City of Utica Industrial Development Agency Application

The information required by this form is necessary to determine the eligibility of your project for IDA benefits. Please answer all questions; insert "NONE", or "NOT APPLICABLE", where necessary. If an estimate is given, put "EST." after the figure. Attach additional sheets if more space is needed for a response than is provided. Return three copies of this application to the City of Utica Industrial Development Agency.

All information contained in this form will be treated confidentially, to the extent permitted by law.

A project financed through this Agency involves the preparation and execution of significant legal documents. Please consult with an attorney before signing any documents in connection with the proposed project.

PART I

Applicant Applicant's legal Name: Artspace Utica Lofts, L.P./To be formed Housing Development Fund Corporation 250 3rd Ave N, Suite 400 Principal Address: Minneapolis, MN 55401 1012, 1018, 1022 Park Ave. Project Address: Utica, NY 13501 Telephone Number(s): 612-333-9012 Federal Identification Number: 88-1293234 Company IRS Filing Office Location: Company Officer completing this application: Name: Becky Carlson St. Clair Director, Property Development Title: 612-333-9012 Phone: office Email: becky.carlsonstclair@artspace.org

Α.	Is the applica	int a:						
	() Corporation: If YES, Public () Private () If a PUBLIC Corporation, on which exchange is it listed?							
	() Sole Propr () Partnershi () Subchapte () DISC () Other (spe	p er S ecify)	Now					
B.	State of incorporation/organization, in applicable. Stockholders, Directors, Officers, Partners or Members							
A.	Provide the fo	llowing infor	mation in regard to	principal stockh	olders or parties:			
	<u>Name</u>		Home Address		Percentage of Ownership			
A	rtspace Utica Lof	ts GP, L	250 3rd Ave N,	Suite 400, 1	1%			
_								
В.		llowing infor	mation in regard to					
(Company <u>Officer</u>		Name and Home Address	9	Other Principal Business Affiliation			
Presider	nt	L. Kelley	/ Lindquist	None				
Vice President		Gregory	Gregory Handberg					
Treasurer		William	Law	None				

	C.	Is the applicant or any of the persons listed in 2(A) above related, directly or indirectly, to any other entity by more than 50% common ownership? If also, indicate name of such entity and the relationship.					
		No					
	D.	Is the applicant affiliated with any other entity, directly or indirectly, other than as indicated in response to paragraph C above? If YES, please indicate name and relationship of such other entity and the address thereof:					
		Artspace Projects, Inc. is the developer and sole,					
		managing member of the General Partner,					
		Artspace Utica GP, LLC					
3.		Applicant's accountant					
		Name and Title: Aaron Ness					
		Name of Firm: Eide Bailly LLP					
		Address: 1730 Burnt Boat Loop, Suite 100					
		Bismark, ND 58503					
		Telephone Number: 701-255-8480 Email: aness@eidebailly.com					
4.		Applicant's attorney					
		Name and Title: Chris Ollinck					
		Name of Firm: Cannon Heyman & Weiss, LLP					
		Address: 726 Exchange Street, Suite 500					
		Buffalo, NY 14210					
		Telephone: 716-856-1700 x395 Email: COllinick@chwattys.com					

5. References (Individuals and institutions in this section may be contacted)

A. Banking/Financial Institution:

	Name of Institution	Address and Phone Number	Account Officer/ Contact Person	
Brid	gewater Bank	370 Wabasha Street N, St _∎	John Callahan Elizabeth Gruber	
Ban	k of America	100 Federal Street, 4th Flog		
US E	Bank 800 Nicollet Mall Fl 2, I		Kellie Martinez	
В.	Business supplie	rs (list three largest accounts)		
	Name of Supplier	Address and Phone Number	Account Officer/ Contact Person	
lot App	olicable			
C.	Maior customers	(list three largest)		
C.		(list three largest)	Account Officer/	
C.	Major customers Name of <u>Customer</u>	(list three largest) Address and Phone Number	Account Officer/ Contact Person	

6. Business Description

A. Describe nature of business and principal products and/or services:

Artspace Utica Lofts, LP will be the owner of Artspace Utica Lofts. It's business is to own and operate the property as an affordable housing development. The managing member of the General Partner will be Artspace Projects, Inc. the developer of the Project. Artspace is a nonprofit arts organization specializing in creating, owning, and operating affordable spaces for artists and creative businesses. The focus of the affordable spaces are live/work apartments for

artists and their families.

	B.	Describe the geographical market(s) served: Mohawk Valley					
7.		Present location(s) of busines	s operations				
	A.	List present location(s):					
		1. See Attached REO					
		2.					
		3.					
	B.	For what purpose is each of the	se used?)			
		1. See Attached REO					
		2.					
		3.					
	C.	For each of your present location	s which are <u>RENTED</u> , prov	vide the following information:			
	D.	Name of Landlord	Landlord's Address	<u>Landlord's</u>			
				Telephone Number			
		1. None					
		2.					
		3					
		Amount of Space	Annual Rental	Lease Termination Date			
		1					
		2.					
		3.					

For	each of your present	locations which you <u>OWN</u> , provide the f	ollowing information:
	Location	Annual Mortgage Payment	Termination Date
1.	See Attached REO		
2.			
3.			
List give		locations, if any, will be vacated if IDA ap	proval for your project is
N	one		
7:			
			-
	ny of these locations v so:	vill be sublet or sold, provide information of	concerning your ability to
	ot applicable		
-			
			

PART II

Reasons for Project

Please explain in detail why you want to undertake this project and define scope of project:

A group of local leaders invited Artspace to conduct a series of studies to quantify demand artist live/work housing. This project is in response to the interest by the community.

Artspace Utica Lofts will provide 43 live/work units in downtown Utica. It is anticipated that 37 units will be at 60% AMI and below and 4 units at 80% AMI. Included in this project is a 945 SF gallery/community room for residential events. There will be an outdoor plaza outside the gallery for public gathering. The intent of these spaces is to connect with invite in the Utica community. Additionally there will be 43 parking spaces, a path and playground that will connect with the City's planned Multipurpose Event Space on the neighboring lot.

Why are you requesting the involvement of the IDA in your project?

The IDA's financial assistance allows more resources to go towards providing affordable housing. Specifically, the involvement of the IDA helps with project funding competitiveness, and operational stability. The main source of funds for the project will come from Low Income Housing Tax Credits awarded by New York State Homes and Community Renewal. A PILOT approval benefits the scoring of the project for the highly competitive RFP.

