

NYCIDA CORE APPLICATION

Submit your electronically completed Core Application via email to your assigned Project Manager as a Word Document file or a Word Document saved as a PDF.

A. APPLICANT OVERVIEW

Applicant Name (the "Applicant"): Bamms Two Realty, LLC	Name of operating company (if different from Applicant):Manhattan Beer Distributors, LLC				
Operating company address: 955 E. 149 Street, Bronx, NY 10455	Website address: www.manhattanbeer.com				
EIN#:	NAICS Code: 4248				
State and date of incorporation or formation: New York, 02/06/1998	Qualified to conduct business in NY? ⊠ Yes □ No				
Applicant is (check one of the following, as applicable): ☐ General Partnership ☐ Limited Partnership ☐ Sole Proprietorship	☐ Business Corporation☐ Other:☐ S Corporation				
Is Applicant publicly traded? ☐ Yes ☒ No Is Applicant affiliated with a publicly traded company? ☐ Ye	es ⊠ No If yes, name the affiliated company:				

B. APPLICANT CONTACT INFORMATION

	Name/Title	Company	Address	Email	Phone	Primary ¹
Applicant Contact Person	Mark Johnson, CFO	Manhattan Beer Distributors, LLC	955 E. 149 ST. Bronx, NY 10455			⊠
Attorney	Andre Jaglom	Tannenbaum Helpern LLP	900 Third Avenue New York, NY 10022			
Accountant	Craig Savell	Margolin, Winer & Evans LLP	400 Garden City Plaza, Garden City, NY 11530			
Consultant/Other						

C. APPLICABLE FINANCIAL ASSISTANCE

Provide the estimated value of each of the following types of Project Financial Assistance being requested. Discuss the estimation of the Requested Financial Assistance with your assigned Project Manager, if needed.

Requested Financial Assistance	Estimated Value of Requested Financial Assistance
Real Estate Tax Benefits	\$
Sales Tax Waiver	\$
Mortgage Recording Tax Benefit	\$

D. APPLICANT BACKGROUND

Provide a brief description of Applicant's history and the nature of its business. Feel free to include information from Applicant's website or other official documentation describing Applicant. Include information such as when Applicant was founded, who founded the Applicant, a brief history of the Applicant, the Applicant's primary services and market, and the number of Applicant's employees in NYC and elsewhere. Limit the description to 250 words.

¹ Select the individual to whom questions should be directed and who may speak on behalf of Applicant.



In 1978 the closing of the Rheingold Brewery enabled Simon to obtain the local distribution rights to Carling Black label and Tuborg. Thus Manhattan Beer Distributors was born, fulfilling one of Simon's dreams - becoming a franchised beverage distributor, buying directly from suppliers and providing best-in-class service to his customers. From those humble beginnings of operating out of a 4,000 square foot warehouse with 3 delivery trucks, Manhattan Beer Distributors has managed consistent growth for over 35 years. We now have over 1.5 million square feet of warehousing, strategically located throughout our distribution territory. Over the past 40 years, Manhattan Beer Distributors has strived to become the premier full-service beverage company in Metro New York. We currently have 1,717 employees in NYC and elsewhere. Manhattan Beer Distributors LLC ("MBD") was formed in 1998. Since that time, MBD has become the largest single market beer wholesaler in the United States. MBD services over 23,000 customers in the Greater NY Metro area. It currently employs in excess of 1,700 employees and maintains 5 separate facilities in the City of New York, Long Island and Rockland County. MBD has annual combined net revenues in excess of 1 Billion Dollars and has a combined net book value in excess of 250 Million Dollars. MBD has no "going concern" issues as of the date of this letter. MBD is not aware of any vendor with which it is not in good standing.

E. Proposed Project Activities

Describe the proposed Project, including its purpose and Project Location, in the text box below. Refer to the example below.

