FORM APPLICATION FOR FINANCIAL ASSISTANCE
TOWN OF BROOKHAVEN INDUSTRIAL DEVELOPMENT AGENCY

1 Independence Hill, 2nd Floor, Farmingville, New York 11738
631 406-4244

RECEIVED
NOV 10 2026
Town of Brookhaven IDA

DATE: November 2, 2026

APPLICATION OF: Scheff Family RealtyCo., LLC / The Burmax Company
Name of Owner and/or User of Proposed Project

ADDRESS: 28 Barretts Ave
Holstville, NY 11742

Type of Application:
- ☐ Tax-Exempt Bond
- ☐ Taxable Bond
- ☑ Straight Lease
- ☐ Refunding Bond

Please respond to all items either by filling in blanks, by attachment (by marking space "see attachment number 1", etc.) or by N.A., where not applicable. Application must be filed in two copies. A non-refundable application fee is required at the time of submission of this application to the Agency. The non-refundable application fee is $3,000 for applications under $5 million and $4,000 for applications of $5 million or more, and should be made payable to the Town of Brookhaven Industrial Development Agency.

Transaction Counsel to the Agency may require a retainer which will be applied to fees incurred and actual out-of-pocket disbursements made during the inducement and negotiation processes and will be reflected on their final statement at closing.

Information provided herein will not be made public by the Agency prior to the passage of an official Inducement Resolution but may be subject to disclosure under the New York State Freedom of Information Law.

Prior to submitting a completed final application, please arrange to meet with the Agency's staff to review your draft application. Incomplete applications will not be considered. The Board reserves the right to require that the applicant pay for the preparation of a Cost Benefit Analysis, and the right to approve the company completing the analysis.

PLEASE NOTE: It is the policy of the Brookhaven IDA to encourage the use of local general contractors and labor and the payment of the area standard wage during construction on the project.

IDA benefits may not be conferred upon the Company until the Lease and Project Agreement have been executed.

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Part I: Owner & User Data

1. Owner Data:

A. Owner (Applicant for assistance): Scheff Family Realty Co., LLC

Address: 28 Barretts Ave

Holtsville, NY 11742

Federal Employer ID #: 11-3260190 Website: _____

NAICS Code: 531120

Owner Officer Certifying Application: Steven Scheff

Title of Officer: Member

Phone Number: 631-447-8700 E-mail: s.scheff@burmax.com

B. Business Type:

Sole Proprietorship ☐ Partnership ☐ Limited Liability Company ☑

Privately Held ☐ Public Corporation ☐ Listed on _____

State of Incorporation/Formation: New York

C. Nature of Business:
(e.g., "manufacturer of _____ for ____ industry"; "distributor of _____"; or "real estate holding company")

Real Estate Holding Company

D. Owner Counsel:

Firm Name: Presberg Law, P.C.

Address: 100 Corporate Plaza Suite B102

Islandia, NY 11749

Individual Attorney: Andrew Presberg

Phone Number: 631-232-4444 E-mail: apresberg@presberg.com

E. Principal Stockholders, Members or Partners, if any, of the Owner:

Name	Percent Owned
Steven Scheff	50%
Deborah Goldschmid	50%

Please attach to this Application as **Schedule F** an Organization Chart of Applicant.

F. Has the Owner, or any subsidiary or affiliate of the Owner, or any stockholder, partner, member, officer, director, or other entity with which any of these individuals is or has been associated with:

i. ever filed for bankruptcy, been adjudicated bankrupt or placed in receivership or otherwise been or presently is the subject of any bankruptcy or similar proceeding? (If yes, please explain)

No

ii. been convicted of a felony, or misdemeanor, or criminal offense (other than a motor vehicle violation)? (If yes, please explain)

No

G. If any of the above persons (see "E", above) or a group of them, owns more than 50% interest in the Owner, list all other organizations which are related to the Owner by virtue of such persons having more than a 50% interest in such organizations.

The Burmax Company. Inc.

H. Is the Owner related to any other organization by reason of more than a 50% ownership? If so, indicate name of related organization and relationship:

The Burmax Company, Inc.

