# **Empire State Development Grant Funds**

1. Question Ref: Q\_1451 Question Type: Threshold

Funds can only be used for capital expenditures. Please note that ESD grants generally fund no more than 20% of the project cost and require a 10% equity contribution from the applicant. By selecting yes, you are confirming that project funding will be used only for one or more of the following categories:

- Acquisition or leasing of land, building, machinery and/or equipment
- Acquisition of existing business and/or assets;
- Demolition and environmental remediation;
- New construction, renovation or leasehold improvements;
- Acquisition of furniture and fixtures;
- Soft costs up to twenty-five percent (25%) of total project costs; and
- Planning and feasibility studies related to a specific capital project

# 2. Question Ref: Q\_1603 Question Type: Basic

Was this project or a phase of this project awarded funding in CFA Round I?

3. Question Ref: Q\_1604 Question Type: Basic

If yes, with which agency(s)?

4. Question Ref: Q\_1605 Question Type: Basic

If funding was received in a prior round of the CFA, indicate the amount of funding received.

5. Question Ref: Q\_184 Question Type: Basic

NYS Assembly District(s) where the project is located. (please enter a number between 1 and 150 that represents your Assembly District)

HELP SECTION

Click <u>HERE</u> to determine your Assembly district.

6. **Question Ref:** Q\_190 **Question Type:** Basic

NY Senate District(s) where the project is located. (please enter a number between 1 and 62 that represents your Senate District)

HELP SECTION

Click <u>HERE</u> to determine your Senate district.

# 7. Optional Question Header:

**Applicant Information** 

**Question Ref:** Q\_546 **Question Type:** Basic

Legal Name of Applicant

8. Question Ref: Q\_547 Question Type: Basic

Contact First Name

9. Question Ref: Q\_549 Question Type: Basic

Type of Applicant (select all that apply)

10. Question Ref: Q\_550 Question Type: Basic

If you are a DBA, what is your DBA name?

11. Question Ref: Q\_551 Question Type: Basic

**Applicant Street Address** 

12. Question Ref: Q\_552 Question Type: Basic

Applicant City

13. Question Ref: Q\_553 Question Type: Basic

Applicant State

# 14. Question Ref: Q\_554 Question Type: Basic

Applicant Zip Code. (please use Zip+4 if known)

15. Question Ref: Q\_555 Question Type: Basic

**Applicant Email Address** 

16. Question Ref: Q\_556 Question Type: Basic

Select an applicant ID type from the list below that you normally use to identify your organization on application forms.

HELP SECTION

Applicants will be required to provide the specified ID number upon request by the funding agencies.

17. Question Ref: Q\_561 Question Type: Basic

Additional Contact Email Address

18. Question Ref: Q\_562 Question Type: Basic

Additional Contact Phone Number. (please include area code)

19. Question Ref: Q\_565 Question Type: Basic

**Project City** 

20. Question Ref: Q\_568 Question Type: Basic **Project State** 

21. Question Ref: Q\_572 Question Type: Basic

Project Latitude

HELP SECTION

Click HERE to determine Latitude

22. Question Ref: Q\_573 Question Type: Basic

Project Longitude

HELP SECTION

Click HERE to determine Longitude

# 23. Optional Question Header:

**Project Description** 

**Question Ref:** Q\_575 **Question Type:** Basic

Project Description. Concisely describe the project, indicating the location, what will be planned, designed, and/or constructed, the issues/opportunities to be addressed, and expected outcomes and deliverables. Additional details will be collected later in the application process.

24. Question Ref: Q\_580 Question Type: Basic

Status of Permits

25. Question Ref: Q\_582 Question Type: Basic

**Estimated Service Life** 

#### HELP SECTION

List the estimated service life/useful life of capital expenditure that is the focus of this request.

26. Question Ref: Q\_651 Question Type: Basic

Applicant Telephone Number, (please include area code)

27. Question Ref: Q\_1056 Question Type: Basic

If review of the project is underway pursuant to the State Environmental Quality Review Act (SEQRA), please indicate the lead agency (if applicable).

28. Question Ref: Q\_928 Question Type: Basic

Project Street Address: if the project does not have a definite street address, please skip to "Project without a Street Address" below.

