

NYCIDA PROJECT COST/BENEFIT ANALYSIS

June 9, 2016

APPLICANT

Grimm Ales LLC
151 11th Street
Brooklyn, NY 11215

PROJECT LOCATION

990 Metropolitan Avenue
Brooklyn, NY 11211

A. Project Description:

Grimm Ales LLC (the “Company”) is an artisanal brewery. The Company seeks financial assistance in connection with the acquisition, renovation, furnishing and equipping of an approximately 7,500 square foot building located at 990 Metropolitan Avenue, Brooklyn, New York 11211 (the “Facility”). The Facility will be used by the Company to produce and store a variety of artisanal beer for distribution. The Facility will also feature an approximately 700 square foot tasting room.

Total project costs are estimated to be \$4,400,000 with \$4,000,000 for land acquisition costs, \$300,000 for construction hard costs, and \$100,000 for closing fees.

The Company currently has 2 full time equivalent employees and expects to hire an additional 12 full-time equivalent employees within the next three years.

B. Costs to City (New York City taxes to be exempted):

Mortgage Recording Tax Benefit:	\$58,500
Land Tax Abatement (NPV, 25 years):	\$295,905
Building Tax Exemption (NPV, 25 years):	\$1,270,733
Sales Tax Exemption:	-
NYC Forgone Income Tax on Bond Interest	-
Total Cost to NYC	\$1,625,138

C. Benefit to City (Estimated NYC direct and indirect taxes to be generated by Company) (estimated NPV 25 years @ 6.25%):

\$2,923,763

GRIMM

Grimm Artisanal Ales
151 11th Street, #1
Brooklyn, New York 11215

April 24, 2016

Mr. Shin Mitsugi
NYC IDA / EDC
110 William St.
New York, NY 10038

Dear Mr. Mitsugi,

We are very proud of the awards and recognition that our artisanal ales have received since we founded our company in 2013. We have achieved this success under remarkable circumstances as a gypsy brewery carrying out all our production in out-of-state breweries. But it is time to bring our successes to New York City and start production here. We located a unique building in East Williamsburg that has the layout and capability to become an excellent brew house.

Due to the seller's requirements, this property however will not be available for purchase until January 2017 or later. But we need the help of the New York City IDA to provide us with long term real estate tax savings as well as an initial mortgage recording tax benefit so we can transform this facility into a commercial brewery. But we will not go forward with this renovation unless we know that the IDA will be there to help us with savings and help us grow. We must have the IDA Board approve our project at the June 2016 meeting prior to us spending our equity and securing an SBA machinery & equipment loan to properly set up the production facility. We will then close with the IDA and the real estate sometime in 2017 or thereafter.

As part of this large expansion project, our company will create 10 to 14 new well-paying positions and will be spending over \$1,300,000 on machinery and installation costs and thereby transforming ourselves into a successful Brooklyn-based brewery. However, without the IDA assistance of a 25 year Pilot and mortgage recording tax benefits we will not do this project. Our alternative is to continue to be a gypsy brewer bottling and producing out-of-state beers and just leasing this facility without making any improvements. It will be far less costly. But under this 2nd scenario, we would hire only one person and spend maybe \$75,000 installing a small walk-in freezer and a showroom. It will be a significantly smaller project. Our beer would still be produced in out-of-state locales, and trucked by distributors to the various retailers with a small amount of product being warehoused at our facility. This small project would not be our preference, but we would have no other choice as we could not afford the significant real estate acquisition costs and brewery construction costs on our own without IDA's help.

Thank you for considering our project and we look forward to hiring 10 to 14 employees and operating a very successful and prestigious company in New York City.