How	will the applicant's plans be affected if IDA approval is not granted?	
Th	ne project cannot be undertaken but for the PILOT from the IDA due to the restricted rents on the project.	
	ase confirm by checking the box, below, if there is likelihood that the Project would not be undertake for the Financial Assistance provided by the Agency?	en
	Yes or No	
	e Project could be undertaken without Financial Assistance provided by the Agency, then provide ement in the space provided below indicating why the Project should be undertaken by the Agenc	
	e project cannot be undertaken but for the assistance of the Utica IDA	
-	e to the rent restrictions on the project for the next 30 years.	_
	e to the form reduience of the project for the flexit of years.	_
		_
		_
Ider	ntify the assistance being requested of the Agency (select all that apply):	
1	Exemption from Sales Tax Yes or X No	
1.	W/W	
2.	Exemption from Mortgage Tax Yes or X No	
3.	Exemption from Real Property Tax X Yes or No	
4.	Tax Exempt Financing * Yes or X No	
11.04	* (typically for not-for-profits & small qualified manufacturers)	

A. Type of Project

Check category or categories best describing your project (O - Owner) and all end-users (T – Tenant(s)) and the square footage of each:

	Manufacturing			sf
	Industrial (Assembly or Service)			sf
	Research and Development			sf
	Warehousing			sf
	Commercial			sf
	Pollution Control			sf
Χ	Housing		42,640	sf
	Back Office		,-	sf
	Facility for Aging			sf
	Multi-Tenant			sf
	Retail			sf
	Recreational			sf
	Other (specify)			sf
	5-14 5-19 	Total	42,640	sf

B. <u>Description of Proposed Project</u>

Check all appropriate categories which apply to the proposed project:

1. Acquisition of land	YES(X)	NO()
Acquisition of existing building	YES()	NO(X)
Renovations to existing building	YES()	NO(X)
Construction of addition to existing building	YES()	NO(X)
5. Demolition	YES()	NO(X)
6. Construction of a new building	YES(X)	NO()
7. Acquisition of machinery and/or equipment	YES()	NO(X)
8. Installation of machinery and/or equipment	YES()	NO(X)
9. Other (specify) furniture & fixtures	YES(X)	NO()

C. What is the zoning classification of the proposed site?

Central Business District

For what purpose was the site most recently used (e.g. light manufacturing, heavy manufacturing, assembly, etc.)? Vacant Lot							
	Loca	ation(s)	Street Address	Number of Floors/ SF/floor			
			1012 Park Ave, Utica, N	Not applicable			
			1018 & 1022 Park Ave, U	Itic Not applicable			
Is the	site in	an Empire Z	one?(X)Yes()No				
Is the	busin	ess Empire Z	one certified at this location: () Yes (X) No			
Attac	h a cop	oy of the last I	Business Annual Report filed.				
Is the	e propo	osed project	located within the boundary	of a Central New York Regional			
Trans	Transportation (Centro) District? (\chi) Yes () No						
1.	Pleas	se describe i	n detail the facility to be ac	quired, constructed or renovated			
	(including number of buildings and other existing structures or facilities) and attach						
	plot plans, photos or renderings, if available.						
The 1	The three lots (two owners) to be acquired are vacant with no structures.						
The	The project to be developed is a 43 unit, affordable housing building that will						
-	be four stories and 42,640 SF. There will be onsite parking with						
43 spaces.							
If construction or renovation work on this project has already begun, please describe the work in detail.							
No	Not applicable						
-							
3.	What is the estimated useful life of the:						
	a.	Facility:	40 years				
	10 years						
b. Equipment: 10 years							

List the principal items or categories of equipment to be acquired as part of the project unit appliances, trash compactor, elevator, vehicle electric charging stations (4)
If any of this equipment has already been purchased or ordered, please attach all invoice and purchase orders and list amounts paid and dates of expected delivery as well as a bescription:
Not Applicable
If the construction or operation of the proposed project will require any local ordinance
variance to be obtained or requires a permit or prior approval of any state or federal age or body (other than normal occupancy/construction permits), please specify: Not Applicable
Will the project have a significant effect on the environment, YES () NO (χ). If
YES, please describe the effect. Important: please attach Environmental Assessme
Phase I Site Suitability Form and EAE attached
Phase I, Site Suitability Form, and EAF attached
Will a related real estate holding company, partnership or other entity be involved in
the ownership structure of the Transaction? YES (X) NO () If YES, please
explain:
This is a LIHTC project with a partnership formed with the equity investor. The applicant is
a limited partnership. At the financial closing, the Investor Limited Partner will be admitted as a
as a limited partner of the Applicant, holding 99.99% interest and the General Partner will hold .01% interest

M.	 With regard to the present owner of the project site, please give: Name: The City of Utica/Cornel Associates LLC 						
	Address: 1 Kennedy Plaza, Utica, NY 13502						
			258 Genesee St, Utica, NY 13502				
	Telep	hone	Number: 315-792-0181/315-733-4611				
	•						
	2.	If th	ne applicant already owns the project site, indicate:				
		a.	date of purchase: Not Applicable				
		b.	purchase price:				
	1210	manencu					
	3.	If th	If the project site is mortgaged, please indicate:				
		a.	balance of mortgage: Not Applicable				
		b.	holder of mortgage:				
N.	Is there a relationship, legally, by virtue of common control, or through related persidirectly or indirectly, between the applicant and the present owner of the project site? YES () NO (X) If YES, please explain:						
Ο.	Is the	con	pany currently a tenant in the building to be occupied?				
	YES	() NO(X)				
P.	Are y	ou p	anning to use/develop the entire proposed facility?				
VES (V) NO ()							

If NO, give the following information with respect to present tenants:

1. <u>Pr</u> a.	esent Tenant Information Name of Business	Floors Square Feet Occupied Occupied		Nature of Tenant's Business			
Not a	Applicable			<u> </u>			
-							
b.	Which of the above tenan jobs will be affected?	ts will be vaca	ting upon your initial use	e of the facility? How many			
	Name of Firm	<u>Jobs</u>	Square Footage Nov	v Occupied			
Not	Applicable						
c.	For those tenants who vision following transaction:	vill remain aft	er your initial occupan	cy of the site, provide the			
	Name of	Term of	Renewal	Square Footage			
	<u>Tenant</u>	<u>Lease</u>	<u>Options</u>	Now Occupied			
Not	Applicable						
				2			
	Are any of the above ten	ants related to	the owner of the facilit	y? YES() NO()			
d.	If the applicant will be occupying the premises of any of the tenants listed in (c) when their lease expires, please list.						
	Not Applicable						
	-						
	-						

e. Please provide copies of all present lease(s) at the proposed project site.

YES () NO (X) If YES, provide details of your proposals:
Will financing by the Agency for the Project result in the removal or abandonment of a pla or other facility of the applicant or any related entity presently located in another area in the
State of New York? YES () NO (x)
If the answer is YES, please explain briefly the reasons for the move.
Is the proposed project reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the State of New York? YES () NO (χ)
Is the proposed project reasonably necessary to preserve the competitive position of the project occupant in its respective industry? YES () NO (χ)
If any of the parties who will be tenants in this project are related to or affiliated with the applicant, please identify them:
Not Applicable

2. Employment *

a. List your present employment in the City of Utica, if any, and an estimate of the employment at the <u>proposed facility</u> at the end of two years. NOTE: New York State considers Full Time employment as 35 hours or more. Full-time jobs, plus the combination of two or more part-time jobs that, when combined together, constitute the equivalent hours of a full-time position (35 or more hours).

