FORM APPLICATION FOR FINANCIAL ASSISTANCE TOWN OF BROOKHAVEN INDUSTRIAL DEVELOPMENT AGENCY 1 Independence Hill, 2nd Floor, Farmingville, New York 11738

DATE: 04/01/2	<u>5</u>	
APPLICATION OF:	Port Jefferson Co	mmons, LLC
	Name of Owner and/o	r User of Proposed Project
ADDRESS:	1601-1607 Main S	St
	Port Jefferson, N	Y 11777
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 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

<u> Dwner Data:</u>				
A. Owner (Applican	Port Jefferson Comet for assistance):	mons, LLC (beneficial owner)		
	00 University Ave, Su	ite 500		
Ro	ochester, NY 14607			
Federal Empl	oyer ID #.	Website: https://www.coniferllc.com		
NAICS Code: 531110				
Owner Officer Certifying Application: Sean Carpenter				
Title of Office	er: Senior Vice President			
Phone Number	All the state of t	E-mail:		
B. Business Type:				
Sole Proprieto	orship Partnership	Limited Liability Company		
*	d □ Public Corporation □			
State of Incor	poration/Formation: New York	<		
C. Nature of Busines (e.g., "manufa holding comp	ss: acturer of for industry";	"distributor of"; or "real estate		
D. Owner Counsel:				
Firm Name:	Forchelli Deegan Terrana LLP			
Address:	333 Earle Ovington Blvd, Suite 1010			
	Uniondale, NY 11553			
Individual At	torney: Daniel P. Deegan			
Dhana Numbe	516-248-1700	E-mail: ddeegan@forchellilaw.com		

	Name Per	cent Owned
	See attached org chart	
F.	F. Has the Owner, or any subsidiary or affiliate of the Ownerber, officer, director, or other entity with which any cassociated with: i. ever filed for bankruptcy, been adjudicated ban otherwise been or presently is the subject of any (If yes, please explain)	of these individuals is or has been krupt or placed in receivership or
	No	
	ii. been convicted of a felony, or misdemeanor, or convehicle violation)? (If yes, please explain) No	riminal offense (other than a motor
G.	G. If any of the above persons (see "E", above) or a group of the in the Owner, list all other organizations which are related persons having more than a 50% interest in such organization.	d to the Owner by virtue of such
	See attached related entity list	
H.	H. Is the Owner related to any other organization by reason of so, indicate name of related organization and relationship:	more than a 50% ownership? If
H.	, , ,	more than a 50% ownership? If
H.	so, indicate name of related organization and relationship: See attached related entity list	

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:

Real Estate Tax Exemption, Mortgage Tax Exemption, and Sales

Tax Exemption for the Wincoram and Port Jefferson Crossing

K. List major bank references of the Owner:M&T Bank: Tim Degrave (585-258-8420)

ivia i bank. Tim begrave (303-230-0420)

Five Star Bank: John Berry (585-627-1396)

A. User (to	gether with the Owne	r, the "Applicant"):	
Ado	ress:		
Fed			Website:
NA	ICS Code:	<u>.</u>	
User O	ficer Certifying Appli	ication:	
Titl	e of Officer:		
Pho	ne Number:		E-mail:
B. Busines	s Type:		
Sol	Proprietorship	Partnership	Privately Held 🛚
Pub	lic Corporation □	Listed on _	
Stat	e of Incorporation/For	mation:	
(e.g	of Business: ., "manufacturer of ling company")	for industry'	"; "distributor of"; or "real

D.	Are the User	and the Owner Related Entities?	Yes □	No 🔳	
		yes, the remainder of the questions "F" below) need not be answered			eption
	ii. If	no, please complete all questions b	elow.		
E.	User's Couns	el:			
	Firm Nan	ne:			
	Address:				
	Individua	l Attorney:			
	Phone Nu	mber:	E-mail	•	
F.	Principal Sto	ckholders or Partners, if any:			
		Name	Percen	t Owned	
				,	
			-		
G.	director, or or i. ev	or any subsidiary or affiliate of the cher entity with which any of these for filed for bankruptcy, been adjusted herwise been or presently is the subfiger, please explain)	individuals is dicated bankru	or has been associated pt or placed in receiv	with: ership or
		en convicted of a felony or cri olation)? (If yes, please explain)	minal offense	(other than a motor	vehicle