Sincerely,

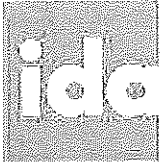
Grimm Artisanal Ales Awards and Recognitions

- **Gold Medal 2015** - Great American Beer Festival: Double Negative wins Gold in the Imperial Stout category
- **Silver Medal 2014** - Great American Beer Festival: Double Negative wins Gold in the Imperial Stout category
- Named one of the “**Eight Best Breweries of 2015**” by Atlanta’s *Paste Magazine*.
- Psychokinesis named one of “**Best New Beers of 2015**” by *Serious Eats*.
- Psychokinesis named “**Crowning Beer of the Summer 2015**” by *First We Feast*.
- Telekinesis named one of the “**Best Beers of 2015**” by *Brooklyn Magazine*.
- Lambo Door named “**Best American Double IPA**” by *Paste Magazine* in a blind tasting and ranking of 115 top-rated Double IPA’s.
- Tesseract ranked in fourth place in the same *Paste Magazine* blind tasting; Grimm took two of the top four slots in a field of 115.
- Lambo Door named one of “**The 12 Best Beers We Tasted in 2015**” by *Paste Magazine*.
- With a 4.39 out of 5 stars rating, Afterimage DIPA is currently the **highest rated NYC beer on Untappd**, the popular beer rating app.
- Grimm is also the NYC brewery with the **highest overall rating on Untappd**, with an average rating of 4.03 of 5 stars.
- With an average 4.17 out of 5 rating, Grimm is the **highest rated NYC brewery on BeerAdvocate.com**, the internet’s most popular beer-rating website (besting our nearest competitor and sales benchmark Other Half, who boast an average 4.10 out of five).
- Named NYC’s “**Best Local Brewery**” in 2014 by The Village Voice.



Appendix B: Products Visuals, Press, and Ephemera





New York City
Industrial Development Agency



BENEFITS APPLICATION

Applicant Name: GRIMM ALES LLC	
Name of operating company (if different from Applicant):	
Operating Company Address: 151 11 TH STREET, BROOKLYN, NY 11215	
Website Address: GRIMMALES.COM	
EIN #: [REDACTED]	NAICS Code:
State and date of incorporation or formation: 1/01/2013	Qualified to conduct business in NY? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Applicant is (check one of the following, as applicable):	
<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Natural Person
<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation
<input type="checkbox"/> 501(c)(3) Organization	<input type="checkbox"/> Other: _____
Are any securities of Applicant publicly traded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Applicable Financial Assistance (check all that apply)

Please note the following: When Build NYC is the entity providing Financial Assistance, the Project Financial Assistance may be limited to deferral from mortgage recording taxes and tax-exempt conduit bond financing.

<input type="checkbox"/> Bond Financing
<input checked="" type="checkbox"/> Real Estate Tax Benefits
<input type="checkbox"/> Sales Tax Waiver
<input checked="" type="checkbox"/> Mortgage Recording Tax Deferral

Applicant Contact Information

	Name/Title	Company	Address	Email	Phone
Applicant Contact Person	LAUREN GRIMM	GRIMM ALES LLC	151 11 TH STREET, BROOKLYN	[REDACTED]	[REDACTED]
Attorney	BRENDAN DERIGGI	CERTILMAN BALIN	EAST MEADOW, NY	[REDACTED]	[REDACTED]
Accountant	PADMA VAIDYANATHAN	THE PAVA GROUP INC	153 W. 23 ST NYC	[REDACTED]	[REDACTED]
Consultant/Other	ROBERT MOREL	CITY ONE ASSOCIATES INC	2440 BROADWAY SUITE 245 NY NY	[REDACTED]	[REDACTED]

GRIMM ALES BREWERY IDA PROJECT

1. Grimm Ales LLC is an award winning Brooklyn-based artisanal beer producer founded in 2013. The company does not operate out of their own brewery. They are known in the trade as a "gypsy" or "nomad" brewer and are forced to use Virginia and Staten Island based breweries to produce their fine ales and beers. The company is extremely successful and their beers have taken on a cult status and frequently, within one half hour of delivery by their distributor to the local retailer, the beer is sold out.

This project is to acquire a 7500 ft.² warehouse and convert it into a brick and mortar, full-production artisanal brewery in 6,800 sq ft. and a 700 sq ft Tap Room that will have a small retail component.

2. It is time for Grimm to put down New York City production roots and create a brick and mortar production brewery. Producing in-house will help the company achieve improved quality control, increase margins by reducing the costs of goods sold, increase sales by increasing production capacity and finally meet consumer demand which is being totally outpaced by the limited production that can be done at these gypsy brewery sites out of state.

The company currently has no New York City employees other than the 2 founders, Joe and Lauren Grimm. If a full scale production facility can be created with the help of the New York City IDA, the company anticipates creating 10-14 new highly paid positions.