29. Question Ref: Q\_929 Question Type: Basic

Current State of Project Development (i.e. planning, preliminary engineering, final design, etc)

30. Question Ref: Q\_930 Question Type: Basic

Explain what makes your project a regional economic priority - for example creates jobs, economic investment, sustainability and community revitalization, etc.

31. Question Ref: Q\_969 Question Type: Basic

> If you are a business, have you been certified as an Minority or Womenowned Business Enterprise (MWBE)?

32. Question Ref: Q\_970 Question Type: Basic Additional Project Contact Last Name

33. Question Ref: Q\_971 Question Type: Basic

Project Without a Street Address: please enter a description of the project location. Include project starting/ending street addresses, cities & zip codes if applicable.

34. Question Ref: Q\_972 Question Type: Basic

Project county or counties.

35. Question Ref: Q\_973 Question Type: Basic

Status of State and/or Federal Environmental Review.

36. Question Ref: Q\_975 Question Type: Basic

Estimated Project Timeline: including project start/completion dates, estimates for design, permitting and construction or other major steps.

37. Question Ref: Q\_976 Question Type: Basic

Statement of Need

HELP SECTION

Provide a brief summary of the need for the project in the geographic area proposed, the project's financing needs, including funding gaps and, where applicable, describe the additional short and long term jobs that will be created through the development of the proposed project.

38. Question Ref: Q\_1034 Question Type: Basic

Project Zip Code. (please use Zip+4 if known)

39. Question Ref: Q\_1049 Question Type: Basic **Contact Last Name** 

40. Question Ref: Q\_1050 Question Type: Basic

Contact Title

41. Question Ref: Q\_1051 Question Type: Basic

Additional Contact Title

42. Question Ref: Q\_1052 Question Type: Basic

Additional Project Contact First Name

43. Question Ref: Q\_1053 Question Type: Basic

If project review pursuant to the National Environmental Policy Act (NEPA) has been completed has a Finding of No Significant Impact or Record of Decision been issued?

44. Question Ref: Q\_1054 Question Type: Basic

If National Environmental Policy Act (NEPA) Record of Decision has been issued, please explain (include date of Record of Decision).

# 45. **Question Ref:** Q\_1055

Question Type: Attachment

Project review pursuant to the State Environmental Quality Review Act (SEQRA) must be completed prior to the award of any state funds. For projects classified as Type I or Unlisted actions, submit a short or long Environmental Assessment Form. See "View Help" for links to forms.

HELP SECTION

Information and forms can be found at <u>http://www.dec.ny.gov/permits/357.html</u> and <u>http://www.dec.ny.gov/permits/6191.html</u>. If you are a not-for-profit, please complete and attach the following form:

http://nysparks.com/grants/documents/cfa/EMBFormNFPGrants.pdf

# 46. Question Ref: Q\_1057 Question Type: Attachment

If review of the project has been completed pursuant to State Environmental Quality Review Act (SEQRA), please submit the Negative Declaration or Findings Statement.

# 47. Optional Question Header:

**Required Supporting Documentation** 

**Question Ref:** Q\_1337 **Question Type:** Attachment

For privately owned companies, IDAs, not-for-profits, educational institutions, start-ups, municipalities, or any business organization other than publicly traded companies, provide: (a) Three years of historical financials; (b) If most recent financials are over 180 days old, add the most recent interim statements, certified by a company officer; (c) Organizational chart and/or description of ownership structure, including the percentage of ownership structure by each individual entity. If the company is a parent, subsidiary and/or affiliate of another company, please provide a description. (d) Additional financial information may be requested.

# HELP SECTION

Financial statements should be audited or reviewed. If the statements are only compiled, they must be accompanied by copies of signed Federal tax returns (3 yrs). Source of financial statements: financial statements should be provided by the Parent company of the grantee (50% or greater ownership) unless the grantee prepares separate audited or reviewed financial statements or files separate tax returns from the parent.