Applicant is a Beverage Distributor. Applicant is seeking financial assistance in connection with the purchase and renovation of a 140,608 square foot building on a 222,700 square foot parcel of land located in the Bronx. The Facility will be owned by applicant and used as a beverage warehousing distributor. The total cost is approximately 35MM. The anticipated closing date is May 1, 2019. The project is anticipated to be completed in 2 years beginning September 2019.

Example: [Applicant Name] ("Applicant") is a [describe general business activity, such as food processor, real estate developer, plastics manufacturer, etc.]. Applicant is seeking financial assistance in connection with the [list Project activities, such as construction, furnishing, equipping, etc.] of a [_] square foot building on a [_] square foot parcel of land located at [address] (the "Facility"). The Facility will be owned by [Applicant or holding company] and used as a [describe specific business activities associated with the Project such as warehouse, commercial office space, manufacturing facility., etc.]. The total cost is approximately [Project cost]. The anticipated closing date is []. The project is anticipated to be completed in ___ [months or years].

F. PROJECT LOCATION DETAIL

Complete this table for each Project Location with a distinct Block/Lot. For Projects with more than one Block/Lot, copy the Project Location table below and paste it directly underneath to complete it.

	Proj	ect Location Information	
Project Address: 999 E. 149th Street, Bronz	k, NY 10455	Location # 1 of 1	
Borough/Block/Lot: Bronx/2604/600	Community Bo	oard #: Bronx Dist 2	Neighborhood: Hunts Point
Square footage of land: 222,700	Square footag	e of existing building: 140,608	Number of Floors: 1
How is the anticipated Project Location cur	rently used and wha	nt percentage is currently occupie	d? Warehouse storage
In the case of relocation, what will happen	with Applicant's curr	ent facility? ⊠ N/A	
Does the Project Location have access to	rail and/or maritime i	nfrastructure? Yes	
company, whether Affiliates or otherwise? ☑ Yes □ No If yes, attach a separate page and provide o	details about tenants mencement and term	such as (1) name of tenant busin	ess(es) (whether Affiliates or otherwise), (2) 50,000 leases, licenses, or other documents evidencing a
For the purposes of this question, any licen to the Project Location shall be deemed a t		ossession or occupancy granted l	by the Applicant or operating company with respec



Construction Information	
Construction Start Date (as defined in the Policies and Instructions): September 2019 Facility Operations Start Date (as defined in the Policies and Instructions): May 1, 2019 Does the Project involve the construction of a new building or an expansion/renovation of an	existing building? ⊠ Yes □ No
If yes, complete the following questions and attach a separate page and provide drawings, p Does the Project involve subsurface disturbance or excavation? Yes No Anticipated square footage of Facility after construction and/or renovation: 140,608	
Anticipated square footage of <i>non-building improvements</i> after construction and/or renovation Please describe any non-building improvements on a separate page. Automated storage and Square feet of wet lab space created: None Square feet of wet lab space preserved: None Percentage of total building size dedicated to wet lab space: None	d retrieval system installation inside warehouse.
Are energy efficiency improvements or the installation of a renewable energy system anticipal Which of the below statements best reflects your current stage in the contractor procurements.	
☐ A contractor has been selected and the procurement process is complete.	1,000000
	anticipated by: July 2019
☐ The procurement process has not begun. Procurement is anticipated to begin by:	
☐ Other:	
☐ Not applicable	
Percentage of tenancy expected at Facility Operations Start Date: 100%	
Percentage of tenancy expected six months after Facility Operations Start Date: 100% Percentage of tenancy expected 12 months after Facility Operations Start Date: 100% Percentage of tenancy expected 18 months after Facility Operations Start Date 100%	
Zoning Information	
Current zoning of Project Location: M3-1	
Is a zoning variance or special permit required for the Project to proceed at this Project Local	tion? ☐ Yes ☒ No
If yes, attach a separate page and describe the zoning variance or special permit required, w schedule for zoning approval. Is the Project subject to any other city, state or federal approvals? ☑ Yes □ No	hich agencies are involved, and the anticipated
If yes, attach a separate page and describe the approval required, and if applicable, list any	other environmental review that may be required.
NYC Building Department Permit	
Is the Project Location a designated historic landmark or located in a designated historic dist	rict? □ Yes ⊠ No
Is the Project Location within the NYC Coastal Zone Boundary? ⊠ Yes □ No	natarimaten protessa valdenista kalenta laika valondossa vastas altaren energia altaren kalenta kalenta kalenta
Intended use(s) of site (check all that apply): ☐ Retail % ☒ Manufacturing/Industri	al 100%
6. ANTICIPATED OWNERSHIP Check the accurate description of the Project Location's anticipated ownership.	
☑ Applicant or an Affiliate is/expects to be the Project Location's fee simple owner.	(Projected) Acquisition date: May 1, 2019
☐ Applicant or an Affiliate leases/expects to lease the Project Location.	
☐ Lease is for an entire building and property.	(Projected) Lease signing date:
 ☐ Lease is for a portion of the building and/or property. ☐ Neither of the above categories fully describes Applicant's interest or intended interest in the Describe the anticipated ownership of the Project Location premises: 	e Project Location.
Does/will an Affiliate own/control the Project Location? ⊠ Yes ☐ No	
If yes, complete the table below:	
Name of Affiliate: Manhattan Beer Distributors, LLC Address of Affiliate: 955	5 E. 149 Street, Bronx, NY 10455
	ness Corporation Other: rporation