I. List parent corporation, sister corporations and subsidiaries:

None

J. Has the Owner (or any related corporation or person) been involved in or benefited by any prior industrial development financing in the municipality in which this project is located, whether by this agency or another issuer? (Municipality herein means city, town, or village, or if the project is not in an incorporated city, town or village, the unincorporated areas of the county in which it is located.) If so, explain in full:

Yes, the Owner is currently involved is an Owner/Tenant relationship at 28 Barretts Ave, Holtsville, NY 11742.

K. List major bank references of the Owner:

Santander Bank - Anthony Wilkens 516-650-0976

2. User Data

(for co-applicants for assistance or where a landlord/tenant relationship will exist between the owner and the user)

A. User (together with the Owner, the "Applicant"): The Burmax Company, Inc.

Address: 28 Barretts Ave

Holtsville, NY 11742

Federal Employer ID #: 13-1972848 Website: www.Burmax.com

NAICS Code: 42349

User Officer Certifying Application: Thomas Forte

Title of Officer: CFO

Phone Number: 631-285-1244 E-mail: t.forte@burmax.com

B. Business Type:

Sole Proprietorship ☐ Partnership ☐ Privately Held ☑

Public Corporation ☐ Listed on _____

State of Incorporation/Formation: NewYork

C. Nature of Business:

(e.g., "manufacturer of _____ for ____ industry"; "distributor of _____"; or "real estate holding company")

Importer and Distributor of Professional Beauty Supplies

D. Are the User and the Owner Related Entities? Yes ☑ No ☐

i. If yes, the remainder of the questions in this Part I, Section 2 (with the exception of "F" below) need not be answered if answered for the Owner.

ii. If no, please complete all questions below.

E. User's Counsel:

Firm Name: Presberg Law, P.C.

Address: 100 Corporate Plaza Suite B102

Islandia, NY 11749

Individual Attorney: Andrew Presberg

Phone Number: 631-232-4444 E-mail: apresberg@presburg.com

F. Principal Stockholders or Partners, if any:

Name	Percent Owned
Steven Scheff	48.45%
Deborah Goldschmid	46.09%

G. Has the User, or any subsidiary or affiliate of the User, or any stockholder, partner, officer, director, or other entity with which any of these individuals is or has been associated with:

i. ever filed for bankruptcy, been adjudicated bankrupt or placed in receivership or otherwise been or presently is the subject of any bankruptcy or similar proceeding? (If yes, please explain)

No

ii. been convicted of a felony or criminal offense (other than a motor vehicle violation)? (If yes, please explain)

No

H. If any of the above persons (see "F", above) or a group of them, owns more than 50% interest in the User, list all other organizations which are related to the User by virtue of such persons having more than a 50% interest in such organizations.

Scheff Family Realty Co. LLC

I. Is the User related to any other organization by reason of more than a 50% ownership? If so, indicate name of related organization and relationship:

No

J. List parent corporation, sister corporations and subsidiaries:

None

K. Has the User (or any related corporation or person) been involved in or benefited by any prior industrial development financing in the municipality in which this project is located, whether by this agency or another issuer? (Municipality herein means city, town, or village, or if the project is not in an incorporated city, town or village, the unincorporated areas of the county in which it is located.) If so, explain in full:

The Owner is currently involved is an Owner/Tenant relationship at 28 Barretts Ave, Holtsville, NY 11742. This application is seeking a five year extension to the current benefits.

L. List major bank references of the User:

Santander Bank - Anthony Wilkens 516-650-0976

Part II – Operation at Current Location

(if the Owner and the User are unrelated entities, answer separately for each)

1. Current Location Address: 28 Barretts Ave, Holstville, NY 11742

2. Owned or Leased: Owned/Leased

3. Describe your present location (acreage, square footage, number buildings, number of floors, etc.):
   The location is a one story building with one hundred and twenty eight thousand square foot on 13.5 acrea's.

4. Type of operation (manufacturing, wholesale, distribution, retail, etc.) and products and/or services:
   Distribution of professional beauty products.

5. Are other facilities or related companies of the Applicant located within the State?
   Yes ☑ No ☐

   A. If yes, list the Address: 28 Barretts Ave, Holtsville, NY 11742

6. Will the completion of the project result in the removal of any facility or facilities of the Applicant from one area of the state to another OR in the abandonment of any facility or facilities of the Applicant located within the State? Yes ☐ No ☑

   A. If no, explain how current facilities will be utilized: The facility will continue to be used by The Burmax Company as an importer and distributor of professional beauty products.