For information about this requirement, contact your local ESD Regional Office. <u>http://esd.ny.gov/RegionalOverviews.html</u>

48. Question Ref: Q\_1338 Question Type: Attachment For Start-up companies, in addition to the documents listed above provide: -Financial projections (5 years) - Personal financial statements from a personal guarantor(s) of the start-up company - Principal resumes

#### HELP SECTION

For information about this requirement, contact your local ESD Regional Office. <u>http://esd.ny.gov/RegionalOverviews.html</u>.

# 49. Question Ref: Q\_1450 Question Type: Standard Question

Will the proposed project result in the creation of construction jobs? If so, estimate the number of construction jobs to be created.

Enter zero if not applicable.

# 50. **Question Ref:** Q\_1459

Question Type: Standard Question

Will the proposed project directly or indirectly result in the creation of permanent jobs? If so, estimate the number of permanent full-time equivalent jobs that will be created.

Enter zero if not applicable.

#### 51. **Question Ref:** Q\_1608

**Question Type:** Standard Question

Does the proposed project involves acquisition, renovation, or construction of a commercial, industrial or mixed-use facilities that is privately owned (or publicly owned, but will be leased to a private enterprise)?

# 52. **Question Ref:** Q\_1609

**Question Type:** Standard Question

Is the proposed project located in a highly distressed area? If so, please provide information that will help ESD confirm that the area is highly distressed.

#### HELP SECTION

In determining whether a project is in a highly distressed area, ESD considers whether the area is characterized by pervasive poverty, high unemployment, and general economic distress based on characteristics including but not limited to:

 a poverty rate of at least twenty percent, or if the area does not contain a census tract or tracts,

a block numbering area, or a city, town, or village, a poverty rate of at least thirteen percent;

- an unemployment rate of at least 1.25 times the statewide unemployment rate;
- significant job loss from one employer or in a particular industry;
- the United States President declares the area a natural disaster area;
- closure or realignment of a defense or military base or facility;
- contraction or discontinuance of a State hospital or mental hygiene facility;
- population and employment decline, increase in unemployment and public assistance
- recipients, decline in real property values, decline in per capita income, abandoned
- property and deteriorated industrial, commercial, and residential properties, a decline
- in business establishments, obsolescence in plant capacity, loss of markets to foreign
- competition, the unavailability of expansion financing, poor access to markets, and
- other indictors of chronic and severe economic distress;
- potential to attract private investment that will employ unemployed or economically

disadvantaged persons;

 substantial public and private commitments to a long-term economic revitalization

program and the capacity to manage the program;

- a plan that states the area's needs, proposals for meeting such needs,
- the process for routine periodic evaluation of progress in implementing
- the plan and compilation of essential information for such
  evaluation;
- applicable land use laws or regulations allow the use of at least twenty-five percent of the area for commercial or industrial activity; and
- twenty-five percent or more of the area is vacant, abandoned, or otherwise

available for industrial or commercial development.

# 53. Question Ref: Q\_1414 Question Type: Standard Question

Is the applicant a publicly traded company? Indicate Y/N. If ?Yes?, provide the link to the web page or website that lists the company?s financial statements.

For applicants to Environmental Investment Program/Capital, click ?View Help? for information.

HELP SECTION

For Environmental Investment Program (EIP)/Capital projects, answer questions for the company (usually called "the co-implementer") that will implement the project and benefit from the funding, if approved.

# 54. **Question Ref:** Q\_1142

**Question Type:** Standard Question

Indicate the Primary North American Industrial Classification System (NAICS) Code at the PROJECT LOCATION.

HELP SECTION

http://www.census.gov/cgi-bin/sssd/naics/naicsrch?chart=2007

# 55. **Question Ref:** Q\_1410

**Question Type:** Standard Question

Briefly describe what the project involves in terms of product(s) or services(s) that will be provided at the project location.

56. **Question Ref:** Q\_1409

Question Type: Standard Question

What is the first project year? (e.g. the year equipment will be ordered or when first expenditures are expected to be made)

# 57. **Question Ref:** Q\_1371

Question Type: Standard Question

Does the project involve demolition or rehabilitation of a building(s) more than 50 years old and/or demolition or rehabilitation of a building(s) or new

construction on or contiguous to a site listed on or eligible for listing on the State or National Registers of Historic Places? Indicate Y/N/NA. If Y, click "Help" for more information.

#### HELP SECTION

If "yes", the project requires consultation with the State Historic Preservation office (SHPO) <u>www.nysparks.state.ny.us/shpo</u>. If the project requires SHPO consultation, please explain the status. If consultation is complete, please provide a link to SHPO's Letter of Determination of No Adverse Effect or Letter of Resolution to Mitigate Adverse Effect.

# 58. Question Ref: Q\_1043

**Question Type:** Standard Question

Is the project owner/occupant/operator or any facilities which are under the supervision of the project owner/occupant/operator in violation of any federal, state or local environmental or other laws, or listed on the registry of Inactive Hazardous Waste Disposal Sites? Indicate Y/N/NA. If "Y", explain.

# 59. **Question Ref:** Q\_1041

**Question Type:** Standard Question

Provide a list of all federal, state, and local environmental and other reviews, approvals, or permits needed, including the dates by when they are expected. If Not Applicable, indicate "NA".

# 60. **Question Ref:** Q\_1398

**Question Type:** Standard Question

Investment Year 1: Provide a breakdown of qualified investments that will be made at the project location in Year 1. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

# HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

# 61. Question Ref: Q\_1396 Question Type: Standard Question

Investment Year 2: Provide a breakdown of qualified investments that will be made at the project location in Year 2. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

# HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

#### 62. Question Ref: Q\_1395 Ouestion Type: Standard Ouestion

Investment Year 3: Provide a breakdown of qualified investments that will be made at the project location in Year 3. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

# HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

# 63. Question Ref: Q\_1394

Question Type: Standard Question

Investment Year 4: Provide a breakdown of qualified investments that will be made at the project location in Year 4. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance

# 64. Question Ref: Q\_1393 Question Type: Standard Question

Investment Year 5: Provide a breakdown of qualified investments that will be made at the project location in Year 5. List by category, including: Building acquisition; building renovation; new construction; production machinery & equipment; furniture, fixtures & equipment.

#### HELP SECTION

Qualified investments are tangible personal property, including a building or structural component of a building, owned by the applicant that is depreciable per IRC §167, has a useful life of 4 years or more, is acquired by purchase as defined in IRC §179 (d), is located in NYS, and is placed in service on or after the date certified eligible for assistance.

# 65. Question Ref: Q\_1224

Question Type: Standard Question

Have any expenditures for the project been made prior to the date of this application? If yes, explain.

# HELP SECTION

For assistance and information regarding this requirement contact your local Empire State Development Regional Office. <u>http://esd.ny.gov/RegionalOverviews.html</u>

# 66. **Question Ref:** Q\_1242

Question Type: Standard Question

Describe how the capital investment for which you are seeking funding will make it possible to reach your business goals. For example recycling, pollution prevention or waste reduction goals, changes to your businesses

profitability, sales, marklet share, productivity and sales per employee, cycle time reduction, quality, cost saving, etc.

67. Question Ref: Q\_1197 Question Type: Standard Question

Indicate how many existing full-time equivalent jobs the applicant and its related entities employ in all NYS LOCATIONS.

# HELP SECTION

A Full-time equivalent job equals any combination of two or more part-time jobs that, when combined together, constitute the equivalent of a job of at least 35 hours per week.

Related entities generally include:

- Two corporations that are members of the same controlled group of corporations determined by applying a 10% ownership test
- A corporation and an individual who owns directly or indirectly more than 10% of the value of the outstanding stock of the corporation
- A corporation and a partnership if the same persons own over 10% in value of the outstanding stock of the corporation and more than 10% of the capital interest or the profits interest in the partnership
- Two S Corporations if the same persons own more than 10% in value of the outstanding stock of each corporation
- A partnership and a person who owns directly or indirectly more than 10% of the capital or profits of the partnership
- Two partnerships if the same persons directly or indirectly own more than 10% of the capital or profits of each

For more detailed information, go to: <u>http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465(B)(3)(C)-RelatedPerson.pdf</u>

68. Question Ref: Q\_1263 Question Type: Standard Question Indicate the average annual wage for existing full-time equivalent employees the applicant and its related entities employ in all NYS locations as of the date this application is finalized.

# 69. Question Ref: Q\_1365

Question Type: Standard Question

Indicate how many of the total existing full-time equivalent employees in New York State are contract employees.

HELP SECTION

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 70. Question Ref: Q\_1262 Question Type: Standard Question

Indicate how many existing full-time equivalent jobs the applicant and its related entities employ in all the PROJECT LOCATION(S).

# HELP SECTION

NOTE: A full-time equivalent job equals any combination of two or more part-time jobs that, when combined together, constitute the equivalent of a job of at least 35 hours per week. Please note if any of these positions are contract employees and if so, how many of the total are contract employees.

Related entities generally includes below.

• Two corporations that are members of the same controlled group of corporations determined by applying a 10% ownership test

 $\cdot$  A corporation and an individual who owns directly or indirectly more than 10% of the value of the outstanding stock of the corporation

• A corporation and a partnership if the same persons own over 10% in value of the outstanding stock of the corporation and more than 10% of the capital interest or the profits interest in the partnership

 $\cdot$  Two S corporations if the same persons own more than 10% in value of the outstanding stock of each corporation

 $\cdot$  A partnership and a person who owns directly or indirectly more than 10% of the capital or profits of the partnership

Two partnerships if the same persons directly or indirectly own more than 10% of the capital or profits of each  $10^{10}$ 

For more detailed information, go to

http://www.esd.ny.gov/BusinessPrograms/Data/Excelsior/IRCSection465(B)(3)(C)-RelatedPerson.pdf

# 71. Question Ref: Q\_1186 Question Type: Standard Question

Indicate the average annual wage for the employees at the Project Location as of the date this application is finalized.

# 72. Question Ref: Q\_1196 Question Type: Standard Question

How many of the existing jobs at the project location(s) are at risk if the project does not go forward.

HELP SECTION

"At Risk" shall mean a permanent Full-time employee position currently located in New York State that is found by ESD to be at risk of being lost or moved out of state based on compelling information provided by the applicant.

# 73. Question Ref: Q\_1366 Question Type: Standard Question

Indicate how many of the total existing full-time equivalent employees at the Project Location are contract employees.

HELP SECTION

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 74. Question Ref: Q\_1189 Question Type: Standard Question

Net New Jobs Created Year 1: Indicate the total number of net new jobs at the project location for Year 1.

#### HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

# 75. **Question Ref:** Q\_1392

Question Type: Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 1. Please note if any of these positions are contract employees and list separately.

# HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 76. Question Ref: Q\_1190

**Question Type:** Standard Question

Net New Jobs Created Year 2: Indicate the total number of net new jobs at the project location for Year 2.

# HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

# 77. Question Ref: Q\_1391 Question Type: Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 2. Please note if any of these positions are contract employees and list separately.

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 78. Question Ref: Q\_1191

Question Type: Standard Question

Net New Jobs Created Year 3: Indicate the total number of net new jobs at the project location for Year 3.

#### HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

#### 79. Question Ref: Q\_1390 Question Type: Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 3. Please note if any of these positions are contract employees and list separately.

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 80. Question Ref: Q\_1192

Question Type: Standard Question

Net New Jobs Created Year 4: Indicate the total number of net new jobs at the project location for Year 4.

#### HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

# 81. Question Ref: Q\_1389 Question Type: Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 4. Please note if any of these positions are contract employees and list separately.

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 82. Question Ref: Q\_1193

**Question Type:** Standard Question

Net New Jobs Created Year 5: Indicate the total number of net new jobs at the project location for Year 5.

# HELP SECTION

"Net new jobs" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

# 83. **Question Ref:** Q\_1387

**Question Type:** Standard Question

Describe the type of job, by general category, and list the gross annual wages for each job type at the project location for Year 5. Please note if any of these positions are contract employees and list separately.

#### HELP SECTION

"**Net new jobs**" means jobs created in this state that: (i) are new to the state; (ii) have not been transferred from employment with another business located in this state including from a Related Person in this state; (iii) are either full-time wage-paying jobs or equivalent to a full-time wage-paying job requiring at least thirty-five hours per week; and (iv) are filled for more than six months during the year for which credits are being granted.