 $^{^2}$ More information on free energy efficiency advisory services can be found $\underline{\underline{\underline{here}}}$.

H. PROJECT FINANCING

1. Sources of Financing. Provide amounts as aggregates for all Project Locations. Add table rows, if needed.

Sources	Total Amount	Percent of Total Financing
Equity	\$	%
Commercial Loan (Bank Name: JPMC)	\$80MM	100%
New York City Public Funds	\$	%
Source:	\$	%
Source:	\$	%
New York State Public Funds	\$	%
Other:	\$	%
Total	\$80MM	100%

- Mortgage amount on which tax is levied (exclude SBA 504 financing1): \$38MM
- Anticipated closing date between the [lender(s)]/[financing party(s)]/[financial institution(s) and/or funder(s)] and Applicant: June 1, 2019

4. Uses of Financing. Provide amounts as aggregates for all Project Locations.

Uses	Total Amount	Percent of Total Financing
Land and Building Acquisition	\$38MM	47.50%
Construction Hard Costs (i.e. site excavation, building materials, labor, landscaping, construction materials, etc.)	\$5MM	6.25 %
Construction Soft Costs (i.e. pre-planning, legal, financing, design, etc.)	\$1MM	1.25%
Furnishings, Fixtures, & Equipment (FF&E) and Machinery & Equipment (M&E) (i.e. generators, desks, chairs, electronic equipment, specialized manufacturing equipment, assembly equipment, etc.)	\$35MM	43.75%
FF&E purchased in NYC	\$TBD	
M&E purchased in NYC	\$TBD	
Closing Fees (costs associated the execution of deal, i.e. debt service reserve fund, financing fees, loan origination fees, attorney fees, pre-payment penalties, etc.)	\$1MM	1.25%
Other (describe):	\$	%
Total	\$80MM	100%

4a. Indicate anticipated budgeting of Hard Costs:

Electrical: 50% Carpentry: % Excavation or Demolition: 10%

Painting: %

Other: 20%

Plumbing: 20%

4b. Indicate anticipated budgeting of Soft Costs:

Architecture: 50% Engineering: 30% Design: 15%

Other: %

I. EMPLOYMENT INFORMATION

The following information will be used as part of the Agency's calculation of the Project's benefit to the City, and as a basis for comparison with the employment information that Applicant will be required to report on an annual basis for the term of the Project Agreement (as defined in the Policies and Instructions).