3. The company has located a 7500 ft.² building in East Williamsburg that would have the layout and capacity to become a brewery. However, the company needs the New York City IDA and the significant incentives to be able to transform this warehouse into a brewery. Due to the seller's requirements, this property will not be available for purchase until January 2017 or later. But the construction of this brewery cannot go forward unless the company knows they will be able to receive the significant property tax benefits of the IDA in later years. If the IDA approves this project at the June meeting, the company will go ahead and spend equity and secure a SBA loan, to set up the brewery, and then close with the IDA program to get the PILOT benefits sometime in 2017. The renovations and machinery equipment will not be under the purview of the IDA and will only be purchased and installed after the IDA has Induced the project. Costs will be in the range of \$1, 300,000 or more.

Consequently the IDA project, will be somewhat limited, consisting of just the acquisition of the real estate and we will be seeking mortgage recording tax and pilot benefits only. The purchase price of the building will be \$4 million and the company will be seeking SBA financing.

4. The company is seeking IDA approval in June 2016. The company will be spending their own equity setting up the brewery and anticipate closing on the real estate sometime in 2017. The company will not go forward with this project at this time unless the IDA has approved the project in June prior to them starting any renovations or ordering any equipment.

Background

Please provide a brief description of the Applicant's history and nature of its business, including a description of the industry, competitors and services offered, on a separate sheet.

Proposed Project Activities

Please provide answers to the following four questions on a separate page.

1. Please provide a brief overview of the entire proposed Project. If necessary, break down by tax lot to describe activities at each Project Location.
2. Please provide a brief description of how the proposed Project will affect current operations.
3. Please provide a brief description of renovations/construction of the proposed Project.
4. Please provide a brief timeline for the entire proposed Project.

Project Financing

Amounts provided should be aggregates for all Project Locations.

Uses of Funds	Sources of Funds (If needed use an additional sheet to indicate all sources and uses)							Total Uses
	Bond Proceeds	Commercial Financing (Loan 1)	Commercial Financing (Loan 2)	Affiliate/Employee Loans	Capital Campaign	Company Funds	Other (Identify):	
Land & Building Acquisition		\$2,000,000	\$1,600,000			\$400,000		\$4,000,000
Construction Hard Costs								
Construction Soft Costs								
Fixed Tenant Improvements								
Furnishings & Equipment								
Debt Service Reserve Fund								
Capitalized Interest								
Costs of Issuance								
Fees (explain): IDA + R E CLOSING						100,000		100,000
Other (explain)								
Total Sources		\$2,000,000	\$1,600,000			\$500,000		\$4,500,000

Operating Pro Forma (for NYCIDA applicants only)

Please provide an operating pro forma or other financial analysis demonstrating how NYCIDA assistance is needed in order to make the Project feasible.

Sourcing

Please list where machinery, equipment and furnishings will be purchased and what percentage of total machinery, equipment, and furnishings relating to the Project this will represent: **M & E NOT PART OF IDA PROJECT; ALL WILL BE ACQUIRED BEFORE IDA CLOSING**

<input type="checkbox"/> New York City	% of Total?	<input type="text"/>
<input type="checkbox"/> New York State (excluding NYC)	% of Total?	<input type="text"/>
<input type="checkbox"/> United States (excluding NYS & NYC)	% of Total?	<input type="text"/>
<input type="checkbox"/> Outside United States	% of Total?	<input type="text"/>
<input type="checkbox"/> N/A – No equipment is planned to be purchased for this Project		

Project Location Detail

Project Location	Project Location #	of
Borough/Block/Lot: BROOKLYN BLK 2919- LOT 7	Street address and zip code: 990 METROPOLITAN AVE, 11211	
Zoning: M1-1	Number of Floors: 1	
Square footage of existing building: 7,500	Square footage of land: 7500	
Anticipated square footage of building following construction and/or renovation: 7,500	Anticipated square footage of non-building improvements following construction and/or renovation (i.e., parking lot construction): NOT APPLICABLE	
Intended use(s) of site (check <u>all</u> that apply): <input checked="" type="checkbox"/> Retail <input checked="" type="checkbox"/> Manufacturing/Industrial <input type="checkbox"/> Office <input type="checkbox"/> Non-profit For ALL USES other than Non-profit or Retail, please also complete Energy Questionnaire		
Is there any improved space which is currently occupied by existing subtenant(s) (whether Affiliates or otherwise)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Will any improved space be occupied by subtenant(s) (whether Affiliates or otherwise)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes to either, please attach a separate page and provide details such as (1) name of subtenant business(es) (whether Affiliates or otherwise), (2) square footage of subtenant operations, (3) subtenant lease commencement and termination dates, and (4) copies of leases.		