A **Full-time Contract Employee** is a full-time private sector employee (or self-employed person) who is not on the applicant's payroll but who works for the applicant for a minimum of 35 hours per week providing services that would otherwise be provided by a Full-time Permanent Employee. The position held by a Full-time Contract Employee is a year round position.

# 84. Question Ref: Q\_1415

Question Type: Standard Question

Indicate what the average percentage is of the applicants' total employees' gross wages paid in benefits (exclude mandated benefits such as Federal Insurance Contributions Act (FICA), Medicare tax, unemployment insurance or workers' compensation insurance.

#### 85. Question Ref: Q\_1375 Question Type: Standard Question

What percentage of the project's employees are residents of NYS?

# 86. **Question Ref:** Q\_1233

**Question Type:** Standard Question

What tasks and steps need to be completed before the project can begin (e.g. obtaining permits, licenses, hiring staff, etc.)

# 87. Question Ref: Q\_1246

Question Type: Standard Question

Describe the business challenges or opportunities in the company that are driving the project.

# 88. Optional Question Header:

Smart Growth Questions: The NYS Smart Growth Public Infrastructure Policy Act requires that a project meet the relevant smart growth criterion to the extent practicable. Please respond to the questions below regarding smart growth criteria.

**Question Ref:** Q\_1059 **Question Type:** Smart Growth Does the proposed project use, maintain, or improve existing infrastructure? Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

If you are maintaining or improving existing infrastructure, please answer "YES". If you are building new infrastructure, or expanding infrastructure answer "NO" and provide justification that explains the need to build new infrastructure instead of using or improving existing infrastructure.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 89. Question Ref: Q\_1060 Question Type: Smart Growth

Is the proposed project located in a municipal center? Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

Municipal Centers are areas of concentrated and mixed land use that serve as centers of various activities (civic, commercial, recreational, and residential, among others). Specific examples include Central Business Districts; Brownfield Opportunity Areas (BOAs); Downtowns in Local Waterfront Revitalization Program (LWRP) Areas; Transit-Oriented Development, Environmental Justice Areas and Hardship Areas; in many instances, an entire city, village or hamlet can be considered a municipal center. This definition can include development "adjacent to municipal centers" and a "future municipal center" – an area planned and zoned to be a municipal center.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 90. Question Ref: Q\_1061 Question Type: Smart Growth

Is the proposed project located in a developed area or an area designated for concentrated infill development in a municipally approved comprehensive land use plan, local waterfront revitalization plan and/or brownfield opportunity area plan? Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

Please explain how your project advances infill development or redevelopment in existing developed areas consistent with an approved plan. Infill development includes redevelopment, rehabilitation and new development between existing buildings on vacant or under-utilized sites.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <a href="https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils">https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</a>

# 91. Question Ref: Q\_1062 Question Type: Smart Growth

Will the proposed project protect, preserve and enhance the State?s resources, including agricultural land, forests, surface and groundwater, air quality, recreation and open space, scenic areas, and significant historic and archeological resources? Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

Beyond simply avoiding or minimizing negative environmental impacts, please indicate the resources that may be impacted by your project and how your project will preserve and enhance these resources.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 92. Question Ref: Q\_1063

**Question Type:** Smart Growth

Will the proposed project foster mixed land uses and compact development, downtown revitalization, Brownfield redevelopment, the enhancement of beauty in public spaces, the diversity and affordability of housing in proximity to places of employment, recreation and commercial development and the integration of all income and age groups? Y/N/Not Relevant. Please explain all responses.

#### HELP SECTION

Please explain how your project advances these objectives and improves the quality of life in your community.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 93. Question Ref: Q\_1064 Question Type: Smart Growth

Will the proposed project provide mobility through transportation choices including improved public transportation and reduced automobile dependency?Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

There are many alternatives to automobile transportation. Please explain how your project provides or complements alternatives to automobile travel such as bikes, pedestrians, public transit, air travel or rail travel.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 94. Question Ref: Q\_1065 Question Type: Smart Growth

Will the proposed project involve coordination between state and local government and inter-municipal and regional planning? Y/N/Not Relevant. Please explain all responses.

# HELP SECTION

Identify any interaction between the applicant and any municipal and county governments, planning boards, regional planning associations or similar organizations. Document any outreach by the applicant to these organizations regarding the project and any relevant correspondence.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

# 95. Question Ref: Q\_1066 Question Type: Smart Growth

Will the proposed project involve participation in community based planning and collaboration? Y/N/Not Relevant. Please explain all responses.

### HELP SECTION

Please explain how the project results from an inclusive, multi-stakeholder (including traditionally underserved populations) process of community-based planning and collaboration. To assist with your explanation, identify any affected community groups or organizations with an interest in the proposed project and if the planning process involved outreach to citizens and stakeholders at all stages of development of the project.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

#### 96. Question Ref: Q\_1067 Question Type: Smart Growth

Will the proposed project ensure predictability in building and land use codes? Y/N/Not Relevant. Please explain all responses.

#### HELP SECTION

Provide any additional relevant information.

For specific guidance on rail/port, aviation, and other transportation projects please refer to <a href="https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils">https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</a>

# 97. Question Ref: Q\_1068

Question Type: Smart Growth

Will the proposed project promote sustainability by strengthening existing and creating new communities which reduce greenhouse gas emissions and do not compromise the needs of future generations, by among other means encouraging broad based public involvement in developing and implementing a community plan and ensuring the governance structure is adequate to sustain its implementation? Y/N/Not Relevant. Please explain all responses.

#### HELP SECTION

Please explain how your project promotes sustainability. For example does your project include buildings and plans that seek to minimize consumption of fossil fuels (coal, petroleum), reduce water usage / consumption, and encourage the use of renewable energy (wind, solar, and geo-thermal).

For specific guidance on rail/port, aviation, and other transportation projects please refer to <u>https://www.nysdot.gov/programs/RegionalEconomicDevelopmentCouncils</u>

### 98. Question Ref: Q\_1069 Question Type: Certification

Litigation: Is the company presently a party to any litigation or is any litigation pending or anticipated that could have an adverse material effect on the company?s financial condition? Indicate "Yes" or "No". If your answer is "Yes", please provide explanation in space provided.

# 99. **Question Ref:** Q\_1070

Question Type: Certification

Does the company have any contingent liabilities that could have a material effect on its solvency? Indicate "Yes" or "No". If your answer is "Yes", please explain in space provided.

#### 100. **Question Ref:** Q\_1071 **Question Type:** Certification

Has the company, its affiliates or any member of its management or any other concern with which such members of management have been officers or directors, ever been involved in bankruptcy, creditor's rights, or receivership proceedings or sought protection from creditors or has any senior manager or principal of the company ever been charged with or convicted of any felony, or misdemeanor other than minor traffic offenses, or been a member of the management, an owner or majority stockholder of any firm or corporation convicted of any felony? Indicate "Yes" or "No". If your answer is "Yes", please provide an explanation.

# 101. **Question Ref:** Q\_1072

# **Question Type:** Certification

Are there any outstanding judgments or liens pending against the company other than liens in the normal course of business? Indicate "Yes" or "No". If your answer is "Yes", please provided explanation in space provided.

# 102. **Optional Question Header:**

### General Certifications

**Question Ref:** Q\_1037 **Question Type:** Certification

By entering your name in the box below, you certify and agree that you are authorized on behalf of the applicant and its governing body to commit the applicant to comply with the requirements of Article 15-A of the New York State Executive Law: Participation By Minority Group Members and Women With Respect To State Contracts by providing opportunities for MBE/WBE participation. You further certify that the applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the project.

### 103. **Question Ref:** Q\_1038 **Question Type:** Certification

By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

# 104. Question Ref: Q\_1776 Question Type: Certification

By entering your name in the box below, you certify, under penalty of perjury, that the information given herein is true and correct in all respects for the company or organization applying for funding (the ?Company?), presently and for the past five years: -the Company is not a party to any litigation or any litigation is not pending or anticipated that could have an adverse material effect on the company?s financial condition; -the Company does not have any contingent liabilities that could have a material effect on its solvency; -the Company, its affiliates or any member of its management or any other concern with which such members of management have been officers or directors, have never been involved in bankruptcy, creditor's rights, or receivership

proceedings or sought protection from creditors; -the Company is not delinquent on any of its state, federal or local tax obligations; -no senior manager or principal of the Company has ever been charged with or convicted of any felony, or misdemeanor other than minor traffic offenses, or been a member of the management, an owner or majority stockholder of any firm or corporation convicted of any felony; -the Company or any of the Company?s affiliates, principal owners or Officers has not received a violation of State Labor Law deemed ?willful?; -the Company or any of its affiliates has never been cited for a violation of State, Federal, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or other operating practices; -there are not any outstanding judgments or liens pending against the Company other than liens in the normal course of business. -the Company or any of its affiliates, principal owners or officers the company has not been the subject of any judgments, injunctions, or liens including, but not limited to, judgments based on taxes owed, fines and penalties assessed by any governmental agency, or elected official against the Company. - the Company or any of its affiliates, principal owners or officers the company has not been investigated by any governmental agency, including, but not limited to, federal, state and local regulatory agencies -the Company or any of its affiliates, principal owners or officers the company has not been debarred from entering into any government contract; been found non-responsible on any government contract; been declared in default ore terminated for cause on any government contract; been determined to be ineligible to bid or propose on any contract; been suspended from bidding on any government contract; received an overall unsatisfactory performance rating from any government agency on any contract; agree to a voluntary exclusion from bidding or contracting on a government contract. - the Company or any of its affiliates, principal owners or officers the company has not failed to file any of the required forms with any government entity regulating the Company. By entering your name in the box below, you agree to allow the Department of Taxation to share the Company tax information with ESD. By entering your name in the box below, you agree to allow the Department of Labor to share tax and employer information with ESD. Note: If any of the statements above are not true, in addition to entering your name, also include an explanation in the box below, indicating which issue you are addressing.

# 105. **Optional Question Header:**

Funding Sources (Enter dollar amounts below)

**Question Ref:** Q\_657 **Question Type:** Budget

Total Project Cost

# 106. Question Ref: Q\_659 Question Type: Budget

Amount provided directly by applicant toward project

# 107. Question Ref: Q\_660 Question Type: Budget

State sources committed to project

# HELP SECTION

For each source, list: program name, type of assistance (loan, grant, interest rate subsidy, etc), and amount of assistance. For loans, list interest rate and term.

# 108. Question Ref: Q\_662 Question Type: Budget

Federal sources committed to project

# 109. Question Ref: Q\_664 Question Type: Budget

Local (municipal) sources committed to project, if different than applicant.

# 110. Question Ref: Q\_665 Question Type: Budget

Private sources committed to project

# HELP SECTION

For each source, list: program name, type of assistance (loan, grant, interest rate subsidy, bond financing, sales tax exemption on construction materials and/or non-manufacturing machinery or equipment, mortgage recording tax waiver, etc), and amount of assistance. For loan and bond financing, list interest rate and term.

# 111. Question Ref: Q\_668 Question Type: Budget

Not-for-Profit/foundation funding committed to project

# 112. **Optional Question Header:**

# Expenditure Activities (Enter dollar amounts below)

**Question Ref:** Q\_670 **Question Type:** Budget

Planning

# 113. Question Ref: Q\_672 Question Type: Budget

Design

# 114. Question Ref: Q\_674 Question Type: Budget

Construction/Renovation

# 115. Question Ref: Q\_676 Question Type: Budget

**Property Acquisition** 

# 116. Question Ref: Q\_684 Question Type: Budget

Equipment and Machinery

HELP SECTION

This category is for the purchase of equipment and machinery directly by the applicant. List each piece of equipment/machinery to be purchased outlining the purpose of its use with an estimated cost. Note that equipment/machinery rental and the value of the use or donation of equipment/machinery should be listed in Other.

# 117. Question Ref: Q\_688 Question Type: Budget

Other

HELP SECTION

State the cost and describe briefly budget items that do not fit in the categories above For actual costs to be incurred list the type of cost, purpose and total cost. For Volunteer Services – provide a generalized description and the total value.

For Donated Professional Services - indicate the service being provided and the total value.

For Donated Supplies and Materials – indicate the supplies and materials being provided and the total value

For Equipment Usage or Donated Equipment - indicate the purpose of its use and the total value.

# 118. Question Ref: Q\_719 Question Type: Budget

Furniture and Fixtures