Employment	Current # of applicant's jobs at/or to be located at proposed project location	Number of FTE jobs to be RETAINED	Number of FTE jobs to be CREATED two years after project completion	Estimate number of residents in Labor Market Area that will fill projected jobs two years after project completion
Full-Time (FTE)	0	0	1.5	1.5

The Labor Market Area consists of the following counties: Oneida, Lewis, Herkimer, Otsego, Madison and Oswego

b. Characterize the labor force to be associated with this project location according to the following categories:

Category	Current/ Anticipated	Avg Salary or Salary Range	Avg Fringe Benefits or Range
Officers			
Sales/Supervisory	Property Manager	39,000	13,650
Clerical			
Plant/Production			
Other (specify)	Maintenance/Janitor	34,000	12,000

Notes: 1 Site Manager (3/4 time), 1 Maintenance/Janitorial (3/4 time)

c. Estimate the Annual Payroll for the employees associated with the project location.

Currently	End of Year One	End of Year Two	
^{\$} 0	\$ 98,650	\$101,610	

^{*} Company/Applicant will be required to submit Annual Project Monitoring Reports (attached) along with a copy of the NYS 45 (four quarters) for a minimum of five (5) years for any commercial project and ten (10) years for any industrial/manufacturing project, or for the length of UIDA involvement in the project. Annual Project Monitoring Reports will be compared to employment counts as stated above and companies whose reported counts fall below those levels above will be subject to the Agency's Recapture Provisions Policy.

Sources of Funds for Project Costs:		% of Total project costs
Bank Financing:	\$	
Equity (excluding equity attributed to grants/tax credits)	\$ <u>885,000</u>	5%
Tax Exempt Bond Issuance (if applicable)	\$ <u>0</u>	0
Taxable Bond Issuance (if applicable)	\$ <u>0</u>	0
Public Sources (Include sum total of all state and federal grants and tax credits)	\$ <u>15,286,035</u>	95%
Identify each state and federal grant/credit:		
NYS Low Income Housing Trust Fund \$ 3	,750,000	
NYS Downtown Revitalization Initiative \$	50,000	
City of Utica ARPA _{\$ 1}	,150,000	
LIHTC/SLIHC \$ 9	,736,035	
Total Sources of Funds for Project Costs:	\$ <u>16,171,035</u>	100%
Have any of the above costs been paid or incurred as of	the date of this Applicat	ion?
Yes No. If Yes, describe particulars:		
Mortgage Recording Tax Exemption Benefit: Amount of mortgage recording tax:		
Mortgage Amount (include sum total of construction/perma	anent/bridge financing):	\$ N/A
Estimated Mortgage Recording Tax Exemption Benefit (pro		\$
Amount as indicated above multiplied by 0.75%):		

Please Note: The New York State General Municipal Law was recently amended to reflect that industrial development agencies are not exempt from the additional mortgage recording tax of .25% that is assessed to properties that are located within a regional transportation district. Oneida County is located within the Central New York Regional Transportation District; as such, all UIDA projects will be exempt from .75% of mortgage recording tax, but must pay .25% of mortgage recording tax, which will be directed to the Transportation District.

3. Estimated Project Cost

Listed the costs necessary for the construction, acquisition or renovation of the project (this should NOT include working capital needs, moving expenses, work in progress, stock in trade, applicant's debt repayment, real estate broker fees or your legal fees):

Acquisition of Land	\$87,500
Acquisition of Building(s)	\$ <u>O</u>
Renovation Costs	\$ <u>O</u>
New Construction of Buildings	\$ <u>12,270,989</u>
Machinery and Equipment (taxable) (other than furniture costs)	\$341,893
Machinery and Equipment (non-taxable)	\$
Furniture and Fixtures	\$24,000
Installation Costs	\$
Architectural/Engineering Fees	\$ <u>487,380</u>
Fees (other than your own counsel and brokerage fees)	\$297,140
Legal, Environ, Consultants Interest on Interim Financings	\$ <u>O</u>
Other (specify)	\$ 2,662,133
Total Project Cost	_{\$} 16,171,035
	goods and services that are subject to State and trom the Agency's Sales and Use Tax exemption
Estimated State and local Sales and Use Tax Eabove):	Benefit (product of 8.75% multiplied by the figure,

4. Real Estate Taxes

List separately the proposed project's Real Estate Taxes and/or Assessed Value as it applies to land and building:

Project's	Real Estate Taxes	Assessed Value	
Land(s) \$1,702		\$25,400	
Building(s)	\$ 0	\$ 0	
Total	\$1,702	\$25,400	

Calculate the value of the PILOT exemption anticipated for the project described:

5. Project Schedule

Indicate the estimated dates for the following:

- a. Construction commencement: 2/1/23
- b. Construction completion: 4/1/24
- c. Project financing: List the dates and in what amounts the estimated funds will be required:

The total project financing of \$16,171,035 will be required at the financial closing on 2/1/23.

- d. Indicate the name of the incorporated municipality in which the facility will be located and the applicant's (or any related entity's) estimated capital expenditures in such municipality during the past three years:
 - City of Utica. There have been no capital expenditures in the past 3 years.
- e. What do you expect the applicant's (or any related entities) capital expenditures to be in the above municipality during the next three years (including this project):

The total project cost of \$16,171,035.

	f.	If the applicant or any related entity has previously secured the benefit of tax exempt financing in the City of Utica, whether through IDA, the New York Job Development Authority or any other entity, please explain (indicate date, location of financed facility, and outstanding balance):
		Not applicable
	g.	Has the applicant or any related entity received the benefit of tax exempt financing anywhere within the United States within the past 90 days or is the applicant or any related entity contemplating the receipt of such financing assistance within the next
		90 days? YES () NO (X) if YES, please explain.
6. <u>Project</u>	Financi	ng Efforts
	BONE	THE APPLICANT'S RESPONSIBILITY TO SECURE A PURCHASER FOR IDADS ISSUED IN CONJUNCTION WITH THIS PROJECT. Below are a series of ions relating to your efforts to secure financing for your project if IDA approval is ed.
to the	financ	pplicant contacted any bank, financial/lending institution or private investor in regard ing for this project? YES (X) NO () If YES, please give details:
The	e con	struction lender and equity investor is Bank of America
23		
\$ 		

В	. Ha	ve you	obtained a financial commitment for this project? YES (X) NO ()
		1. The I	If YES, please briefly describe this commitment and attach related correspondence: etter of interest from Bank of America for the LIHTC/SLIHC equity and
		the	construction loan is attached.
		2.	If NO, please explain how you will be able to finance this project:
C.			any other governmental agencies that you have contacted concerning financial
			in regard to your proposed project? YES (x) NO $()$ If YES, please explain ject been awarded \$650,000 from DRI. A tax credit application
	-		ed to NYS HRC on March 30, 2022. Award announcements are anticipated late Summer 2022.
	Thi	s appli	cation also includes requests for the Low Income Housing Trust Fund and
	the	Stat	e LIHTC. The project was recently awarded \$1.15M in ARPA
	fur	nds f	rom the City of Utica.
D.			applicant's obligations be guaranteed, and if so, by whom? rtspace Projects, Inc.
	2. I	s the g	uarantor related to or affiliated with the applicant?
	Arts	pace w	ill be the sole member of the General Partner, who will be the managing member of the LP

- E. Financial Information (Attach the Following).
 - Financial Statements for the last three fiscal years.
 - 2. Pro forma Balance Sheet as at start of operations at project site.
 - Projected Profit and Loss Statements for first two years of operation at project site.
 - Projected "Cash Flow" Statement, by quarters, for first year of operation at project site.