Anticipated Ownership of Premises

1. Please check all that apply:

<input checked="" type="checkbox"/> Applicant or an Affiliate is or expects to be the fee simple owner of the Project Location	(Projected) Acquisition date: 2017
<input checked="" type="checkbox"/> Applicant or an Affiliate leases or expects to lease the Project Location	(Projected) Lease signing date: JUNE 2016
If you checked the box above, please select one of the following: <input checked="" type="checkbox"/> Lease is for an entire building and property LEASE HAS OPTION TO BUY <input type="checkbox"/> Lease is for a portion of the building and/or property.	
<input type="checkbox"/> None of the above categories fully describe Applicant's interest or intended interest in the Project Location, which may be more accurately described in a supplementary document (attached).	

2. If an Affiliate owns or controls (or will own or control) a Project Location, then describe such Affiliate by choosing one of the following selections and completing the chart provided below:

- | | | |
|--|---|---|
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> C Corporation |
| <input type="checkbox"/> S Corporation | <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> 501(c)(3) Organization |
| <input type="checkbox"/> Natural Person | <input type="checkbox"/> Other (specify): _____ | |

Name of Affiliate: PSYCHOKINESIS LLC -pending	EIN # of Affiliate: PENDING
Address of Affiliate: 151 11 Street, Brooklyn, NY 11215	
Affiliation of Affiliate to Applicant: REAL ESTATE HOLDING ENTITY	
Contact Person: Lauren Grimm	Title of Contact Person: MANAGING MEMBER
Phone Number(s): [REDACTED]	

996 METROPOLITAN AVENUE **BROOKLYN 11211** **BIN# 3070374**
METROPOLITAN AVENUE 990 - 990 Health Area : 900 Tax Block : 2918
METROPOLITAN AVENUE 996 - 996 Census Tract : 481 Tax Lot : 7
Community Board : 301 Condo : NO
Buildings on Lot : 1 Vacant : NO

[View DCP Addresses...](#) [Browse Block](#)

[View Zoning Documents](#) [View Challenge Results](#) [Pre - BIS PA](#) [View Certificates of Occupancy](#)

Cross Street(s): CATHERINE STREET, MORGAN AVENUE

DOB Special Place Name:

DOB Building Remarks:

Landmark Status:

Local Law:

SRO Restricted:

UB Restricted:

Environmental Restrictions:

Legal Adult Use:

Additional BINs for Building: 3821557

Additional Designation(s): IBZ - INDUSTRIAL BUSINESS ZONE

Special Status: N/A

Loft Law: NO

TA Restricted: NO

Grandfathered Sign: NO

City Owned: NO

1B2

Employment Information

The following information will be used as part of the Agency’s calculation of the benefit of the Project, and as a basis for the comparison with the employment information that the Applicant will be required to report on an annual basis for the term of the Project Agreement.

In addition, information included in the Estimated New-growth Employment (section 6) will be used to determine eligibility for participation in the HireNYC Program. For program information, visit nycedc.com/hirenyc. If eligible for HireNYC Program participation, NYCEDC will provide additional details.

For all responses below, please note that part-time employees work an average of between 17.5 and 35 hours per week, and full-time employees work 35 hours or more per week. Hourly wages should represent the pay rate and are exclusive of overtime. For any salaried employees, please divide the annual salary by 1,820 (working hours per year) to produce an hourly wage. Wage information should exclude principals.