   B. If yes, please indicate whether the project is reasonably necessary for the Applicant to maintain its competitive position in its industry or remain in the State and explain in full:
   N/A

7. Has the Applicant actively considered sites in another state? Yes ☑ No ☐

   A. If yes, please list states considered and explain: We are proposing additional investment in current facility if we get extended benefits otherwise the company will consider moving the entire operation to New Jersey.

8. Is the requested financial assistance reasonably necessary to prevent the Applicant from moving out of New York State? Yes ☑ No ☐
   A. Please explain:

9. Number of full-time equivalent employees (FTE's) at current location and average salary (indicate hourly or yearly salary):

146 FTE / Average yearly salary is $74,350

Part III – Project Data

1. Project Type:

   A. What type of transaction are you seeking? (Check one)

   Straight Lease ☑ Taxable Bonds ☐ Tax-Exempt Bonds ☐

   Equipment Lease Only ☐

   B. Type of benefit(s) the Applicant is seeking: (Check all that apply)

   Sales Tax Exemption ☑ Mortgage Recording Tax Exemption ☑

   PILOT Agreement: ☑ (Extension)

2. Location of project:

   A. Street Address: 28 Barretts Ave, Holtsville, NY 11742

   B. Tax Map: District 0200 Section 805.00 Block 01.00 Lot(s) 001.002

   C. Municipal Jurisdiction:

   i. Town: Brookhaven
   ii. Village: Holtsville
   iii. School District: Sachem

   D. Acreage: 13.5

3. Project Components (check all appropriate categories):

A. Construction of a new building ☐ Yes ☑ No
   i. Square footage: _____

B. Renovations of an existing building ☑ Yes ☐ No
   i. Square footage: 5,000

C. Demolition of an existing building ☐ Yes ☑ No
   i. Square footage: _____

D. Land to be cleared or disturbed ☐ Yes ☑ No
   i. Square footage/acreage: _____

E. Construction of addition to an existing building ☐ Yes ☑ No
   i. Square footage of addition: _____
   ii. Total square footage upon completion: _____

F. Acquisition of an existing building ☐ Yes ☑ No
   i. Square footage of existing building: _____

G. Installation of machinery and/or equipment ☐ Yes ☑ No

i. List principal items or categories of equipment to be acquired: _____

4. Current Use at Proposed Location:

A. Does the Applicant currently hold fee title to the proposed location?

i. If no, please list the present owner of the site: _____

B. Present use of the proposed location: Warehousing and distribution

C. Is the proposed location currently subject to an IDA transaction (whether through this Agency or another?) ☑ Yes ☐ No

i. If yes, explain: 10 year Pilot expiring December 31, 2027

D. Is there a purchase contract for the site? (If yes, explain): ☐ Yes ☑ No

E. Is there an existing or proposed lease for the site? (If yes, explain): ☑ Yes ☐ No

There's a current lease that expires December 2027. The lease would be extended for another 10 years if pilot extension is granted.

5. Proposed Use:

A. Describe the specific operations of the Applicant or other users to be conducted at the project site:

This site will continue to be used for warehousing and distribution.

B. Proposed product lines and market demands:

Product line includes full range of professional beauty supplies used by a barber or hairstylist .

C. If any space is to be leased to third parties, indicate the tenant(s), total square footage of the project to be leased to each tenant, and the proposed use by each tenant:

N/A

D. Need/purpose for project (e.g., why is it necessary, effect on Applicant's business):

The project is needed to make repairs, renovate bathrooms, replace existing roof, rip up and replace existing parking lot, replace outdoor parking lot drains, upgrade warehouse operating environment, re-seal all exterior walls, relandscape front and side of building, renovate existing warehouse cafeteria and update all offices.

E. Will any portion of the project be used for the making of retail sales to customers who personally visit the project location? Yes ☐ No ☑

i. If yes, what percentage of the project location will be utilized in connection with the sale of retail goods and/or services to customers who personally visit the project location? _____

F. To what extent will the project utilize resource conservation, energy efficiency, green technologies, and alternative / renewable energy measures?

The company plans to upgrade all indoor overhead lighting to energy efficient LED ~~as well as all outdoor lighting.~~

G. Will the Project provide onsite child care services or otherwise facilitate new child care services? ☐ Yes ☑ No

i. If yes, please describe the nature and extent of such childcare services: _____

H. Does the Project propose the creation or provision of housing? ☐ Yes ☑ No

i. If yes, please, please fill out Part X - Representations related to Projects Providing Housing.

6. Project Work:

A. Has construction work on this project begun? If yes, complete the following:

i.	Site Clearance:	Yes ☐	No ☑	% COMPLETE _____
ii.	Foundation:	Yes ☐	No ☑	% COMPLETE _____
iii.	Footings:	Yes ☐	No ☑	% COMPLETE _____
iv.	Steel:	Yes ☐	No ☑	% COMPLETE _____
v.	Masonry:	Yes ☐	No ☑	% COMPLETE _____
vi.	Other:	_____		

B. What is the current zoning? LI

C. Will the project meet zoning requirements at the proposed location?

Yes ☑ No ☐

D. If a change of zoning is required, please provide the details/status of the change of zone request: _____

E. Have site plans been submitted to the appropriate planning department? Yes ☐ No ☑

F. Is a change of use application required? Yes ☐ No ☑

7. Project Completion Schedule:

A. What is the proposed commencement date for the acquisition and the construction/renovation/equipping of the project?

i. Acquisition: _____

ii. Construction/Renovation/Equipping: November 2026

B. Provide an accurate estimate of the time schedule to complete the project and when the first use of the project is expected to occur: The first use of the project is estimated for December 2026, The project should be completed by December 31, 2028

Part IV – Project Costs and Financing

1. Project Costs:

   A. Give an accurate estimate of costs necessary for the acquisition, construction, renovation, improvement and/or equipping of the project location:

Description	Amount
Land and/or building acquisition	$
Building(s) demolition/construction	$
Building renovation	$ 750,000
Site Work	$ 480,000
Machinery and Equipment	$
Legal Fees	$ 40,000
Architectural/Engineering Fees	$
Financial Charges	$
Other (Specify)	$ 10,000
Total	$ 1,280,000

Please provide the percentage of materials and labor that will be sourced locally (Suffolk/Nassau Counties) 100%

Please note, IDA fees are based on the total project costs listed above. At the completion of your project, you are required to provide both a certificate of completion along with a cost affidavit certifying the final project costs. The IDA fees may be adjusted as a result of the certified cost affidavit. Money will not be refunded if the final project cost is less than the amount listed above. **Please initial below to confirm and acknowledge your understanding and acceptance of the foregoing.**

Initial _____

2. Method of Financing:

	Amount	Term
A. Tax-exempt bond financing:	$ _____	_____ years
B. Taxable bond financing:	$ _____	_____ years
C. Conventional Mortgage:	$ _____	_____ years
D. SBA (504) or other governmental financing:	$ _____	_____ years
E. Public Sources (include sum of all State and federal grants and tax credits):	$ _____	
F. Other loans:	$ _____	_____ years
G. Owner/User equity contribution:	$ 1,280,000	_____ years
Total Project Costs	$ 1,280,000	

i. What percentage of the project costs will be financed from public sector sources?

None

3. Project Financing (please only respond if you selected "Taxable Bonds" or "Tax-Exempt Bonds" in "Part III - 1. Project Type" above:

A. Have any of the above costs been paid or incurred (including contracts of sale or purchase orders) as of the date of this application? Yes ☐ No ☑

i. If yes, provide detail on a separate sheet.

B. Are costs of working capital, moving expenses, work in progress, or stock in trade included in the proposed uses of bond proceeds? Give details:

No

C. Will any of the funds borrowed through the Agency be used to repay or refinance an existing mortgage or outstanding loan? Give details:

No

D. Has the Applicant made any arrangements for the marketing or the purchase of the bond or bonds? If so, indicate with whom:

No

Part V – Project Benefits

1. Mortgage Recording Tax Benefit:

   A. Mortgage Amount for exemption (include sum total of construction/permanent/bridge financing):

   $_____

   B. Estimated Mortgage Recording Tax Exemption (product of Mortgage Amount and .75%):

   $_____

2. Sales and Use Tax Benefit:

   A. Gross amount of costs for goods and services that are subject to State and local Sales and Use Tax (such amount to benefit from the Agency's exemption):

   $ 750,000

   B. Estimated State and local Sales and Use Tax exemption (product of 8.75% and figure above):

   $ 65,625

   C. If your project has a landlord/tenant (owner/user) arrangement, please provide a breakdown of the number in "B" above:

      i. Owner: $_____

      ii. User: $ 65,625

3. Real Property Tax Benefit:

   A. Identify and describe if the project will utilize a real property tax exemption benefit other than the Agency's PILOT benefit: No

   B. Agency PILOT Benefit:

      i. Term of PILOT requested: 5 year extension of existing Pilot

      ii. Upon acceptance of this application, the Agency staff will create a PILOT schedule and attach such information to Exhibit A hereto. Applicant hereby requests such PILOT benefit as described on Exhibit A.

** *This application will not be deemed complete and final until Exhibit A hereto has been completed.* **

Part VI – Employment Data

1. List the Applicant's and each user's present employment and estimates of (i) employment at the proposed project location, not just new employment, at the end of year one and year two following project completion and (ii) the number of residents of the Labor Market Area* ("LMA") that would fill the full-time and part-time jobs at the end of the second year following completion:

Present number of FTEs at project location **: 146 (11/06/26) Date ($74,350) Average Annual Salary of Jobs to be Retained

Present number of FTEs at any other location of Applicant to be transferred to the project location, in total 0; from within (i) New York State ____; (ii) the Labor Market Area* ____; and (iii) Town of Brookhaven ____.

Please describe the expected use of all other locations where Applicant conducts operations, if any, after Applicant commences operations at the proposed project location. _____

(Also, please see Part IX – Special Representations Question #1-3).

FTEs to be Created at Project Location in First Year: 2 (fill in year)

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	**Total**
FTE						1			1				

FTEs to be Created at Project Location in Second Year: 4 (fill in year)

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	**Total**
FTE		1				2	1						

Number of Residents of LMA:
Full-Time: 140
Part-Time: 12

Cumulative Total FTEs ** at Project Location After Year 2
152

Construction Jobs to be Created: _____

*** The Labor Market Area includes the County/City/Town/Village in which the project is located as well as Nassau and Suffolk Counties.**

**** To calculate FTEs (Full-Time Equivalent Employees) please use the following example: if an organization considers 40 hours per week as full-time and there are four employees who work 10 hours each per week, the cumulative hours for those employees equal 1 FTE.**

2. Salary and Fringe Benefits:

Category of Jobs to be Created	Average Salary	Average Fringe Benefits
Salary Wage Earners	$78,850	$22,200
Commission Wage Earners		
Hourly Wage Earners	$38,480	$22.200
1099 and Contract Workers		

What is the annualized salary range of jobs to created? $37,450 to $120,000

Note: The Agency reserves the right to visit the facility to confirm that job creation numbers are being met.

Part VII – Representations, Certifications and Indemnification

1. Is the Applicant in any litigation which would have a material adverse effect on the Applicant's financial condition? (If yes, furnish details on a separate sheet)

   Yes ☐ No ☑

2. Has the Applicant or any of the management of the Applicant, the anticipated users or any of their affiliates, or any other concern with which such management has been connected, been cited for a violation of federal, state, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or other operating practices? (If yes, furnish details on a separate sheet)

   Yes ☐ No ☑

3. Is there a likelihood that the Applicant would proceed with this project without the Agency's assistance? (If no, please explain why; if yes, please explain why the Agency should grant the benefits requested)

   Yes ☐ No ☑

   Investment costs for expansion too high to justify expense unless some additional benefits are granted.

4. If the Applicant is unable to obtain financial assistance from the Agency for the project, what would be the impact on the Applicant and on the municipality?

   The company will not expand and therefore no maintain or increase its employment. Surrounding businesses will lose economic benefits of to employees.

Original signature and initials are required. Electronic signatures and initials are not permitted.

5. The Applicant understands and agrees that in accordance with Section 858-b(2) of the General Municipal Law, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the project will be listed with the New York State Department of Labor, Community Services Division and with the administrative entity of the service delivery area created pursuant to the Job Training Partnership Act (PL 97-300) in which the project is located (collectively, the "Referral Agencies"). The Applicant also agrees that it will, except as otherwise provided by collective bargaining contracts or agreements to which they are parties, where practicable, first consider for such new employment opportunities persons eligible to participate in federal job training partnership programs who shall be referred by the Referral Agencies.

   Initial _____

6. 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 in the Project as well as may lead to other possible enforcement actions.

   Initial _____

7. The Applicant represents and warrants that to the Applicant's knowledge neither it nor any of its affiliates, nor any of their respective partners, members, shareholders or other equity owners, and none of their respective employees, officers, directors, representatives or agents is, nor will they become a person or entity with who United States persons or entities are restricted from doing business under regulations of the Office of Foreign Asset Control (OFAC) of the Department of the Treasury (including those named on OFAC's Specially Designated and Blocked Persons List or under any statute, executive order, including the September 23, 2001, Executive Order Block Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism, as amended), or other governmental action and is not and will not assign or otherwise transfer this Agreement to, contract with or otherwise engage in any dealings or transactions or be otherwise associated with such persons or entities.

   Initial _____

8. The Applicant confirms and hereby acknowledges it has received the Agency's fee schedule attached hereto as Schedule A and agrees to pay such fees, together with any expenses incurred by the Agency, including those of Transaction Counsel, with respect to the Facility. The Applicant agrees to pay such expenses and further agrees to indemnify the Agency, its members, directors, employees, and agents and hold the Agency and such persons harmless against claims for losses, damage or injury or any expenses or damages incurred as a result of action taken by or on behalf of the Agency in good faith with respect to the project. The IDA fees are based on the total project costs listed in this application. At the completion of the project, you are required to provide both a certificate of completion along with a cost affidavit certifying the final project costs. The IDA fees may be increased as a result of the certified cost affidavit. Monies will not be refunded if the final costs are below the amount listed in the application.

   Furthermore, Applicant shall in no event hold the Agency liable, and covenants to not sue for, monetary damages or claim any sort of monetary damages (i) for failure to perform a mandatory or discretionary obligation in connection with this Application, or any other cause of action arising from this Application or (ii) arising out of or connected with any dispute, controversy, or issue regarding the Application or interpretation or effect of the provisions of this Application.

   Initial _____

9. The Applicant hereby agrees to comply with Section 875 of the General Municipal Law. The Company further agrees that the financial assistance granted to the project by the Agency is subject to recapture pursuant to Section 875 of the Act and the Agency's Recapture and Termination Policy, attached hereto as Schedule C.

   Initial _____

10. The Applicant confirms and hereby acknowledges it has received the Agency's PILOT Policy attached hereto as Schedule D and agrees to comply with the same.

    Initial _____

11. The Company hereby authorizes the Agency, without further notice or consent, to use the Company's name, logo and photographs related to the Facility in its advertising, marketing, and communications materials. Such materials may include web pages, print ads, direct mail and various types of brochures or marketing sheets, and various media formats other than those listed (including without limitation video or audio presentations through any media form). In these materials, the Agency also has the right to publicize its involvement in the Project.

    Initial _____

12. The Applicant confirms and hereby acknowledges it has received the Agency's Application and Resolution Expiration Policy available at brookhavenida.org/application and agrees to comply with same.

    Initial _____

13. The Applicant agrees that it will abide by all federal, state, county and local laws, rules, regulations, licensing and administrative orders applicable to the within Project. The Applicant confirms and hereby acknowledges it has received the Agency's Construction Wage Policy attached hereto as

Schedule B and agrees to comply with the same. The Applicant acknowledges that if the provisions of the Agency's Construction Wage Policy are applicable to the Project, the terms of such Construction Wage Policy shall be binding on any contractor or subcontractor of any tier with respect to all Project work including, without limitation, the construction and/or renovation phase of such Project. The Applicant acknowledges that there has not been any debarment or suspension by any federal, state or local government agency or authority in the past (3) three years applicable to the Project.

Initial _____

14. The Applicant confirms and hereby acknowledges that it has received the Agency's Background Credit and Litigation Review Authorization Form attached hereto as **Schedule E** and agrees to execute and deliver the same.

Initial _____

15. The Applicant confirms and hereby acknowledges that the Agency informed the Applicant that, effective January 1, 2024, certain Construction work done under contract in connection with financial assistance from the Agency may be subject to the requirements of Section 224-a of the Labor Law of the State, including but not limited to the requirement that such Construction shall be subject to prevailing wage requirements of Section 220 and 220-b of the Labor Law of the State. In addition, such Construction work may be required by Section 224-a of the Labor Law (Section 224-a) to comply with the objectives and goals of minority and women-owned business enterprises pursuant to Article Fifteen-A of the Executive Law and service-disabled veteran-owned business pursuant to Article Seventeen-B of the Executive Law. Accordingly, the Applicant confirms that it will comply with any related provisions and requirements to be set forth in the transaction documents with the Agency concerning the Project.

Initial _____

16. 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.

Initial _____

17. Applicant acknowledges that the Agency is entitled to request any and all additional information from Applicant it requires in its sole discretion in connection with reviewing this Application, and unless and until such information is provided to the Agency's satisfaction, this Application will remain incomplete.

Initial _____

18. The Applicant acknowledges that the Agency is not bound by any precedent or prior course of conduct in connection with this Application (unless specifically required by applicable law) .

Initial _____

Part VIII – Submission of Materials

1. Financial statements for the last two fiscal years (unless included in the Applicant's annual report). Note, if the project company is a newly formed entity, then the applicant is required to submit financial statements for the parent company or sponsor entity.

2. Applicant's annual reports (or 10-K's if publicly held) for the two most recent fiscal years.

3. Quarterly reports (form 10-Q's) and current reports (form 8-K's) since the most recent annual report, if any.

4. In addition, please attach the financial information described in items A, B, and C of any expected guarantor of the proposed bond issue.

5. Completed Environmental Assessment Form.

6. Most recent quarterly filing of NYS Department of Labor Form 45, as well as the most recent fourth quarter filing. Please remove the employee Social Security numbers and note the full-time equivalency for part-time employees.

(Remainder of Page Intentionally Left Blank)

Part IX – Special Representations

1. 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. The Applicant hereby indicates its compliance with Section 862(1) by signing the applicable statement below. **(Please sign only one of the following statements a. or b. below).**

    a. The completion of the entire project will not result in the removal of an industrial or manufacturing plant of the project occupant from one are 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.

    Representative of the Applicant: _____

    b. The completion of this entire project will 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 because 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.

    Representative of the Applicant: _____

2. 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.

    Representative of the Applicant: _____

3. In accordance with Section 862(1) of the New York General Municipal Law the Applicant understands and agrees that projects which 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 within the State is ineligible for financial assistance from the Agency, unless otherwise approved by the Agency as reasonably necessary to preserve the competitive position of the project in its respective industry or to discourage the project occupant from removing such other plant or facility to a location outside the State.

    Representative of the Applicant: _____

4. 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.

    Representative of the Applicant: _____

Part X – Representations related to Projects Providing Housing

Applicant hereby represents that:

1. The total number of new dwelling units the Project proposes to create is: ____
2. The number of existing dwelling units the Project proposes to rehabilitate/renovate is: ___
3. The number of new dwelling units the Project proposes to provide for occupants (but not on a transient basis) by individuals who are age 55 or over is: _____
4. The following table fairly represents the expected actual unit composition and affordability of the dwelling units at the Project:

	Total Number of Units	Number of Market Rate Units and associated range of expected monthly rental rates	Total Number of AMGI Restricted Units (please also complete the table below)
Studio		___ at $____	
One-bedroom		___ at $____	
Two-bedroom		___ at $____	
Three-bedroom		___ at $____	
Four-bedroom		___ at $____	
TOTALS (#)			

	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates	Total number of AMGI Restricted Units at____% and associated range of expected monthly rental rates
Studio	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____
One-bedroom	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____
Two-bedroom	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____
Three-bedroom	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____
Four-bedroom	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____	___ at $____
TOTALS (#)						

5. Not less than 10% of the dwelling units the Project proposes to provide shall be reserved for occupancy (but not on a transient basis) as Affordable housing for residents whose income per unit based upon family size (provided that for purposes of determining the income of a unit, a unit which does not have a separate bedroom shall be deemed to have one occupant, and a unit which has one or more separate bedrooms shall be deemed to have one and one-half occupants for each separate bedroom) does not exceed 80% of AMGI for the current year (or if the AMGI shall cease to be issued, then such other index as the Agency may select) and the gross rent for such dwelling unit (as determined under 26 USCS §42 (together with the regulations promulgated thereunder, the "Tax Credit Law")) shall not exceed 30% of the annual Nassau/Suffolk AMGI for the applicable income group for such units. Not less than 10% of the dwelling units the Project proposes to provide shall be reserved for occupancy (but not on a transient basis) as Workforce housing for residents whose income per unit based upon family size (determined as above provided) does not exceed 120 % of the AMGI for the current year (or if the AMGI shall cease to be issued, then such other index as the Agency may select) and the gross rent for such dwelling unit (as determined under the Tax Credit Law) shall not exceed 30% of the annual Nassau/Suffolk AMGI for the applicable income group for such units (collectively, the "Affordability Requirements").

Initial _____

6. Applicant hereby acknowledges Section 7(D)(j) of the Agency's Uniform Tax Exemption Policy, adopted on June 17, 2020 (the "UTEP"), and understands that should Applicant be approved for a Market Rate Housing Project, Applicant will be required to enter into a contract and/or technical assistance agreement with a local not-for-profit housing advocacy group reasonably acceptable to the Agency, to administer the Affordability Requirements (as such term is defined in section 5 above). Initial _____

7. The Project is subject to the following other affordability requirements, if any: (Please list any such requirements:

   a. _____;

   b. _____;

Applicant hereby confirms and agrees that all representations made in this Part X are true and correct

Representative of the Applicant: _____

Part XI – Certification

Thomas Forte (Name of representative of entities submitting application) deposes and says that he or she is the CFO (title) of The Bomax Co., Inc., the entities named in the attached application; that he or she has read the foregoing application and knows the contents thereof; and that the same is true to his or her knowledge.

Deponent further says that s/he is duly authorized to make this certification on behalf of the entities named in the attached Application (the "Applicant") and to bind the Applicant. The grounds of deponent's belief relative to all matters in said Application which are not stated upon his/her personal knowledge are investigations which deponent has caused to be made concerning the subject matter this Application, as well as in formation acquired by deponent in the course of his/her duties in connection with said Applicant and from the books and papers of the Applicant.

As representative of the Applicant, deponent acknowledges and agrees that Applicant shall be and is responsible for all costs incurred by the Town of Brookhaven Industrial Development Agency (hereinafter referred to as the "Agency") in connection with this Application, the attendant negotiations and all matters relating to the provision of financial assistance to which this Application relates, whether or not ever carried to successful conclusion. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails to act 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 Applicant is unable to find buyers willing to purchase the total bond issue required, then upon presentation of invoice, Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred with respect to the application, up to that date and time, including fees to bond or transaction counsel for the Agency and fees of general counsel for the Agency. Upon successful conclusion of the transaction contemplated herein, the Applicant shall pay to the Agency an administrative fee set by the Agency in accordance with its fee schedule in effect on the date of the foregoing application, and all other appropriate fees, which amounts are payable at closing.

The Applicant hereby subscribes and affirms under the penalties of perjury that the information provided in this Application is true, accurate and complete to the best of his or her knowledge.

Representative of Applicant

Sworn to me before this 10th
Day of November, 20 26
(seal)

JENNIFER PANTAZIS
Notary Public, State of New York
No. 01PA6328189
Qualified in Suffolk County
Commission Expires July 27, 2027

**** Note: If the entities named in this Application are unrelated and one individual cannot bind both entities, Parts VII, IX, X and XI of this Application must be completed by an individual representative for each entity ****

EXHIBIT A

Proposed PILOT Schedule

Upon acceptance of the Application and completion of the Cost Benefit Analysis, the Agency will attach the proposed PILOT Schedule to this Exhibit.