	Н.	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.
	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:
	J.	List parent corporation, sister corporations and subsidiaries:
	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:
	L.	List major bank references of the User:
*(if th 1. 2. 3.	Cu Ov	Part II – Operation at Current Location Owner and the User are unrelated entities, answer separately for each)** Trent Location Address: 1601-1607 Main Street, Port Jefferson, NY 11777 Wined or Leased: Owned scribe your present location (acreage, square footage, number buildings, number of floors, .):
		.57 acre site; two existing buildings ranging from 1-2 stories

4.	Type of operation (manufacturing, wholesale, distribution, retail, etc.) and products and/or services:				
	Buildings are currently vacant. There are no current operations on site				
5.	Are other facilities or related companies of the Applicant located within the State? Yes □ No ■				
	A. If yes, list the Address:				
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: Current facilities will be demolished				
	and replaced with 53 units of work-force housing, and amenity space				
	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:				
7.	Has the Applicant actively considered sites in another state? Yes □ No ■				
	A. If yes, please list states considered and explain:				
8.	Is the requested financial assistance reasonably necessary to prevent the Applicant from moving out of New York State? Yes □ No ■ A. Please explain: N/A				
9.	Number of full-time equivalent employees (FTE's) at current location and average salary (indicate hourly or yearly salary):				
	Not Applicable				

Part III - Project Data

1.	Pro	ject 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: ■
2.	Loc	cation of project:
	A.	Street Address: 1601-1607 Main St, Port Jefferson, NY 11777
	B.	Tax Map: District 0206 Section 021.00 Block 06.00 Lot(s) 1, 2, 3, 4
	C.	Municipal Jurisdiction:
		i. Town: Brookhaven
		ii. Village: Port Jefferson iii. School District: Brookhaven-Comsewogue Union Free School District
		III. School District.
	D.	Acreage:57
3.	Pro	oject Components (check all appropriate categories):
A	.	Construction of a new building i. Square footage: 71,794 ☐ No
B	3.	Renovations of an existing building i. Square footage: Yes No
C	·-	Demolition of an existing building i. Square footage: 5,500 □ No
D).	Land to be cleared or disturbed ■ Yes □ No i. Square footage/acreage: .57 acres
E	Ξ.	Construction of addition to an existing building ☐ Yes ☐ No i. Square footage of addition: ii. Total square footage upon completion:
F	7.	Acquisition of an existing building i. Square footage of existing building: Yes No

G.		Installation of machinery and/or equipment i. List principal items or categories of equipment to be acquired: Applies and □ They cotors □		
		Appliances, Elevators, HVAC		
i. If no, please list the present owner of the site: B. Present use of the proposed location: two residential units		rrent Use at Proposed Location:		
		Does the Applicant currently hold fee title to the proposed location?		
		i. If no, please list the present owner of the site: Belle Terre Properties, LLC; and 1605 Main St, LLC		
		Present use of the proposed location: Vacant commercial space, and		
		two residential units		
		Is the proposed location currently subject to an IDA transaction (whether through this Agency or another?) □ Yes ■ No		
		i. If yes, explain:		
	D.	Is there a purchase contract for the site? (If yes, explain): Yes In No Two Purchase and Sale Agreements with two private sellers		
	E.	Is there an existing or proposed lease for the site? (If yes, explain): ☐ Yes ☐ No		
5.	Pro	pposed Use:		
A		Describe the specific operations of the Applicant or other users to be conducted at the project site:		
		53 units of residential housing and amenity space, including retail. Affiliates of Conifer Realty, LLC		
		and Community Development Corporation of Long Island, Inc. will be co-managing members of the Applicant.		
	B.	Proposed product lines and market demands: Not Applicable		

6.

	Not Applicable			
	Need/purpose for project (e.g.,	why is it necessary, effect on Applicant's business):		
	To provide workforce housing to families	and commuters		
	Will any portion of the project personally visit the project loca	be used for the making of retail sales to customers who ation? Yes ■ No □		
		rage of the project location will be utilized in connection with ods and/or services to customers who personally visit the 3%		
	To what extent will the project utilize resource conservation, energy efficiency, green technologies, and alternative / renewable energy measures?			
	The project will be designed to Enterprise	e Green Communities+ standards		
•	oject Work:			
	Has construction work on this p	project begun? If yes, complete the following:		
,				
	i. Site Clearance:	Yes □ No ■ % COMPLETE 0%		
	ii. Foundation:	Yes □ No □ % COMPLETE 0%		
•	ii. Foundation: iii. Footings:	Yes □ No □ % COMPLETE 0% Yes □ No □ % COMPLETE 0%		
	ii. Foundation:iii. Footings:iv. Steel:	Yes □ No □ % COMPLETE 0% Yes □ No □ % COMPLETE 0% Yes □ No □ % COMPLETE 0%		
_	ii. Foundation: iii. Footings:	Yes □ No □ % COMPLETE 0% Yes □ No □ % COMPLETE 0%		
	ii. Foundation:iii. Footings:iv. Steel:v. Masonry:	Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) No construction work has started on the project		
-	ii. Foundation: iii. Footings: iv. Steel: v. Masonry: vi. Other: What is the current zoning? C-	Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) Yes \(\Delta \) No \(\Delta \) % COMPLETE \(\frac{0\%}{0\%} \) No construction work has started on the project		

E.	Have site plans been submitted to the appropriate planning department? Yes ■ No	
Pre	ject Completion Schedule:	
A.	What is the proposed commencement date for the acquisition and the construction/renovation/equipping of the project?	
	i. Acquisition: 09/30/25	
	ii. Construction/Renovation/Equipping: 10/01/2025	
В.	Provide an accurate estimate of the time schedule to complete the project and when the use of the project is expected to occur: 18 month construction period	fir

Part IV - Project Costs and Financing

1. Project Costs:

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

Description	<u>Amount</u>
Land and/or building acquisition	\$ 3,925,000
Building(s) demolition/construction	\$ 17,615,851
Building renovation	\$
Site Work	\$ 2,099,894
Machinery and Equipment	\$ <u>1,727,934</u>
Legal Fees	\$ <u>610,000</u>
Architectural/Engineering Fees	\$ <u>1,009,280</u>
Financial Charges	\$ <u>2,799,467</u>
Other (Specify)	\$ <u>7,273,238</u>
Total	\$ 37,060,664

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.

2. Method of Financing:

	Amount	Term
A. Tax-exempt bond financing:	\$	years
B. Taxable bond financing:	\$	years
C. Conventional Mortgage:	\$ 4,975,000	<u>30</u> years
D. SBA (504) or other governmental financing:	\$	years
E. Public Sources (include sum of all		
State and federal grants and tax credits):	\$ <u>29,137,455</u>	
F. Other loans:	\$	years
G. Owner/User equity contribution:	\$ 2,948,209	15 years
Total Project Costs	\$ 37,060,664	

i.	What percentage	of the project	costs will be	financed from	public sector:	sources?
	" II II DOLOGII COL	or are brolless	OCCUP IIII OU		P	

3.

<u>Pro</u>	ject Financing:
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 \blacksquare No \square
	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:
	N/A
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:
	N/A

Part V - Project Benefits

1.	Mortgage	Recording	Tax Benef	ũt:

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):

B. Estimated State and local Sales and Use Tax exemption (product of 8.625% and figure above):

- 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: \$_____

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: 30 years, co-terminus with financing
 - ii. Upon acceptance of this application, the Agency staff will create a PILOT schedule and attach such information to <u>Exhibit A</u> hereto. Applicant hereby requests such PILOT benefit as described on Exhibit A.

^{**} This application will not be deemed complete and final until <u>Exhibit A</u> 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 nu	mber o	f FTEs	**:	0	03	3/26/25		N/A					
FTEs to be					27	Date (fill in		verage	Annua	l Salar	y of Jot	s to be	Retained
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
FTE													1.5
FTEs to be	e Creat	ed in S	econd	Year: _	2028	(fi	ill in ye	ear)					
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
FTE													
Number of Full-Time Part-Time	<u> </u>			a. 14 4		Cumula	tive To	otal FT	Es ** A	After Y	ear 2	<u>1.5</u>	
Constructi	on Job	s to be	Create	a: <u>' '</u>		**							

2. Salary and Fringe Benefits:

Category of Jobs to be Created	Average Salary	Average Fringe Benefits
Salary Wage Eamers	33,357	10,007
Commission Wage Earners		
Hourly Wage Earners		,
1099 and Contract Workers		

What is the annualized salary range of jobs to created? 30,000 to 45,000

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

^{*} 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.

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						
	If we do not receive the agency's assistance, the project will be deemed						
	financially infeasible by the NYS housing and Community Renewal.						
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 proposed 53-unit affordable housing project will not be financially feasible						
	if the requested PILOT is not provided. The public financing award will be rescinded.						

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.

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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.

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7. 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.

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8. 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 24, 2001, Executive Order Block Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism, 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 RP