1. **Anticipated Facility Operations Start Date at Project Location:** SOMETIME 2017

2. **Regarding employees the Applicant employed throughout New York City as of the last pay period:**
 Number of part-time employees: 0 Number of full-time employees: 0

3. **Regarding employment if Applicant currently occupies and operates at the Project Location:** NOT APPLICABLE
 Hourly wage of lowest compensated part-time employee: Hourly wage of lowest compensated full-time employee:
 Number of part-time employees: Number of full-time employees:

4. **Regarding employees the Applicant expects to employ throughout New York City on the Facility Operations Start Date:**
 Number of part-time employees: Number of full-time employees: 6

How many of these employees are expected to be relocated to the Project Location on or about the Facility Operations Start Date?
 Number of part-time employees: Number of full-time employees: N/A

5. **Regarding all employees at the Project Location on the Facility Operations Start Date:**
 Average hourly wage per part-time employee: N/A Average hourly wage per full-time employee: \$16
 Hourly wage of highest compensated part-time employee: Hourly wage of highest compensated full-time employee: \$19
 Hourly wage of lowest compensated part-time employee: Hourly wage of lowest compensated full-time employee: \$ 15
 Number of part-time employees: Number of full-time employees: 6

6. **Estimated New-growth Employment.** Complete the following chart to indicate the number of new employees that are expected to be hired at the Project Location in each year. Note: Year 1 is the year following the Facility Operations Start Date; Year 2 is the second year following that date; Year 3 is the third, etc. 2018

Years following Facility Operations Start Date	1	2	3	4	5	6	7	Total New Growth
Permanent Full-time	4	2	2	2	0	1	1	12
Permanent Part-time	N/A							

Wage and Benefits Information

7. **For all new employees at the Project Location (again, excluding Principals) expected to be hired during the three-year period following the Facility Operations Start Date,** please project the following:

Average hourly wage per part-time employee: N/A Average hourly wage per full-time employee: \$16
 Hourly wage of lowest compensated part-time employee: Hourly wage of lowest compensated full-time employee: \$15

8. Generally describe all other forms of compensation and benefits that Permanent Employees will receive. Examples: healthcare, employer-contributions for retirement plans, on-the-job training, reimbursement for educational expenses, etc. HEALTHCARE
9. Please indicate whether the Applicant or any of its Affiliates will be required to provide health coverage to its employees pursuant to the federal Patient Protection and Affordable Care Act (the “Act”). If yes, please provide an overview of the applicable requirements under the Act and an explanation of how the Applicant plans to comply with such requirements. If no, please explain why. PRIVATE HEALTH INSURANCE
10. Is your company currently providing paid sick time to employees in accordance with the Earned Sick Time Act (Chapter 8 of Title 20 of the NYC Administrative Code) and otherwise in compliance with such law? If yes, please provide an explanation of your company’s paid and unpaid sick time policy. If no, please explain why. WILL COMPLY WITH ESTA

Labor

The Applicant and its Affiliates hereinafter will be referred to collectively as the "Companies" or individually as a "Company." If none of the following questions apply to any of these Companies, answer "NO"; but, for any question that does apply, be sure to specify to which of the Companies the answer is relevant.

1. Have any of the Companies during the current calendar year or any of the five preceding calendar years experienced labor unrest situations, including actual or threatened labor strikes, hand billing, consumer boycotts, mass demonstrations or other similar incidents?
 Yes No If Yes, please explain on an attached sheet

2. Have any of the Companies received any federal and/or state unfair labor practices complaints asserted during the current calendar year or any of the five calendar years preceding the current calendar year?
 Yes No If Yes, please describe and explain current status of complaints on an attached sheet

3. Do any of the Companies have pending or threatened requests for arbitration, grievance proceedings or other labor disputes during the current calendar year or any of the five calendar years preceding the current calendar year?
 Yes No If Yes, please explain on an attached sheet

4. Are all employees of the Companies permitted to work in the United States?
 Yes No If No, please provide details on an attached sheet.
 Do the Companies complete and retain all required documentation related to this inquiry, such as Employment Eligibility Verification (I-9) forms?
 Yes No If No, please explain on an attached sheet

5. Has the United States Department of Labor, the New York State Department of Labor, the New York City Office of the Comptroller or any other local, state or federal department, agency or commission having regulatory or oversight responsibility with respect to workers and/or their working conditions and/or their wages, inspected the premises of any Company or audited the payroll records of any Company during the current or preceding three year calendar years?
 Yes No If "Yes," please use an attached sheet to briefly describe the nature and date of the inspection and the inspecting governmental entity. Briefly describe the outcome of the inspection, including any reports that may have been issued and any fines or remedial or other requirements imposed upon any of the Companies as a consequence.

6. Have any of the Companies incurred, or potentially incurred, any liability (including withdrawal liability) with respect to an employee benefit plan, including a pension plan?
 Yes No If "Yes," please use an attached sheet to quantify the liability and briefly describe its nature. Refer to any governmental entities that have had regulatory contact with the Company in connection with the liability.

7. Are the practices of any of the Companies now, or have they been at any time during the current or preceding five calendar years, the subject of any complaints, claims, proceedings or litigation arising from alleged discrimination in the hiring, firing, promoting, compensating or general treatment of employees?
 Yes No If "Yes," provide details on an attached sheet. Note "discrimination" includes sexual harassment.

Financials

1. Has **Applicant**, any **Affiliate**, or **Principal**, or any **close relative of any Principal**, ever received, or is any such person or entity currently receiving, financial assistance or any other kind of non-discretionary benefit from any **Public Entities**?
 Yes No If Yes, please provide details on an attached sheet.
2. Has **Applicant**, or any **Affiliate** or **Principal**, or any existing or proposed occupant at the **Project Location(s)**, obtained, or is any such person or entity in the process of obtaining, or contemplating obtaining, other assistance from the NYCIDA/Build NYC and/or other **Public Entities**?
 Yes No If Yes, please provide details on an attached sheet. *Possible SBA M+E loan*
3. Has **Applicant**, or any **Affiliate** or **Principal**, ever defaulted on a loan or other obligation to a **Public Entity**?
 Yes No If Yes, please provide details on an attached sheet.
4. Has real property in which **Applicant**, or **Affiliate** or **Principal**, holds or has ever held an ownership interest and/or controlling interest of 25 percent or more, now or ever been (i) the subject of foreclosure (including a deed in lieu of foreclosure), or (ii) in arrears with respect to any type of tax, assessment or other imposition?
 Yes No If Yes, please provide details on an attached sheet.
5. Does **Applicant**, or any **Affiliate** or **Principal**, have any contingent liabilities not already covered above (e.g., judgment liens, lis pendens, other liens, etc.)? Please include mortgage loans and other loans taken in the ordinary course of business only if in default.
 Yes No If Yes, please provide details on an attached sheet.
6. Has **Applicant**, or any **Affiliate** or **Principal**, failed to file any required tax returns as and when required with appropriate governmental authorities?
 Yes No If Yes, please provide details on an attached sheet.

For questions 7 through 12, below, please answer the following questions relating to the Applicant (if the space provided below is insufficient, please provide complete information on an attached sheet):

7. List major customers: **SEE ATTACHED**

Company Name	Address	Contact	Phone	Fax	Email	% of Revenues

8. List major suppliers: **SEE ATTACHED**

Company Name	Address	Contact	Phone	Fax	Email

9. List major Funding sources (if applicable):

Company Name	Address	Contact	Phone	Fax	Email
N/A					

Customers

PLEASE DELETE THE PHONE NUMBERS and email addresses FROM THE INTERNET ON- LINE PACKAGE. All have requested that this info be not available to the general public

Company name	Contact name	Address	Phone number	Fax number	Email
Union Beer Distributors	Matt Lefkowitz	1213 Grand St. Brooklyn, NY 11211	[REDACTED]		[REDACTED]
Remarkable Liquids Distributing	Matt Hartman	Northeastern Industrial Park 2 Van Buren Blvd, Bldg 7, Bay 1 Altamont, NY 12009	[REDACTED]		[REDACTED]
Massachusetts Beverage Alliance LLC	Brian Murphy	89 Teed Drive Randolph, MA 02368	[REDACTED]		[REDACTED]
Shelton Brothers Inc.	Annecca Smith	P.O Box 486 Belchertown, MA 01007	[REDACTED]	[REDACTED]	[REDACTED]

SUPPLIERS

PLEASE DELETE THE PHONE NUMBERS and email addresses FROM THE INTERNET ON- LINE PACKAGE. All have requested that this info be not available to the general public

Company name	Contact name	Address	Phone number	Fax number	Email
Beltway Brewing Co.	Sten Sellier	22620 Davis Dr, #110, Sterling, VA			
Hub Labels	Laura Crawford	18223 Shawley Dr. Hagerstown, MD 21740			
BSG Craft Brewing	Judy Nadeau	800 West 1 st Ave Shakopee, MN 55379			
YCH Hopunion	Tina Mineard	203 Division St. Yakima, Washington 98902			
TQL Logistics	Dominic Braganini	4289 Ivy Pointe Blvd. Cincinatti, OH 45245			

10. List unions (if applicable):

Union Name	Address	Contact	Phone	Fax	Email
N/A					

11. List banks:

Bank Name	Address	Contact	Phone	Fax	Email	Account Type and Number
BOA						

12. List licensing authorities (if applicable):

Company Name	Address	Contact	Phone	Fax	Email

Anti-Raiding

1. Will the completion of the Project result in the relocation of any plant or facility located within New York State, but outside of New York City, to New York City? Yes No

If "Yes," please provide the names of the owners and addresses of the to-be-removed plant(s) or facility(ies):

2. Will the completion of the Project result in the abandonment of any plants or facilities located in an area of New York State other than New York City? Yes No

If "Yes," please provide the names of the owners/operators and the addresses of the to-be-abandoned plant(s) or facility(ies):

If the answer to question 1 or 2 is "Yes," please continue and answer questions 3 and 4.

3. Is the Project reasonably necessary to preserve the competitive position of this Applicant, or of any proposed occupants of the Project, in its industry? Yes No
4. Is the Project reasonably necessary to discourage the Applicant, or any proposed occupant of the Project, from removing such plant or facility to a location outside New York State? Yes No

If the answer to question 3 or 4 is "Yes," please provide on a detailed explanation on a separate sheet of paper.

Certification

I, the undersigned officer/member/partner of Applicant, on behalf of Applicant and its Affiliates, hereby request, represent, certify, understand, acknowledge and agree as follows:

I request that this Application, together with all materials and data submitted in support of this Application (collectively, these "Application Materials"), be submitted for review to the applicable Agency's Board of Directors (the "Board"), in order to obtain from the Board an expression of intent to provide the benefits requested herein for the Project.

I represent that I have the authority to sign these Application Materials on behalf of, and to bind, Applicant and its Affiliates.

I certify to the best of my knowledge and belief, after due investigation, the information contained in these Application Materials is accurate, true and correct and does not contain a misstatement of a material fact or omit to state a material fact necessary to make the statements contained herein not misleading. I understand that an intentional misstatement of fact, or, whether intentional or not, a material misstatement of fact, or the providing of materially misleading information, or the omission of a material fact, may cause the Agency's Board to reject the request made in the Application Materials. I understand that the Agency will rely on the information contained within these Application Materials in producing and publishing a public notice and convening a public hearing. If any information in these Application Materials is found to be incorrect, the Applicant may have to provide new information and a new public notice and public hearing may be required. If a new public notice and public hearing is required, they will be at the Applicant's expense.

I understand the following: that Applicant and Principals will be subject to a background check and actual or proposed subtenants may be subject to a background check, and if such background check performed by the Agency with respect to Applicant or any Affiliates reveals negative information, Applicant consents to any actions that the Agency or NYCEDC may take to investigate and verify such information; that the Agency may be required under SEQRA to make a determination as to the Project's environmental impact and that in the event the Agency determines that the Project will have an environmental impact, Applicant will be required to prepare, at its own expense, an environmental impact statement; that the decision of the Board to approve or to reject the request made in the Application Materials is a discretionary decision; that no Bonds may be issued (if Bonds are being requested) unless such Bonds are approved by the Mayor of the City; that under the New York State Freedom of Information Law ("FOIL"), the NYCIDA/Build NYC may be required to disclose the Application Materials and the information contained therein (see the Disclosure Policy section of the Policies and Instructions provided to Applicant and signed by Applicant on or about the date hereof (the "Policies and Instructions")); and that Applicant shall be entirely responsible and liable for the fees referred to in these Application Materials.

I further understand and agree as follows:

That notwithstanding submission of this Application, the Agency shall be under no obligation to present Applicant's proposed Project to its Board for approval. If the Agency presents Applicant's proposed Project to its Board for approval, the Agency does not guaranty that such approval will be obtained. If upon presenting Applicant's proposed Project to its for approval the Agency obtains such approval, such approval shall not constitute a guaranty from the Agency to Applicant that the Project transaction will close.

That preparation of this Application and any other actions taken in connection with the proposed Project shall be entirely at Applicant's sole cost and expense. Under all circumstances, the Application Fee is non-refundable, including but not limited to the circumstance where the Agency decides, in its sole discretion, to not present Applicant's proposed project to the the Agency Board of Directors for Approval.

That each of Applicant and each of its Affiliates (collectively, the "Indemnitors") hereby releases NYCIDA, Build NYC, NYCEDC and their respective directors, officers, employees and agents (collectively, the "Indemnitees") from and against any and all claims that any Indemnitor has or could assert and which arise out of, or are related to, any Application Materials, any actions taken in connection therewith or any other actions taken in connection with the proposed Project (collectively, the "Actions"). Each Indemnitor hereby indemnifies and holds harmless each of the Indemnitees from and against any and all claims and damages brought or asserted by third parties, including reasonable attorneys' fees, arising from or in connection with the Actions. As referred to herein, "third parties" shall include, but shall not be limited to, Affiliates.

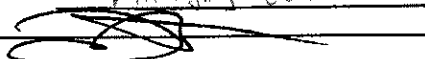
That in the event the Agency discloses the Application Materials in response to a request made pursuant to FOIL, Applicant hereby authorizes the Agency to make such disclosure and hereby releases the Agency from any claim or action that Applicant may have or might bring against the Agency, their directors, officers, agents, employees and attorneys, by reason of such disclosure; and that Applicant agrees to defend, indemnify and hold the Agency and the NYCEDC and their respective directors, officers, agents, employees and attorneys harmless (including without limitation for the cost of reasonable attorneys' fees) against claims arising out of such disclosure as such claims may be made by any party including the Applicant, Affiliate, Owner or Principal, or by the officers, directors, employees and agents thereof.

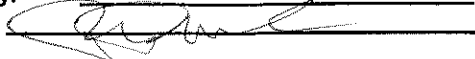
That capitalized terms used but not defined in this Application have the respective meanings specified in the Policies and Instructions.

I acknowledge and agree that the Agency reserves its right in its sole and absolute discretion to request additional information, waive any requirements set forth herein, and/or amend the form of this Application, to the full extent permitted by applicable law.

Requested, Represented, Certified, Acknowledged, Understood and Agreed by Applicant,

I certify that, using due care, I know of no misstatement of material fact in the Application Materials, and know of no material fact required to be stated in the Application Materials to make the statements made therein not misleading. Certified by Preparer,

This 26th day of April, 2016 .
Name of Applicant: Grimm Ales LLC
Signatory: Lauren Grimm
Title of Signatory: MANAGING OWNER
Signature: 

This 26th day of April, 2016 .
Name of Preparer: Cub One Accountants Inc
Signatory: Robert Morel
Title of Signatory: CONSULTANT
Signature: 

617.20
Appendix B
Short Environmental Assessment Form

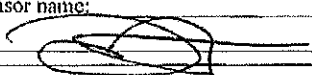
Instructions for Completing

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

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

Part 1 - Project and Sponsor Information			
Name of Action or Project: <i>Grimms Ales LLC</i>			
Project Location (describe, and attach a location map): <i>Acquiring 990 Metropolitan Ave Brooklyn 11211</i>			
Brief Description of Proposed Action: <i>990 Metropolitan Ave</i>			
Brief Description of Proposed Action: <i>Acquisition of 7500 sq Brewery + Tap Room - The build out will have occurred prior to IDA involvement.</i>			
Name of Applicant or Sponsor: <i>Grimm Ales LLC</i>		Telephone:	
		E-Mail:	
Address: <i>151 11th St. Brooklyn NY 11215</i>			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: <i>NYC IDA - SBA 504</i>			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<i>less 1/4 acres</i>	
b. Total acreage to be physically disturbed?		<i>less 1/4 acres</i>	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<i>less 1/4 acres</i>	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

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

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ <i>please see phase 1</i>	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: _____	Date: _____	
Signature: 		

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

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

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

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

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT