghoomians@cbiz.com			

G. Has the Project Beneficiary received assistance from OCIDA, New York State or the Onondaga Civic Development Corporation in the past If yes, please give year, project name, description of benefits, and address of project.

☐ Yes

☒ No

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II. Project Information

A. Location

Address:	327 E Brighton Avenue		
City:	Syracuse	Village/Town:	N/A
Zip Code:	13210	School District(s):	Syracuse
Tax Map Parcel ID(s):	Please see attached for complete list		
Current Assessed Value:		Square Footage of Existing Building:	

B. Type (Check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> New Construction | <input type="checkbox"/> Purchase of machinery and/or equipment |
| <input type="checkbox"/> Expansion/Addition to Current Facility | <input type="checkbox"/> Brownfield/Remediated Brownfield |
| <input type="checkbox"/> Renovation of Existing Facility | <input type="checkbox"/> LEED Certification |
| <input type="checkbox"/> Acquisition of Existing facility/property | <input type="checkbox"/> Other <input type="text"/> |

C. Description of Project: Please explain your project in detail. This description should include an explanation of all activities which will occur due to this project, size of the project in square feet, current use of the site and use of the site upon completion of the project. Attach copies of any site plans, sketches or maps. (Attach additional sheets if necessary):

Helix Syracuse is a new construction project that will consist of 166 units, with 490 bedrooms on 16.49 acres of land situated at the NE corner of E Brighton Ave and Thurber St., Syracuse, New York 13210. The project will consist of new construction of three, 5-story apartment buildings, each approximately 95,000 sq. ft. on the land to be used by the Company as a student housing complex. In addition to the apartment buildings, the Company will construct a clubhouse building consisting of approximately 15,000 sq. ft. and will include a leasing office, study areas, fitness center, gaming area, lounge, and outdoor amenity deck.

D. Is the Project Beneficiary the owner of the property?

- ☒ Yes ☐ No

If not, by what means will the site be acquired? If leasing, when does the lease end?

E. Infrastructure: Please indicate whether the following are onsite, need to be constructed, or need to be renovated/expanded:

Water

Onsite

Electric

Onsite

Sanitary/Storm Sewer

Onsite

Private Roads

Onsite

Gas

Onsite

Telecommunication

Onsite

F. Zoning Classification: Please list current and proposed zoning:

Current Zoning

Mixed Use

Proposed Zoning

G. Are variances needed to complete the project?

☐ Yes

☒ No

If yes, please describe nature of variances and if municipal approvals have been granted:

H. What will be the primary use of the project upon completion?

Student housing rental apartment community

I. Will the project generate sales tax for the community?

☐ Yes

☒ No

If yes, what is the company's average annual sales or estimated annual sales?

J. Has the project beneficiary sought sites or facilities outside Onondaga County for this project?

☒ Yes

☐ No

K. 1. Will any other companies or related facilities within the state close or be subjected to reduced activity as a result of this project? If so please list the town and county of the location(s):

☐ Yes

☒ No

2. 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

3. Will the completion of the project result in the abandonment of one or more plants or facilities of the project beneficiary located in the State of New York?

☐ Yes

☒ No

i. If any answer to questions 2 or 3 above is yes, is the project reasonably necessary to discourage the project beneficiary from removing such other plant or facility to a location outside the State of New York?

☐ Yes

☐ No

ii. If any answer to questions 2 or 3 above is yes, is the project reasonably necessary to preserve the competitive position of the project applicant in its respective industry?

☐ Yes

☐ No

4. Will the project primarily consist of recreation, medical, or retail facilities?

☐ Yes

☒ No

i. If yes, will the cost of these facilities exceed one-third of the total project cost?

☐ Yes

☐ No

L. For the Agency to consider this project, please provide the following information:

1. Does the project consist of new construction or expansion or substantial renovation of an existing facility?

☒ Yes

☐ No

2. Will the project create new employment opportunities or retain existing jobs that may otherwise be lost?

☒ Yes

☐ No

3. Does the project beneficiary serve a customer base primarily outside of Onondaga County?

☒ Yes

☐ No

4. Please estimate the approximate savings to be realized by Agency participation and the need for such savings:

The financial viability of the Project is dependent on obtaining financial assistance from the OCIDA. Without the assistance, the Company will not be able to undertake the Project and invest over \$40,000,000 into the community as well as provide safe & affordable student housing rental options. In addition, the Project will bring almost 500 students to the area that will support the local businesses and generally increase the economic activity in the surrounding area.

5. Please describe the need for Agency participation and the associated savings

6. Please describe any compelling circumstances the Agency should be aware of while reviewing this application:

The current owners of the Company are in negotiations to sell the membership interests of the Company to new owners, however, it is expected that the Project Applicant will remain the Company. Once those negotiations are complete, an updated Application will be filed.

M. Environmental Information

1. The Agency must make a determination of environmental significance for the project. Have any environmental issues been identified on the property?

☐ Yes

☒ No

If yes, please explain:

*** Please note a full Environmental Assessment Form (EAF) MUST be completed and submitted along with this application.**

2. Has the Town/Village or any public body issued a SEQR determination for this project?

☒ Yes

☐ No

N. Construction

1. Project Timeline (approximate):

Construction Commencement

March 2016

Construction Completion

August 2017

Date of Occupancy

August 2017

2. Please list any other key project milestones:

III. Project Costs and Financing

A. Estimated Project Costs:

Land	\$ 2,670,000
Building Construction/Renovation	\$29,966,250
Site Work	\$ 3,900,000
Engineering	\$ 1,000,000
Financial Charges	\$ 1,559,096
Legal Fees	\$ 250,000
Machinery and Equipment	\$ 1,233,500
Other	N/A
Total Investment	\$40,545,843

B. Total amount of the project being privately financed:

\$ 1,909,976

C. Estimated mortgage amount:

\$38,635,870

D. Company's average yearly purchases or anticipated yearly purchases from vendors within Onondaga County or Central New York:

\$ 226,050

E. Estimated capital investment over the next 5 years, beyond this project, if available:

N/A

F. Financial Assistance sought (estimated values):

Companies requesting a sales tax exemption from OCIDA must provide the value of the sales tax savings they anticipate receiving. **Please ensure that you provide a realistic estimate. New NYS regulations require OCIDA to recapture any benefit that exceeds the amount listed in a company's application.**

<input checked="" type="checkbox"/>	Real Property Tax Abatement (PILOT)	TBD
<input checked="" type="checkbox"/>	Mortgage Tax Exemption	\$ 386,400
<input checked="" type="checkbox"/>	Sales and Use Tax Exemption	\$ 1,360,000
<input type="checkbox"/>	Tax Exempt Bond Financing	
<input type="checkbox"/>	Taxable Bond Financing	

IV. Employment and Payroll Information

A. Are there people currently employed at the project site?

☐ Yes

☒ No

If yes, provide number of full time equivalent (FTE) jobs at the facility:

If yes, what is the average annual salary range?

B. Estimate the number of full time equivalent (FTE) jobs to be retained as a result of this project:

C. Estimate the number of full time equivalent (FTE) jobs to be added as a result of this project:

D. Estimate the number of construction jobs to be created by this project:

125-150

E. Estimate the average length of construction jobs to be created (months):

4-6 months

F. Planned average hourly wage for new FTE non-management jobs:

\$ 15.50

G. Estimated average salary for new management FTE jobs:

\$65K

H. Current annual payroll at Onondaga County facility:

0

I. Average annual growth rate of wages:

3%

J. Please list, if any, benefits that will be available to either full and/or part time employees:

Benefit package via 3rd party management - health, vision, dental, life insurance and 401K

K. Average annual benefit paid by the company (\$ or % salary) per FTE job to be created:

18%

L. Average growth rate of benefit cost:

3%

M. Amount or percent of wage employees pay for benefits:

18%

*** Full Time Equivalent (FTE) is defined as one employee working no less than 35 hours per week or two or more employees together working a total of 35 hours per week.**

V. REPRESENTATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

A. Jobs 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 of the service delivery area created by the Workforce Investment Act of 1998 (the "WIA") in which the Project is located.

Initial **MA**

B. First Consideration for Employment: In accordance with Section 858-b (2) of the New York 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.

Initial **MA**

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, 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.

Initial **MA**

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 FTE 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.

Initial **MA**

E. 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, officer or employee of the Agency has an interest, whether direct or indirect in any transaction contemplated by this Application, except as hereinafter described in Appendix B.

Initial **MA**

F. Local Access 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 located in Appendix C.

Initial **MA**

G. Fees: This application should be submitted with a non-refundable \$1000 application fee to the Onondaga County Industrial Development Agency and a \$2,500 legal deposit made out to Gilberti Stinziano Heintz & Smith, P.C.

Initial **MA**

The Agency will collect an administrative fee and all remaining legal fees based on the Fee Schedule below:

Agency Fees:

- ♦ Fee for manufacturing projects under \$10 million - .0075 of the project cost
- ♦ Fee for all agency projects except those with PILOT agreements - .01 of the project cost
- ♦ Additional Fee for PILOT Agreement Projects - .0025 of bond amount or project cost
- ♦ Fee for bond refinancing & refunding - .0025 of refinancing or refunding amount.

Legal Fees:

- ♦ Fee for first \$20 million - .0025 of project cost
- ♦ Fee for anything above \$20 million - .00125 of project cost

H. Payment terms:

- Application fee: Payable at the time of application
 - Legal deposit: Payable at the time of application
 - Agency fee for Bond Projects: Payable at Closing
 - Agency and Legal Fees for all other projects: Due and payable at Inducement
- * A sales tax certificate will generally not be issued until the Agency Fee is paid in full

Initial **MA**

I. Recapture of Tax Abatements/Exemptions:

Recapture of Benefits. It is the policy of the Agency to recapture the value of Payment in lieu of taxes, State and County Sales Tax and Mortgage Recording Tax Exemptions in accordance with the provisions contained herein and the Laws of the State of New York. Before receiving benefits, projects of the Agency must attest in writing to their understanding of and agreement to the Recapture Provisions of the Agency Uniform Tax Exemption Policy. The recapture provision contained herein may be modified from time to time by the Board at its sole discretion.

Recapture of a PILOT, Sales Tax and the Mortgage Recording Tax Exemptions. In the event the facility is sold or closed, or the number of jobs is reduced below 75% of the number employed or projected to be employed at time of application to the Agency and no substantial future economic benefit is likely to accrue to the community, then the value of the Property Tax, Sales tax and the Mortgage Recording Tax benefits extended to the project by the Agency shall be subject to recapture.

Recapture Payment. The Recapture payment paid by the Project to the Agency shall be determined (1) by the difference between any PILOT payments made by the Project and the property taxes that would be paid by the Project, if the property were not in the ownership or control of the Agency, (2) the value of any Mortgage Recording Tax Exemption, if awarded to the Project and (3) the amount of sales tax that would have been paid if an exemption was not granted.

Recapture of the PILOT, Sales Tax or Mortgage Recording Tax: The Recapture Schedule for a Payment in Lieu of Taxes Agreement, Sales Tax or the Mortgage Recording Tax is as follows:

Within two (2) years of Certificate of Occupancy	100%
Within three (3) years:	80%
Within four (4) years:	60%
Within five (5) years:	40%
Within six (6) years:	30%
Within seven (7) years:	20%
Within eight (8) years:	10%
Eight years or more:	0%

Distribution of the Recapture Payment. Any funds recaptured as the result of an Agreement with the Agency shall be distributed to the affected taxing jurisdictions in the same proportion as if the payments were paid or owed by the Project on the date of recapture.

Additional Conditions for the Recapture of Sales and Use Tax. As of April 1, 2013, New York State law requires Industrial Development Agencies to recapture sales tax benefits where:

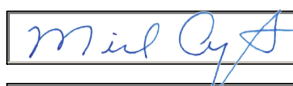
- ♦ A Project is not entitled to receive the benefits
- ♦ Exemptions received exceed the amount authorized by the Agency
- ♦ Exemptions are claimed by the Project for unauthorized property or services
- ♦ A Project fails to use property in the manner required by its IDA agreements

I have read the foregoing and agree to comply with all the terms and conditions contained therein as well as policies of the Onondaga County Industrial Agency.

Name of Applicant Company

Syracuse Apartments, LLC

Signature of Officer or Authorized Representative



Name & Title of Officer or Authorized Representative

Michael Augustine, Manager

Date

09/08/2015

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 misleading.

☒ I have read paragraph 6 in the instructions and understand that the applicant must identify in writing to OCIDA any information it deems proprietary and requests not be made publicly available.

☐ Please check here if you have marked information as confidential/proprietary

Name of Applicant Company

Syracuse Apartments, LLC

Signature of Officer or Authorized Representative

Michael Augustine

Name & Title of Officer or Authorized Representative

Michael Augustine, Manager

Date

09/08/2015

VI. 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 cause of action and attorney's fees and any other expenses incurred in defending any suits or action which may arise as a result of any of the foregoing. If, for any reason, the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable or specified period of time, to take reasonable, proper or requested action, or withdraws, abandons, cancels or neglects the Application, or if the Agency or the Applicant are unable to reach final agreement with respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in the process of the Application, including attorney's fees, if any.

Name of Applicant Company

Syracuse Apartments, LLC

Signature of Officer or Authorized Representative

Michael Augustine

Name & Title of Officer or Authorized Representative

Michael Augustine, Manager

Date

09/08/2015

Onondaga County Industrial Development Agency Application
Appendix A
Employment Plan
Part 1

Company Name:	Syracuse Apartments, LLC			
Mailing Address:	415 E Brighton Ave			
City:	Syracuse	State:	New York	Zip: 13210
Phone:	(435) 214-7431	Fax:	N/A	
Contact Person:	Michael Augustine			
Email Address:	maugustine@homesteaddp.com			
Type of Business	Real Estate Development			

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
Community Manager	1	1	1	1
Service Manager	1	1	1	1
Maintenance Tech	1	1	1	1
Leasing Consultant	1	1	1	1

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

☐ Yes

☒ No

If yes, Name and Local:

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

☒ Yes

☐ No

Under current Industrial Development Agency (IDA) law, an IDA must consider such things as job retention when approving projects.

Name of Applicant Company

Syracuse Apartments, LLC

Signature of Officer or Authorized Representative

Michael Augustine

Name & Title of Officer or Authorized Representative

Michael Augustine, Manager

Date

09/08/2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

**APPENDIX A
EMPLOYMENT PLAN
PART 2**

(Enter Company Name in three (3) places below and sign by an authorized company officer)

In consideration of the benefits provided by the Onondaga County Industrial Development Agency,

Syracuse Apartments, LLC

, 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.

Syracuse Apartments, LLC

, project beneficiary, also agrees to report to the Onondaga County Industrial Development Agency on or before March 1 of each year on the status 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.

Syracuse Apartments, LLC

, 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.

Name of Applicant Company

Syracuse Apartments, LLC

Signature of Officer or Authorized Representative

Michael Augustine

Name & Title of Officer or Authorized Representative

Michael Augustine, Manager

Date

09/08/2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION
APPENDIX B
CONFLICT OF INTEREST STATEMENT

Agency Board Members

1. Dan Queri
2. Steve Morgan
3. Victor Ianno
4. Lisa Dell
5. Patrick Hogan
6. Janice Herzog
7. Jessica Crawford

Agency Officers/Staff

1. Julie Cerio
2. Honora Spillane
3. Chris Cox
4. Karen Doster
5. Steven Coker

Agency Legal Counsel & Auditor

1. Anthony Rivizzigno, Esq., Gilberti Stinziano Heintz & Smith, P.C.
2. The Bonadio Group

The Applicant has received from the Agency a list of members, officers and staff of the Agency. To the best of my knowledge, no member, officer or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described:

N/A

Signature:

Michael Augustine

Authorized Representative:

Michael Augustine

Title:

Manager

Date:

09/08/2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

APPENDIX C

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

Syracuse Apartments, LLC

(the Company) understands the Local Access Policy and agrees to complete Appendix C of the Agency application at the time of the application to the 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 the 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.

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).