1. Job Creation Schedule for the Applicant

For all responses in the table below, part-time ("PT") employees are defined as those working between 17.5 and 35 hours per week on average, and full-time ("FT") employees are defined as those working 35 hours or more per week. Hourly wages in Columns E & F should represent the pay rate and are exclusive of overtime. For salaried employees, divide the annual salary by 1,820 working hours per year to calculate an hourly wage.

¹ The SBA 504 Loan Program, administered by the Small Business Administration, is designed to provide small businesses with long-term financing to acquire and improve major fixed assets, such as owner-occupied commercial real estate and heavy machinery.

Information included in Column C below will be used to determine eligibility for participation in the HireNYC Program. For program information, see Additional Obligations document. If eligible for the HireNYC Program participation, NYCEDC will provide additional details.

A Job Category	B # of NYC jobs retained by Project	C # of jobs to be added in each year at Project Location in first 3 years of operation to be employed by Applicant		D Total # of Jobs at Project Location in first	E Average hourly wage for	F Lowest hourly wage	G Average Fringe Benefit for	H Average Fringe Benefit for	
		Year 1: 2019	Year 2: 2020	Year 3: 2021	3 years of operation (Sum of all Columns B and C)	Year 1	for Year 1	retained jobs	created jobs
FT Executive level	1				1	\$		\$32,000	\$
FT Manager level	3	2			5	\$27.22	\$22.55	\$21,000	\$21,000
FT Staff level	12				12	\$		\$28,000	\$
Total FT Employees	16	2			18	\$	\$22.55	\$26,938	\$21,000
Total PT Employees						\$	\$	\$	\$

2. Job Creation Schedule for tenants at the Facility not affiliated with the Applicant N/A

Α	В		С		. D	: E	F	: G	Н
Job Category	# of NYC jobs retained by Project	# of jobs to be added in each year at Project Location in first 3 years of operation			Total # of Jobs at Project Location in first	Average hourly wage for	Hourly	Average Fringe Benefit for retained jobs	Average Fringe Benefit for created jobs
		Year 1: 20	Year 2: 20	Year 3: 20	3 years of operation (Sum of all Columns B and C)	Year 1	for Year 1		
FT Employees						\$	\$	\$	\$
PT Employees						\$	\$	\$	\$

- 3. Of the Total Jobs at Project Location in Column D in Table 1, how many employees are/will be NYC residents? TBD
- 4. How many employees at the Project Location will be paid below living wage² at Project Start Date (as defined in the Policies and Instructions)?
- 5. Does the Project currently have, or anticipate having, contract or vendor employees³ at the Project Location?
- Generally describe all other forms of compensation and benefits that permanent employees will receive (i.e. healthcare, employer contributions for retirement plans, on-the-job training, reimbursement for educational expenses, etc.). Health Care, Dental, Vision, STD/LTD, Life, 401k, Pension Plan, and Tuition Reimbursement.
- 7. Will Applicant or any of its Affiliates be required to provide health coverage to its employees pursuant to the federal Patient Protection and Affordable Care Act (the "Act")?

 Yes

 No

 If yes, provide an overview of the applicable requirements under the Act and an explanation of how Applicant plans to comply with such requirements. If no, explain why and provide a FT employee count using the Act "FTE Employee Calculator". See attached
- 8. Is Applicant 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?

 Yes
 No

 If yes, provide an explanation of your company's paid and unpaid sick time policy. If No, explain why and provide a table which outlines the number of anticipated employees and hours worked per calendar year. See attached (Manhattan Beer Distributors, LLC 307 Sick Leave Benefits)
- 9. Will the Project use an apprenticeship program approved by the New York State Department of Labor? ☐ Yes ☒ N

² For information regarding living wage, see Additional Obligations document.