REPRESENTATIONS AND CERTIFICATION BY APPLICANT

The undersigned requests that this Application be submitted for review to the City of Utica Industrial Development Agency (the "Agency") and its Board of Directors.

Approval of the Application can be granted solely by this Agency's Board of Directors. The undersigned acknowledges that Applicant shall be responsible for all costs incurred by the Agency and its counsel in connection with the attendant negotiations whether or not the transaction is carried to a successful conclusion.

The Applicant further understands and agrees with the Agency as follows:

- 1. Annual Sales Tax Filings. 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 sales tax exemptions as part of the Financial Assistance from the Agency, in accordance with Section 874(8) of the General Municipal Law, the Applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the Applicant and all consultants or subcontractors retained by the Applicant.
- 2. Annual Employment Reports. The Applicant understands and agrees that, if the Project receives any Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the Agency, on an annual basis, reports regarding the number of people employed at the project site as well as tax benefits received with the action of the Agency. Failure to provide such reports as provided in the transaction documents will be an Event of Default under the Lease (or Leaseback) Agreement between the Agency and Applicant. In addition, a Notice of Failure to provide the Agency with an Employment Report may be reported to Agency board members, said report being an agenda item subject to the Open Meetings Law.
- 3. Absence of Conflict of Interest. The Applicant has consulted the Agency website of the list of the Agency 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 herein after described (if none, state "none"):
- 4. Hold Harmless. Applicant hereby releases the Agency and its members, officers, servants, agents and employees from, agrees that the Agency shall not be liable for and agrees to indemnify, defend and hold the Agency harmless from and against any and all liability arising from or expense incurred by (A) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the Application or the Project described therein or the tax

exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project; including without limiting the generality of the foregoing, all causes of action and attorneys' fees and any other expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing. If, for any reason, the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable or specified period of time, to take reasonable, proper or requested action, or withdraws, abandons, cancels or neglects the Application, or if the Agency or the Applicant are unable to reach final agreement with 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 processing of the Application, including attorneys' fees, if any.

- 5. The Applicant acknowledges that the Agency has disclosed that the actions and activities of the Agency are subject to the Public Authorities Accountability Act signed into law January 13, 2006 as Chapter 766 of the 2005 Laws of the State of New York.
- 6. The Applicant acknowledges that the Agency is subject to New York State's Freedom of Information Law (FOIL). Applicant understands that all Project information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.
- 7. The Applicant acknowledges that it has been provided with a copy of the Agency's recapture policy (the "Recapture Policy"). The Applicant covenants and agrees that it fully understands that the Recapture Policy is applicable to the Project that is the subject of this Application, and that the Agency will implement the Recapture Policy if and when it is so required to do so. The Applicant further covenants and agrees that its Project is potentially subject to termination of Agency financial assistance and/or recapture of Agency financial assistance so provided and/or previously granted.
- 8. The Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if Financial Assistance is provided for the proposed Project:
 - § 862. Restrictions on funds of the agency. (1) No funds of the agency shall be used in respect of any project if the completion thereof would result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the project occupant located within the state, provided, however, that neither restriction shall apply if the agency shall determine on the basis of the application before it that the project is reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the state or is reasonably necessary to preserve the competitive position of the project occupant in its respective industry.
- The Applicant confirms and acknowledges that the owner, occupant, or operator receiving Financial
 Assistance for the proposed Project is in substantial compliance with applicable local, state and
 federal tax, worker protection and environmental laws, rules and regulations.
- 10. The Applicant confirms and acknowledges that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of any Financial Assistance and the reimbursement of an amount equal to all or part of any tax exemption claimed by reason of the Agency's involvement the Project.

- 11. The Applicant confirms and hereby acknowledges that as of the date of this Application, the Applicant is in substantial compliance with all provisions of Article 18-A of the New York General Municipal Law, including, but not limited to, the provision of Section 859-a and Section 862(1) of the New York General Municipal Law.
- 12. The Applicant and the individual executing this Application on behalf of the Applicant acknowledge that the Agency will rely on the representations made herein when acting on this Application and hereby represent that the statements made herein do not contain any untrue statement of a material fact and do not omit to state a material fact necessary to make the statements contained herein not misleading.

	OF ONEIDA) ss.:	
Grego	, being first duly	sworn, deposes and says:
1.	That I am the Vice President (Corpora Artspace Utica Lofts, L.P. authorized on behalf of the Applicant to bind the	(Applicant) and that I am duly
2.	That I have read the attached Application, I is best of my knowledge and belief, this Application true, accurate and complete.	
	ed and affirmed to me under penalties of perjury lay of Suly, 2022. (Notary Public)	CONNOR JACK ROBINSON NOTARY PUBLIC MINNESOTA My Commission Expires Jan. 31, 2020

If the application has been completed by or in part by other than the person signing this application for the applicant please indicate who and in what capacity:

By: Artspace Projects, Inc.

Name: Becky Carlson St. Clair

Title: Director, Property Dovelopment

Date: 7/27/22

Return the original application and six copies with a check in the amount of \$250.00 made payable to: Utica Industrial Development Agency, 1 Kennedy Plaza, Utica, New York, Attn.: Jack N. Spaeth, Executive Director.

UTICA INDUSTRIAL DEVELOPMENT AGENCY COST/BENEFIT ANALYSIS

Required by §859-a(3) of the New York General Municipal Law

TO BE ATTACHED TO AND MADE PART OF APPLICATION TO THE AGENCY

Name of Applicant:	Artspace Utica Lofts, L.P.		
Address of Droisets	1012 1018 1022 Dark Av	ropus (C	emploted address 1020 Park Ava)
Address of Project:	Utica, NY 13501	/enue (C	ompleted address 1020 Park Ave.)
			·····
Description of Proje A new construction, 43 unit, a		oment fo	r artists and their families. The 4 story building is 42,640 SF that
			no buildings. There will be 43 spaces of parking, a plaza, and
child play structure on site.			
Name of all Subless	ees or Other Occi	upants	s of Facility:
Principals or Parent Artspace Projects, Inc.	Company of App	licant	:
Principals of any Su	blessee or Occup	ant:	
Product/Services of Developer and owner of affor	• •		
Estimated Completic	on Date of Project	t : <u>4/1/2</u> 4	1
Type of Financing/S	tructure:		Tax-Exempt Financing
			Taxable Financing
		Χ	Lease/Leaseback, Sale/Leaseback
			Other
Explain:			

Types of Benefits Expected to Receive:	X	Tax-Exempt Bonds Sales Tax Until Comple Mortgage Tax Abateme Real Property Tax Abateme	ent
Project Costs - Capital In	vestment		
Land Existing Building Rehab of Existing Building Construction of New Buildi Addition or Expansion Engineering and Architectu Equipment (detail below) Legal Fees Bank, Bond, Transaction Credit Provider, Truster Finance Charges Title Insurance, Enviror Review, Bank Commitre Appraisals, etc.	ural Fees on, Company, e nmental	\$ 87,500 \$ 0 \$ 0 \$ 12,270,989 \$ 0 \$ 487,380 \$ 341,893 \$ 255,000 \$ 2,728,273	Cost per Acre \$ 87,500 Cost per Sq Ft \$ 287.78 Cost per Sq Ft \$ 0
TOTAL COST OF PRO	JECT	\$ <u>16,171,035</u>	
Type of Equipment to be F	urchased	unit appliances, trash compacted electric charging stations (4)	or, elevator,
Grants or Loans expected Construction Loan (Bank of America		d (by who and amount) \$ 11,250,000 - Artspa	ce Utica Lofts. L.P.
DRI Grant (NYS HCR)		\$ 650,000 - Artspace	
ARPA Grant (City of Utica)		\$ 1,150,000 - Artspace	
Housing Trust Fund Loan (NYS	HCR)	\$ 3,750,000 - Artsp	ace Utica Lofts, L.P.
Company Information	· - · · · <u>/</u>		
Existing Jobs	0		
Created Jobs (by year 3)	2		
Retained Jobs	0		

BENEFITS

Taxable Goods and Services

Direct Jobs	Spend Rate	_	Wages	Expenditures	Sales Tax Rate	State/ Local Sales Tax Revenues
2	Created 36.	0% x <u>7</u>	3,000	= 26,280	_x 8.75% =	2,300
0	Existing 36.	0% x_		_=	_ x 8.75% =	
Indirect Jobs 0 0 25	Created Existing Construction Totals	36.0%	x	== == 411,84	x 8.75%	= 36,036

Real Property Taxes

Local (3 year) real property tax benefi	t (assuming <u>50</u>	% of jobs existing and	created own a
residence with an average assessmen	t of \$ 100,000	and the remainder of job	s existing and
created pay real property taxes through	h rent based on ar	n average assessment pe	r apartment of
\$ 25,000	Cı	urrent tax rate: 66.25/\$100	0 of AV

Real Property Taxes Paid \$\frac{24,843}{}

3 Yr Comparative Benefits \$ 139,851

COSTS

Real Property Taxes Abated on Improvements only (3-year period) \$29,613

Mortgage Tax Abated \$______

Estimated Sales Tax Abated During Construction Period \$______

3 Yr Comparative Costs \$ 29,613

(If there is tax-exempt financing of all or a portion of the project cost, there is a neutral cost/benefit because of lower interest rates by reason of exclusion of interest from gross income of bondholders for purposes of Federal and State income taxes. Taxable financing carries the same cost/benefit for State Income Tax purposes. Such cost/benefits cannot be qualified.)

Full Environmental Assessment Form Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

cent Park Ave sites, no address),	City of Utica, NY
	ely 1.4 acres. 1018 & 1022 Park Ave uilding utilities, landscaping
T. 1. 1	
Telephone: (716) 885	-0743
E-Mail: mmeier@hhla	architects.com
State: NY	Zip Code: 14201
Telephone: (612) 749	-0553
E-Mail: becky.carlson	stclair@artspace.org
State:	Zip Code:
MN	55401
Telephone:	
E-Mail:	
'	
State:	Zip Code:
	Telephone: (716) 885- E-Mail: mmeier@hhla State: NY Telephone: (612) 749- E-Mail: becky.carlson State: MN Telephone: E-Mail:

B. Government Approvals

B. Government Approvals, Funding, or Spor assistance.)	nsorship. ("Funding" includes grants, loans, ta	ax relief, and any othe	r forms of financial
Government Entity	If Yes: Identify Agency and Approval(s) Required	Applicati (Actual or	
a. City Counsel, Town Board, □Yes□No or Village Board of Trustees			
b. City, Town or Village ✓ Yes No Planning Board or Commission	Planning Board - Site Plan / SEQR	10/8/21	
c. City, Town or ☐Yes☐No Village Zoning Board of Appeals			
d. Other local agencies ☑Yes□No	Scenic & Historic Review	10/15/21	
e. County agencies ☐Yes☐No			
f. Regional agencies			
g. State agencies			
h. Federal agencies			
i. Coastal Resources.i. Is the project site within a Coastal Area, or	or the waterfront area of a Designated Inland W	aterway?	□Yes ☑ No
 ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? iii. Is the project site within a Coastal Erosion Hazard Area? 			
C. Planning and Zoning			
C.1. Planning and zoning actions.			
Will administrative or legislative adoption, or an only approval(s) which must be granted to enable If Yes, complete sections C, F and G. If No, proceed to question C.2 and complete sections C.2.			∐Yes∐No
C.2. Adopted land use plans.			
a. Do any municipally- adopted (city, town, vil) where the proposed action would be located?			✓ Yes□No
If Yes, does the comprehensive plan include spewould be located?	ecific recommendations for the site where the p	proposed action	□Yes□No
b. Is the site of the proposed action within any l Brownfield Opportunity Area (BOA); design or other?) If Yes, identify the plan(s): NYS Heritage Areas:Mohawk Valley Heritage Corridor	ocal or regional special planning district (for e ated State or Federal heritage area; watershed		∠ Yes□No
c. Is the proposed action located wholly or part or an adopted municipal farmland protection If Yes, identify the plan(s):		pal open space plan,	□Yes□No

C.3. Zoning	
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? CBD - Central Business District	Z Yes□No
b. Is the use permitted or allowed by a special or conditional use permit?	∠ Yes□No
c. Is a zoning change requested as part of the proposed action? If Yes, i. What is the proposed new zoning for the site?	□Yes□No
C.4. Existing community services.	
a. In what school district is the project site located? City of Utica	
b. What police or other public protection forces serve the project site? City of Utica	
c. Which fire protection and emergency medical services serve the project site? City of Utica	
d. What parks serve the project site? Chancellor Park	
D. Project Details	
D.1. Proposed and Potential Development	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed components)? Residential, minor commercial	, include all
b. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 1.4 acres 1.4 acres	
c. Is the proposed action an expansion of an existing project or use? i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, square feet)? % Units:	☐ Yes☐ No housing units,
square feet)? % Units: d. Is the proposed action a subdivision, or does it include a subdivision? If Yes,	Z Yes □No
<i>i.</i> Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) Residential single structure in (new) single lot	
 ii. Is a cluster/conservation layout proposed? iii. Number of lots proposed?1 iv. Minimum and maximum proposed lot sizes? Minimum1.4 Maximum1.5 	□Yes□No
e. Will the proposed action be constructed in multiple phases? i. If No, anticipated period of construction: ii. If Yes: • Total number of phases anticipated • Anticipated commencement date of phase 1 (including demolition) • Anticipated completion date of final phase • Generally describe connections or relationships among phases, including any contingencies where progress determine timing or duration of future phases:	

	ct include new resid				Z Yes □ No
If Yes, show nur	mbers of units propo				
	One Family	Two Family	Three Family	Multiple Family (four or more)	
Initial Phase				41	
At completion				44	
of all phases				41	
g. Does the prop	osed action include	new non-residenti	al construction (inclu	iding expansions)?	□Yes□No
If Yes,					_
i. Total number	r of structures	<u>_</u>		width; andlength	
ii. Dimensions	(in feet) of largest pr	roposed structure:	height;	width; andlength	
				square feet	
				l result in the impoundment of any	□Yes□No
If Yes,	is creation of a wate	r supply, reservoii	, pond, lake, waste la	agoon or other storage?	
	e impoundment:				
ii. If a water imp	poundment, the princ	cipal source of the	water:	☐ Ground water ☐ Surface water strea	ms Other specify:
l 					
iii. If other than	water, identify the ty	pe of impounded	contained liquids and	d their source.	
iv Approximate	e size of the propose	d impoundment	Volume:	million gallons: surface area:	acres
v. Dimensions of	of the proposed dam	or impounding st	ructure:	million gallons; surface area: _ _ height; length	ucres
vi. Construction	method/materials f	for the proposed da	am or impounding st	ructure (e.g., earth fill, rock, wood, cor	icrete):
D.2. Barriera O.	4				
D.2. Project Op					. -
				uring construction, operations, or both or foundations where all excavated	? Yes No
materials will		ation, grading or if	istanation of utilities	or foundations where all excavated	
If Yes:	remain onsite)				
<i>i</i> . What is the p	urpose of the excava	ation or dredging?			
				o be removed from the site?	
		• • —			
	hat duration of time				0.1
iii. Describe natu	ire and characteristic	es of materials to t	be excavated or dred	ged, and plans to use, manage or dispos	se of them.
					 -
	e onsite dewatering				☐Yes ☐No
If yes, descr	ibe				
	. 1 . 1 1 1	1 , 10			
v. What is the to	otal area to be dredg	ged or excavated?	timo?	acres acres	
vi. What would	he the maximum de	worked at any one	or dredging?	acres feet	
	avation require blas		or dredging:	icct	□Yes□No
				crease in size of, or encroachment	Yes No
	ing wetland, waterb	ody, shoreline, bea	ach or adjacent area?		
If Yes:	wetland or waterhad	v which would be	affected (by name y	vater index number, wetland map num	her or geographic
				vater index number, wettand map num	oci oi geograpilie
i e					

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, place alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in	
iii. Will the proposed action cause or result in disturbance to bottom sediments?If Yes, describe:	□Yes□No
iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?	☐ Yes ☐ No
If Yes:	
 acres of aquatic vegetation proposed to be removed: expected acreage of aquatic vegetation remaining after project completion: 	
purpose of proposed removal (e.g. beach clearing, invasive species control, boat access):	
proposed method of plant removal:	
if chemical/herbicide treatment will be used, specify product(s):	
v. Describe any proposed reclamation/mitigation following disturbance:	
c. Will the proposed action use, or create a new demand for water?	✓ Yes □No
f Yes:	M 1 €2 11/0
i. Total anticipated water usage/demand per day: 5333 gallons/day	
ii. Will the proposed action obtain water from an existing public water supply?	Z Yes □No
f Yes:	
Name of district or service area: Mohawk Valley	
Does the existing public water supply have capacity to serve the proposal? Let be a sixting public water supply have capacity to serve the proposal?	✓ Yes No
• Is the project site in the existing district?	✓ Yes No
• Is expansion of the district needed?	☐ Yes☐ No ☑ Yes☐ No
• Do existing lines serve the project site? iii. Will line extension within an existing district be necessary to supply the project?	Yes □No
f Yes:	L i es Lino
Describe extensions or capacity expansions proposed to serve this project:	
Source(s) of supply for the district:	
<i>iv.</i> Is a new water supply district or service area proposed to be formed to serve the project site? f, Yes:	☐ Yes☐No
Applicant/sponsor for new district:	
Date application submitted or anticipated:	
Proposed source(s) of supply for new district:	
v. If a public water supply will not be used, describe plans to provide water supply for the project:	
vi. If water supply will be from wells (public or private), what is the maximum pumping capacity:	gallons/minute.
d. Will the proposed action generate liquid wastes?	✓ Yes □No
f Yes:	
i. Total anticipated liquid waste generation per day: 5333 gallons/day	
ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describ	
approximate volumes or proportions of each):sidential wastewater	
ii. Will the proposed action use any existing public wastewater treatment facilities?	Z Yes □No
If Yes:	E 200 110
Name of wastewater treatment plant to be used: Sauquiot Creek Pump Station	
Name of district: City of Utica	
• Does the existing wastewater treatment plant have capacity to serve the project?	☐ Yes ☐ No
• Is the project site in the existing district?	Z Yes □No
• Is expansion of the district needed?	☐ Yes ☐ No

 Do existing sewer lines serve the project site? 	✓ Yes □No
 Will a line extension within an existing district be necessary to serve the project? 	☐Yes Z No
If Yes:	
Describe extensions or capacity expansions proposed to serve this project:	
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?	□Yes□No
If Yes:	
Applicant/sponsor for new district: Date application submitted or anticipated:	
 Date application submitted or anticipated: What is the receiving water for the wastewater discharge? 	
v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including speci	fring proposed
receiving water (name and classification if surface discharge or describe subsurface disposal plans):	Tyling proposed
receiving water (name and classification if surface discharge of describe substitute disposal plans).	
vi. Describe any plans or designs to capture, recycle or reuse liquid waste:	
none	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point	□Yes□No
sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point	
source (i.e. sheet flow) during construction or post construction?	
If Yes:	
i. How much impervious surface will the project create in relation to total size of project parcel?	
Square feet or acres (impervious surface)	
Square feet or acres (parcel size)	
ii. Describe types of new point sources.	
··· Will that the CC 1 12 to 172 to the CC 122 to 1	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent pr	operties,
groundwater, on-site surface water or off-site surface waters)?	
If to surface waters, identify receiving water bodies or wetlands:	
 Will stormwater runoff flow to adjacent properties? 	□Yes□No
<i>iv</i> . Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?	□Yes□No
f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel	□Yes□No
combustion, waste incineration, or other processes or operations?	
If Yes, identify:	
i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)	
ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)	
ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)	
iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)	
g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit,	□Yes□No
or Federal Clean Air Act Title IV or Title V Permit?	
If Yes:	
i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet	□Yes□No
ambient air quality standards for all or some parts of the year)	
<i>ii.</i> In addition to emissions as calculated in the application, the project will generate:	
•Tons/year (short tons) of Carbon Dioxide (CO ₂)	
•Tons/year (short tons) of Nitrous Oxide (N ₂ O)	
•Tons/year (short tons) of Perfluorocarbons (PFCs)	
•Tons/year (short tons) of Sulfur Hexafluoride (SF ₆)	
•Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs)	
• Tons/year (short tons) of Hazardous Air Pollutants (HAPs)	

h. Will the proposed action generate or emit methane (included landfills, composting facilities)? If Yes:		
i. Estimate methane generation in tons/year (metric):ii. Describe any methane capture, control or elimination medelectricity, flaring):	easures included in project design (e.g., comb	bustion to generate heat or
i. Will the proposed action result in the release of air pollutary quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., described)		uch as Yes No
j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services? If Yes: i. When is the peak traffic expected (Check all that apply) Randomly between hours of to	e: Morning Evening DW	eekend
 iii. Parking spaces: Existing	ng? sting roads, creation of new roads or change available within ½ mile of the proposed site? ortation or accommodations for use of hybrid	✓ Yes No in existing access, describe: ✓ Yes No d, electric ✓ Yes No
k. Will the proposed action (for commercial or industrial pr for energy? If Yes: i. Estimate annual electricity demand during operation of to the project of the project	the proposed action:	
local grid iii. Will the proposed action require a new, or an upgrade, to	o an existing substation?	☐Yes Z No
Hours of operation. Answer all items which apply. i. During Construction:	Saturday: 12aSunday: 12a	am-11:59pm am-11:59pm am-11:59pm am-11:59pm

	Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?	□Yes□No
	ves: Provide details including sources, time of day and duration:	
	Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Describe:	□Yes□No
n.	Will the proposed action have outdoor lighting?	✓ Yes □ No
i.	yes: Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:	
vvali	mount, 10-ft ht, down-lighting, +75-ft	
ii.	Will proposed action remove existing natural barriers that could act as a light barrier or screen? Describe:	□Yes□No
0.	Does the proposed action have the potential to produce odors for more than one hour per day? If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures:	∏Yes ∏No
If '	Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? Yes: Product(s) to be stored	∏Yes∏No
ii. iii.	Volume(s) per unit time (e.g., month, year) Generally, describe the proposed storage facilities:	
If `	Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? Yes: Describe proposed treatment(s):	☐ Yes ☐No
	Will the proposed action use Integrated Pest Management Practices?	☐ Yes ☐No
(Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? Yes:	✓ Yes □No
	Describe any solid waste(s) to be generated during construction or operation of the facility:	
	• Construction:	
ii	• Operation: 2.9 tons per month (unit of time) Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waster.	:
	Construction: recycle packaging & waste metal	
	Operation: Municipal program	
iii.	Proposed disposal methods/facilities for solid waste generated on-site: Construction: existing local landfill	
	Operation: Municipal program	

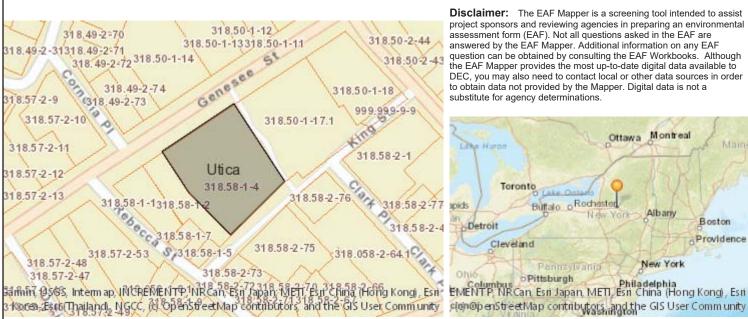
s. Does the proposed action include construction or modil If Yes: i. Type of management or handling of waste proposed other disposal activities): ii. Anticipated rate of disposal/processing: Tons/month, if transfer or other non-ome of the model of t	for the site (e.g., recycling or combustion/thermal treatment treatmentyears	transfer station, compostin	
t. Will the proposed action at the site involve the commer waste? If Yes: i. Name(s) of all hazardous wastes or constituents to be			
ii. Generally describe processes or activities involving h	nazardous wastes or constituer	ats:	
iii. Specify amount to be handled or generatedtoiv. Describe any proposals for on-site minimization, rec	ons/month ycling or reuse of hazardous c	constituents:	
v. Will any hazardous wastes be disposed at an existing If Yes: provide name and location of facility:			☐Yes ☐ No
If No: describe proposed management of any hazardous	wastes which will not be sent	to a hazardous waste facilit	y:
E. Site and Setting of Proposed Action			
E.1. Land uses on and surrounding the project site			
a. Existing land uses. i. Check all uses that occur on, adjoining and near the ☐ Urban ☐ Industrial ☐ Commercial ☐ Resident ☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other ii. If mix of uses, generally describe:	lential (suburban) Rural	(non-farm)	
b. Land uses and covertypes on the project site.	Q .		CI.
Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
 Roads, buildings, and other paved or impervious surfaces 	0.30	0.70	+0.40
Forested			
Meadows, grasslands or brushlands (non- agricultural, including abandoned agricultural)			
Agricultural (includes active orchards, field, greenhouse etc.)			
Surface water features			
(lakes, ponds, streams, rivers, etc.)			
Wetlands (freshwater or tidal)			
Non-vegetated (bare rock, earth or fill)			
Other Describe: Lawn/Landscape	0.64	0.24	-0.40

c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain:	□Yes□No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, i. Identify Facilities:	∐Yes∐No
e. Does the project site contain an existing dam? If Yes:	□Yes□No
i. Dimensions of the dam and impoundment:	
• Dam height: feet	
• Dam length: feet	
• Surface area: acres	
Volume impounded: gallons OR acre-feet	
ii. Dam's existing hazard classification:iii. Provide date and summarize results of last inspection:	
tit. I fovide date and summarize results of last hispection.	
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility Yes:	□Yes□No lity?
i. Has the facility been formally closed?	□Yes□ No
• If yes, cite sources/documentation:	
<i>ii.</i> Describe the location of the project site relative to the boundaries of the solid waste management facility:	
iii. Describe any development constraints due to the prior solid waste activities:	
. H	
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes:	□Yes□No
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurr	ed:
h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any	☐Yes☐ No
remedial actions been conducted at or adjacent to the proposed site?	
If Yes:	
<i>i.</i> Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:	□Yes□No
☐ Yes – Environmental Site Remediation database Provide DEC ID number(s):	
☐ Neither database	
☐ Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: ☐ Neither database	
☐ Neither database ii. If site has been subject of RCRA corrective activities, describe control measures:	
☐ Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database?	✓ Yes□No
☐ Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? If yes, provide DEC ID number(s): 633085	
 □ Neither database ii. If site has been subject of RCRA corrective activities, describe control measures: iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? 	✓ Yes No