Company	<input type="text"/>				General Contractor	<input type="text"/>					
Representative for Contract Bids/Awards	<input type="text"/>				Contact	<input type="text"/>					
Address	<input type="text"/>				Address	<input type="text"/>					
City:	<input type="text"/>	State:	New York	Zip:	<input type="text"/>	City:	<input type="text"/>	State:	New York	Zip:	<input type="text"/>
Phone	<input type="text"/>		Fax	<input type="text"/>		Phone	<input type="text"/>		Fax	<input type="text"/>	
Email	<input type="text"/>				Email	<input type="text"/>					
Project Address	<input type="text"/>				Project Address	<input type="text"/>					
City	<input type="text"/>	ST	Alabama	Zip	<input type="text"/>	City	<input type="text"/>	ST	Alabama	Zip	<input type="text"/>

Authorized Representative

Title

Signature

<u>Item</u>	<u>Contract (Sub)</u>	<u>Address</u>	<u>Email</u>	<u>Phone</u>	<u>Amount</u>
Site work/ Demolition					
Foundation & Footings					
Building					
Masonry					
Metals					
Wood/Casework					
Thermal/ Moisture proof					
Doors, windows, glazing					
Finishes					
Electrical					
HVAC					
Plumbing					
Specialities					
Machinery & Equipment					
Furniture & Fixtures					
Utilities					
Paving					
Landscaping					

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

Application Attachments Listing

- ♦ Corporate schematic, if a subsidiary
- ♦ Description of project, Site Plans/Sketches, and Map
- ♦ NYS Full Environmental Assessment Form
- ♦ A check payable to the Agency in the amount of \$1000
- ♦ A check payable to Gilberti Stinziano Heintz & Smith, P.C. in the amount of \$2,500

SYRACUSE

	PARCEL ID	ADDRESS	AREA (SQ.FT.)	AREA (+/- ACRES)
1	59-1-43	101 Thurber Street	5,935	0.136
2	59-1-44	103 Thurber Street	5,768	0.132
3	59-1-45	105 Thurber Street	6,123	0.141
4	59-1-46.1	387 Brighton Avenue E & Thurber Street	130,046	2.985
5	59-1-47	359 Brighton Avenue E	5,795	0.133
6	59-1-49	329 Brighton Avenue E	5,072	0.116
7	59-1-50	327 Brighton Avenue E	31,334	0.719
8	59-1-28	113 Roney Lane	281,758	6.468
9	59-1-51	325 Brighton Avenue E	49,248	1.131
10	59-1-54	307 Brighton Avenue E	172,530	3.961
11	59-1-48	331-335 Brighton Avenue E	24,792	0.569
		Syracuse, New York 13210	718,401	16.491

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

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

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

Part 1 - Project and Sponsor Information			
Name of Action or Project: Brighton Avenue Apartment Complex - LOT 1 - Special Use Permit			
Project Location (describe, and attach a location map): Northeast corner at the intersection of East Brighton Ave. and Thurber Street in Syracuse, NY 13202			
Brief Description of Proposed Action: Proposed project consists of an apartment housing complex with three (3) approx, 19,880 SF apartment buildings, one (1) 11,445 SF Clubhouse, and one (1) 2,325 SF office building along with site improvements. Improvements to include driveways, walkways, parking, utilities, landscaping, lighting, and stormwater management areas. Properties will be re-subdivided into 3 lots based on zoning lines. This application corresponds to Lot 1 which requires a special use permit.			
Name of Applicant or Sponsor: Syracuse Apartments, LLC		Telephone: E-Mail: Maugustine@homesteadp.com	
Address: 3100 W. Pinebrook Road, Suite 1250-C			
City/PO: Park City		State: UT	Zip Code: 84098
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: NYS DEC (SWPPP)		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		16.67 acres	
b. Total acreage to be physically disturbed?		12.84 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		16.67 acres	
4. Check all land uses that occur on, adjoining and near the proposed action. <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input checked="" type="checkbox"/> Other (specify): Vacant <input type="checkbox"/> Parkland			

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

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ Stormwater Management Ponds	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: Michael Augustine Signature: <i>Michael Augustine</i> Date: September 9, 2015		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.						
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.						
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Name of Lead Agency</td> <td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Date</td> </tr> <tr> <td style="border-bottom: 1px solid black; text-align: center;">Print or Type Name of Responsible Officer in Lead Agency</td> <td style="border-bottom: 1px solid black; text-align: center;">Title of Responsible Officer</td> </tr> <tr> <td style="border-bottom: 1px solid black; text-align: center;">Signature of Responsible Officer in Lead Agency</td> <td style="border-bottom: 1px solid black; text-align: center;">Signature of Preparer (if different from Responsible Officer)</td> </tr> </table>		Name of Lead Agency	Date	Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer	Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)
Name of Lead Agency	Date						
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer						
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)						

PRINT