³ Contract or vendor employees are independent contractors (i.e. persons who are not "employees") or are employed by an independent contractor, who provide services at a Project Location.

⁴Information on the Paid Sick Leave Law can be found here.

J. LABOR

2.

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

			urrent calendar year or any of the five preceding calendar years experienced labor unrest situations, kes, hand billing, consumer boycotts, mass demonstrations or other similar incidents?
	☐ Yes I	⊠ No	If Yes, explain on an attached sheet.
	 Has any of the Compa the five calendar years 		y federal and/or state unfair labor practices complaints asserted during the current calendar year or any urrent calendar year?
	⊠ Yes 〔	□ No	If Yes, describe and explain current status of complaints on an attached sheet. See attached
;	Do any of the Compa calendar year or any or	nies have pending of the five calenda	g or threatened requests for arbitration, grievance proceedings or other labor disputes during the current ryears preceding the current calendar year?
	⊠ Yes 〔	□ No	If Yes, explain on an attached sheet. See attached
4	4. Are any of the Compa	nies' employees r	not permitted to work in the United States?
	☐ Yes □	⊠ No	If Yes, provide details on an attached sheet.
!	Is there any period for related to this inquiry,	which the Compa such as Employm	anies did not complete and retain, or do not anticipate completing and retaining, all required documentation nent Eligibility Verification (I-9) forms?
	☐ Yes □	⊠ No	If "Yes," explain on an attached sheet.
(local, state or federal	department, agendr r wages, inspecte	abor, the New York State Department of Labor, the New York City Office of the Comptroller or any other cy or commission having regulatory or oversight responsibility with respect to workers and/or their working ed the premises of any Company or audited the payroll records of any Company during the current or
	⊠ Yes 〔	□ No	If "Yes," 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.
			See attached
7	 Has any of the Compa including a pension pla 		potentially incurred, any liability (including withdrawal liability) with respect to an employee benefit plan,
	☐ Yes □	⊠ No	If "Yes," 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.
8	 Are the practices of ar any complaints, claim treatment of employee 	s, proceedings o	ies now, or have they been at any time during the current or preceding five calendar years, the subject of r litigation arising from alleged discrimination in the hiring, firing, promoting, compensating or general
	⊠ Yes □	□ No	If "Yes," provide details on an attached sheet. Note "discrimination" includes sexual harassment. See attached
K.	. FINANCIALS		
1.			any close relative of any Principal(s), ever received, or is any such person or entity currently receiving, in-discretionary benefit from any Public Entities?
	⊠ Yes □	□ No	If Yes, provide details on an attached sheet. See attached
2.			or any existing or proposed occupant at the Project Location(s), obtained, or is any such person or entity obtaining, other assistance from the NYCIDA/Build NYC and/or other Public Entities?
	⊠ Yes □	□ No	If Yes, provide details on an attached sheet. See attached
3.	Has Applicant, or any Affi	iliate or Principal,	ever defaulted on a loan or other obligation to a Public Entity?
	☐ Yes ▷	☑ No	If Yes, provide details on an attached sheet.
4.		i) the subject of fo	filiate or Principal, holds or has ever held an ownership interest and/or controlling interest of 25 percent or preclosure (including a deed in lieu of foreclosure), or (ii) in arrears with respect to any type of tax,
	□ Yes 🌣	☑ No	If Yes, provide details on an attached sheet.