If yes, DEC site ID number:		□Yes□No
Describe the type of institutional control (e.g., deed restriction or easement):		
 Describe any use limitations: Describe any engineering controls: 		
Will the project affect the institutional or engineering controls in place?		□Yes□No
• Explain:		
E.2. Natural Resources On or Near Project Site		
	<u>10</u> feet	
b. Are there bedrock outcroppings on the project site?		□Yes□No
If Yes, what proportion of the site is comprised of bedrock outcroppings?	%	
c. Predominant soil type(s) present on project site:	100_%	
	%	
d. What is the average depth to the water table on the project site? Average:>10	feet	
e. Drainage status of project site soils: Well Drained: % of site		
Moderately Well Drained: % of site		
Poorly Drained 100 % of site		
f. Approximate proportion of proposed action site with slopes: 0-10%:		
☐ 10-15%: ☐ 15% or greater:	% of site % of site	
	70 01 SIC	
g. Are there any unique geologic features on the project site? If Yes, describe:		□Yes☑No
11 1 es, describe.		
h. Surface water features.i. Does any portion of the project site contain wetlands or other waterbodies (including s	treams, rivers,	□Yes ☑ No
ponds or lakes)?	,,	
politis of fakes):		
ii. Do any wetlands or other waterbodies adjoin the project site?		∐Yes ☑ No
ii. Do any wetlands or other waterbodies adjoin the project site?If Yes to either i or ii, continue. If No, skip to E.2.i.		
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by 	y any federal,	□Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? 		
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the project site. 	ollowing information:	□Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the state or Ponds: Name Lakes or Ponds: Name 	ollowing information: Classification Classification	□Yes ☑ No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the project site. Streams: Name Lakes or Ponds: Name Wetlands: Name 	ollowing information: Classification Classification	□Yes ☑ No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the state or Ponds: Name	cllowing information: Classification Classification Approximate Size	□Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water or site. 	cllowing information: Classification Classification Approximate Size	□Yes ☑ No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the state or Ponds: Name	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water waterbodies? 	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water waterbodies? 	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated be state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water of waterbodies? If yes, name of impaired water body/bodies and basis for listing as impaired: 	cllowing information: Classification Classification Approximate Size quality-impaired	□Yes Z No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the form of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water of waterbodies? If yes, name of impaired water body/bodies and basis for listing as impaired: i. Is the project site in a designated Floodway? 	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes No ☐Yes No ☐Yes No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the streams: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water of waterbodies? If yes, name of impaired water body/bodies and basis for listing as impaired: i. Is the project site in a designated Floodway? j. Is the project site in the 100-year Floodplain? k. Is the project site in the 500-year Floodplain? l. Is the project site located over, or immediately adjoining, a primary, principal or sole so 	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes ✓No ☐Yes ✓No ☐Yes ✓No ☐Yes ✓No ☐Yes ✓No
 ii. Do any wetlands or other waterbodies adjoin the project site? If Yes to either i or ii, continue. If No, skip to E.2.i. iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by state or local agency? iv. For each identified regulated wetland and waterbody on the project site, provide the formula of the state or Ponds: Name Lakes or Ponds: Name Wetlands: Name Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most recent compilation of NYS water waterbodies? If yes, name of impaired water body/bodies and basis for listing as impaired: i. Is the project site in a designated Floodway? j. Is the project site in the 100-year Floodplain? k. Is the project site in the 500-year Floodplain? 	cllowing information: Classification Classification Approximate Size quality-impaired	☐Yes ✓No ☐Yes ✓No ☐Yes ✓No ☐Yes ✓No ☐Yes ✓No ☐Yes ✓No

m. Identify the predominant wildlife species that occupy none	or use the project site:	
	4-1	
n. Does the project site contain a designated significant natif Yes:i. Describe the habitat/community (composition, function)	on, and basis for designation):	□Yes ☑ No
ii. Source(s) of description or evaluation:		
iii. Extent of community/habitat:		
Currently:Following completion of project as proposed:	acres acres	
• Gain or loss (indicate + or -):	acres	
o. Does project site contain any species of plant or animal endangered or threatened, or does it contain any areas it	I that is listed by the federal government or NYS as identified as habitat for an endangered or threatened species	✓ Yes No es?
If Yes: i. Species and listing (endangered or threatened):		
Peregrine Falcon		
l		
p. Does the project site contain any species of plant or an special concern?	nimal that is listed by NYS as rare, or as a species of	□Yes☑No
If Yes:		
i. Species and listing:		
q. Is the project site or adjoining area currently used for h If yes, give a brief description of how the proposed action	nunting, trapping, fishing or shell fishing? n may affect that use:	□Yes □No
E.3. Designated Public Resources On or Near Project	Site	
a. Is the project site, or any portion of it, located in a design Agriculture and Markets Law, Article 25-AA, Section If Yes, provide county plus district name/number:	303 and 304?	∐Yes Z No
b. Are agricultural lands consisting of highly productive s i. If Yes: acreage(s) on project site?	•	□Yes □No
ii. Source(s) of soil rating(s):		
 c. Does the project site contain all or part of, or is it subs Natural Landmark? If Yes: 	stantially contiguous to, a registered National	∐Yes ∏ No
i. Nature of the natural landmark: Biological G	Community Geological Feature	
ii. Provide brief description of landmark, including valu	ues behind designation and approximate size/extent:	
d. Is the project site located in or does it adjoin a state list If Yes: i. CEA name:		□Yes ⊘ No
ii. Basis for designation:		
iii. Designating agency and date:		

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissio Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Pla If Yes: i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District ii. Name: Eligible property:DI IORIO RESIDENCE, Stanley Theater, New Century Club, Fort Schuyler Club Building, Tabernacle iii. Brief description of attributes on which listing is based:	ces?
f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	Z Yes□No
g. Have additional archaeological or historic site(s) or resources been identified on the project site? If Yes: i. Describe possible resource(s): ii. Basis for identification:	□Yes□No
h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? If Yes:	∏Yes∏No
ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or	scenic byway,
iii. Distance between project and resource: miles.	
etc.): iii. Distance between project and resource: iii. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation:	☐ Yes No
i. Identify the name of the river and its designation:ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	∐Yes∐No
F. Additional Information Attach any additional information which may be needed to clarify your project. If you have identified any adverse impacts which could be associated with your proposal, please describe those immeasures which you propose to avoid or minimize them.	pacts plus any
G. Verification I certify that the information provided is true to the best of my knowledge. Applicant/Sponsor Name Matthew W. Meier Date 10/8/21 Signature Title Architect	



Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.



B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Yes - Digital mapping data are not available for all Special Planning Districts. Refer to EAF Workbook.
C.2.b. [Special Planning District - Name]	NYS Heritage Areas:Mohawk Valley Heritage Corridor
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	Yes
E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID]	633085
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	No
E.2.h.ii [Surface Water Features]	No
E.2.h.iii [Surface Water Features]	No
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.I. [Aquifers]	Yes
E.2.I. [Aquifer Names]	Principal Aquifer

E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	Yes
E.2.o. [Endangered or Threatened Species - Name]	Peregrine Falcon
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook.
E.3.e.ii [National or State Register of Historic Places or State Eligible Sites - Name]	Eligible property:DI IORIO RESIDENCE, Stanley Theater, New Century Club, Fort Schuyler Club Building, Tabernacle Baptist Church, Downtown Genesee Street Historic District
E.3.f. [Archeological Sites]	Yes
E.3.i. [Designated River Corridor]	No