5.				or Principal, have any co				gment liens, lis pend	dens, other liens,
		☐ Yes	⊠ No	If Yes, provid	e details on an att	ached sheet.			
6.	Has Applica	ant, or any Afi	filiate or	Principal, failed to file a	any required tax r	eturns as and whe	en required with app	opriate government	tal authorities?
		□ Yes □	⊠ No	If Yes, provide	e details on an att	ached sheet.			
7.	an attached	l sheet. List ar	ny "Majo	ct information for Applic or Customers" (those that es, and materials).					
	Reference Type	Compai Name		Address	Contact Person	Phone	Fax	Email	% of Revenues
		Flair Bever Corp.		3857 9 th Avenue, New York, NY 10034					
	Major Customers	The Beer Connection	ı	31-07b Starr Avenue, Long Island City, 11101					
		Constellation Brands	on	1 Landmark Square Ste.1200, Stamford, CT 06901					
	Major Suppliers	MillerCoors	Co.	485C Route 1 South, Suite 250 Iseline, NY 08830					
		Laundry, Distribution Food Servin Joint Board Workers United, Affiliated with	and ce I,	18 Washington Place 2nd Floor Newark, NJ. 07102					
	Unions	Local 812, International Brotherhoot Teamsters	al d of	445 Northern Boulevard Great Neck, NY. 11021			de notation de la constant de la con		
	Banks	J.P. Morgai Chase N.A.	i n	925 Westchester Ave, 3 rd Fl White Plains, NY 10604					
2.	York City? If "Yes Will the cor □ Yes If "Yes the answer to	mpletion of the Yes S s," provide the mpletion of the S No s," provide the o question 1	e Project No e names e Project names or 2 is	of the owners and additional tresult in the abandonn of the owners/operator "Yes," answer questic sary to preserve the compared to the owners of the owners/operator "Yes," answer questic sary to preserve the compared to th	resses of the to-b nent of any plants s and the addres ons 3 and 4.	e-removed plant(s or facilities locate ses of the to-be-al	s) or facility(ies): ed in an area of New bandoned plant(s) o	York State other that r facility(ies):	an New York City?
4.	Is the Project reasonably necessary to discourage Applicant, or any proposed occupant of the Project, from removing such plant or facility to a location outside New York State?								

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

☐ Yes ☐ No

M.	COMPLIANCE WITH	Ι Λ\Λ/	
IVI.	COMPLIANCE WITH	LAVV	

1.	The Applicant and any owner or occupant of the proposed project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations. ⊠ Yes □ No
2.	The proposed project, as of the date of this application, is in compliance with all provisions of Article 18-A of the General Municipal Law, including, but not limited to the provisions of Section 859-a and Section 862(1) thereof. \square Yes \square No
N 1.	. ADDITIONAL QUESTIONS Is the Applicant considering alternative Project Locations outside of New York City? ⊠ Yes □ No
	a. If "Yes," where? New Jersey, Westchester County
2.	What uses are being considered for the Project Location other than those described in the Proposed Project Activities? None
3.	How does the Applicant intend to utilize the tax savings provided through the NYCIDA? Reinvest into the distribution business
4.	What are the primary sources of revenue supporting Applicant's operations? Sales of product
5.	If the Applicant's income statement categorizes any revenues as "Other operating revenues," describe what revenues are captured in that category Sale of distribution rights and interest income N/A
6.	If the Applicant's income statement categorizes any revenues as "Other general and administrative," describe what revenues are captured in that category:

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

I certify under penalty of perjury to the best of my knowledge and belief, after due investigation, that the information contained in these Application Materials is accurate, true and complete 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 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, 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 Applicant's expense.

I acknowledge 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 exemptions claimed by reason of Agency involvement in the project.

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 Agency may be required to disclose the Application Materials and the information contained therein (see the Disclosure Policy section of the Polices and Instructions document 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 the Board for approval. If the Agency presents Applicant's proposed Project to the Board for approval, the Agency does not guaranty that such approval will be obtained. If upon presenting Applicant's proposed Project to the Board for approval the Agency obtains 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 Board for Approval.

That each of Applicant and each of its Affiliates (collectively, the "Indemnitors") hereby releases the Agency and 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 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,

This 25 day of Feb , 20 19

Name of Applicant:

Signatory: __ Title of Signatory:

Signature:

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 25 day of Feb, 20/

Name of Preparer:

Signatory: Title of Signatory:

Signature: