

NYCIDA PROJECT COST/BENEFIT ANALYSIS

April 7, 2016

APPLICANT

Transcontinental Ultra Flex Inc.

975 Essex Street

Brooklyn, New York 11208

PROJECT LOCATIONS

See below, Section D.

A. Project Description:

Transcontinental Ultra Flex Inc. (the “Company”), a New York Corporation that manufactures flexible plastic packaging. The Company is seeking assistance with the renovation, equipping, and or furnishing of (a) an approximately 41,476 square foot building located on an approximately 36,000 square foot parcel of land located at 975 Essex Street; (b) an approximately 4,300 square foot building located on an approximately 4,300 square foot parcel of land located at 957 Essex Street; (c) an approximately 9,154 square foot building located on an approximately 9,154 square foot parcel of land located at 506 Wortman Avenue; (d) an approximately 15,000 square foot building located on an approximately 15,000 square foot parcel of land located at 518 Wortman Avenue; (e) an approximately 19,000 square foot building located on an approximately 41,000 square foot parcel of land located at 494 Wortman Avenue; (f) an approximately 9,500 square foot building located on an approximately 9,500 square foot parcel of land located at 482 [NYCIDA offer letter has 484] Wortman Avenue; (g) an approximately 45,100 square foot building located on an approximately 40,000 square foot parcel of land located at 506 Cozine Avenue; (h) an approximately 21,000 square foot building located on an approximately 29,000 square foot parcel of land located at 654 Montauk Avenue; (i) an approximately 38,848 square foot building on an approximately 25,500 square foot parcel of land located at 744 Berriman Street; (j) an approximately 23,500 square foot building located on an approximately 25,500 square foot parcel of land located at 977 Shepherd Avenue. All of the locations are in Brooklyn, New York 11208.

Total Project costs are estimated to be \$16.4 million with \$3,679,361 for construction hard costs, \$724,500 for soft costs, and \$12,023,480 for machinery, furnishing and equipment.

The Company currently has 256 full-time equivalent employees at the project locations and expects to hire an additional 47 full-time equivalent employees within the next three years.

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

| | | |
|---|-----------|------------------|
| Land Tax Abatement (NPV, 12 years): | \$ | 751,333 |
| Building Tax Exemption (NPV, 12 years): | | 1,420,325 |
| Sales Tax Exemption: | | 656,956 |
| Total Cost to NYC | \$ | 2,828,614 |

C. Benefit to City (Estimated NYC direct and indirect taxes to be generated by Company) (estimated NPV 12 years @ 6.25%):

\$ 17,993,679

D. Project Locations:

975 Essex Street, Brooklyn, New York 11208

957 Essex Street, Brooklyn, New York 11208

484 Wortman Avenue, Brooklyn, New York 11208

494 Wortman Avenue, Brooklyn, New York 11208

506 Wortman Avenue, Brooklyn, New York 11208

518 Wortman Avenue, Brooklyn, New York 11208

506 Cozine Avenue, Brooklyn, New York 11208

654 Montauk Avenue, Brooklyn, NY 11208

744 Berriman Street, Brooklyn, NY 11208

977 Shepherd Avenue, Brooklyn, NY 11208

BENEFITS APPLICATION

| | |
|--|--|
| Applicant Name: Transcontinental Ultra Flex Inc. | |
| Name of operating company (if different from Applicant): Ultra Flex Packaging | |
| Operating Company Address: 975 Essex St., Brooklyn, NY 11208 | |
| Website Address: http://ultraflex.com/ | |
| EIN #: ██████████ | NAICS Code: 323110 |
| State and date of incorporation or formation: Canada; 3/3/1978 | 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"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Natural Person <input type="checkbox"/> 501(c)(3) Organization <input type="checkbox"/> Other: _____ | |
| Are any securities of Applicant publicly traded? <input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Sales Tax Waiver |
| <input type="checkbox"/> Mortgage Recording Tax Deferral |

Applicant Contact Information

| | Name/Title | Company | Address | Email | Phone |
|--------------------------|--|-----------------------|---|------------|------------|
| Applicant Contact Person | Roby Matteau | Transcontinental Inc. | 1 Place Ville Marie, Suite 3315 Montreal (QC) Canada H3B 3N2 | ██████████ | ██████████ |
| Attorney | Christine Desaulniers, Chief Legal Officer | Transcontinental Inc. | 1 Place Ville Marie, Suite 3315 Montreal (QC) Canada H3B 3N2 | ██████████ | ██████████ |
| Accountant | Isabelle Côté | Transcontinental Inc. | 1 Place Ville Marie, Suite 3315 Montreal (QC) Canada H3B 3N2 | ██████████ | ██████████ |

| | | | | | |
|------------------|------------------------|-------------|--|----------------------|----------|
| Consultant/Other | Ray Watson, Consultant | US Consults | 3131 McKinney Ave, #500 Dallas, TX 75204 | ████████████████████ | ████████ |
|------------------|------------------------|-------------|--|----------------------|----------|

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 | | | | | | | | |
| Construction Hard Costs | | | | | | .3 | | .3 |
| Construction Soft Costs | | | | | | .1 | | .1 |
| Fixed Tenant Improvements | | | | | | | | |
| Furnishings & Equipment | | | | | | 15.9 | | 15.9 |
| Debt Service Reserve Fund | | | | | | | | |
| Capitalized Interest | | | | | | | | |
| Costs of Issuance | | | | | | | | |
| Fees (explain): | | | | | | | | |
| Other (explain) Training | | | | | | .1 | | .1 |
| Total Sources | | | | | | 16.4 | | 16.4 |

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:

| | |
|---|--|
| <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 checked="" type="checkbox"/> Outside United States | % of Total? <input type="text" value="100"/> |
| <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/4407/15 | Street address and zip code: 975 Essex St, Brooklyn, NY 11208 |
| Zoning: FACTORY; Light Manufacturing | Number of Floors: 1 |
| Square footage of existing building: | Square footage of land: n/a |
| Anticipated square footage of building following construction and/or renovation: | Anticipated square footage of non-building improvements following construction and/or renovation (i.e., parking lot construction): |
| Intended use(s) of site (check <u>all</u> that apply): <input 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: |
| <input type="checkbox"/> Applicant or an Affiliate leases or expects to lease the Project Location | (Projected) Lease signing date: |
| If you checked the box above, please select one of the following: <input type="checkbox"/> Lease is for an entire building and property <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 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: | EIN # of Affiliate: |
| Address of Affiliate: | |
| Affiliation of Affiliate to Applicant: | |
| Contact Person: | Title of Contact Person: |
| Phone Number(s): | |

Core Application - Proposed Project Packet (2 of 2)

Please complete Proposed Project Packet for EACH Project Location

Ultraflex (UF) is in full compliance with NYC's Earned Sick Leave Time Act requiring that UF provide employees with up to 40 hours of sick leave every year. Employees must earn, or accrue, at least one hour of sick leave for every 30 hours worked, up to 40 hours of sick leave per year.

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 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.
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:

| Company Name | Address | Contact | Phone | Fax | Email | % of Revenues |
|-----------------------------|---|---------|------------|-----|-------|---------------|
| JBR Gourmet Foods, Inc. | 1731 Aviation Blvd. Lincoln, CA 95648 | N/A | ██████████ | N/A | | ████ |
| Renfro Corp | 661 Linville Rd. Mount Airy, NC 27030 | N/A | ██████████ | N/A | | ████ |
| Swisher International, Inc. | 459 E. 16 th St. Jacksonville, FL 32206 | N/A | ██████████ | N/A | | ████ |
| Rolida Investments, Inc. | Manzana G # Etaba I Zona Franca Industrial Santiago Republica Dominicana Dom | N/A | ████ | N/A | | ████ |

8. List major suppliers:

| Company Name | Address | Contact | Phone | Fax | Email |
|---|---|---------|------------|------|-------|
| Allied Plastic Holdings, LLC | 36-08 Review Ave. Long Island City, NY 11101 | N/A | ██████████ | ████ | |
| NEX Performance Films Inc. | 1264 E High St. Milton, WI 53563 | N/A | ██████████ | ████ | |
| Junish Composites Private Limited (India) | 407 Kshitij, Veera Desai Road, Andheri (West) Mumbai - 400 | N/A | ██████████ | ████ | |
| Oben Group | 1035 Villa Court Dr. Seabrook, TX 77586 | N/A | ██████████ | ████ | |

9. List major Funding sources (if applicable):

| Company Name | Address | Contact | Phone | Fax | Email |
|---------------------------------------|--|------------|------------|------|------------|
| TC Transcontinental Packaging Inc | 912 East Nusbaum Pl Clinton, MO 64735 | ██████████ | ██████████ | ████ | ██████████ |
| Transcontinental Printing Corporation | N/A | ██████████ | ██████████ | ████ | ██████████ |

10. List unions (if applicable):

| Union Name | Address | Contact | Phone | Fax | Email |
|---|-------------------------------------|------------|------------|-----|-------|
| United Production Workers Union Local 17-18 | 735 Wythe Ave Brooklyn, NY 11211 | ██████████ | ██████████ | N/A | N/A |
| | | | | | |
| | | | | | |

11. List banks:

| Bank Name | Address | Contact | Phone | Fax | Email | Account Type and Number |
|-----------|--------------------------------------|---------|------------|-----|-------|--------------------------|
| Citibank | 80 Jamaica Ave Brooklyn, NY 11207 | | ██████████ | | | ██████████ ██████████ |
| | | | | | | |
| | | | | | | |

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 8th day of February, 2016.

This day of , 20 .

Name of Applicant: Roby Matteau

Name of Preparer: _____

Signatory: Isabelle Côté

Signatory: _____

Title of Signatory: Corporate Controller

Title of Signatory: _____

Signature: 

Signature: _____

**NYCIDA Core Application
Transcontinental
Ultra Flex Packaging**

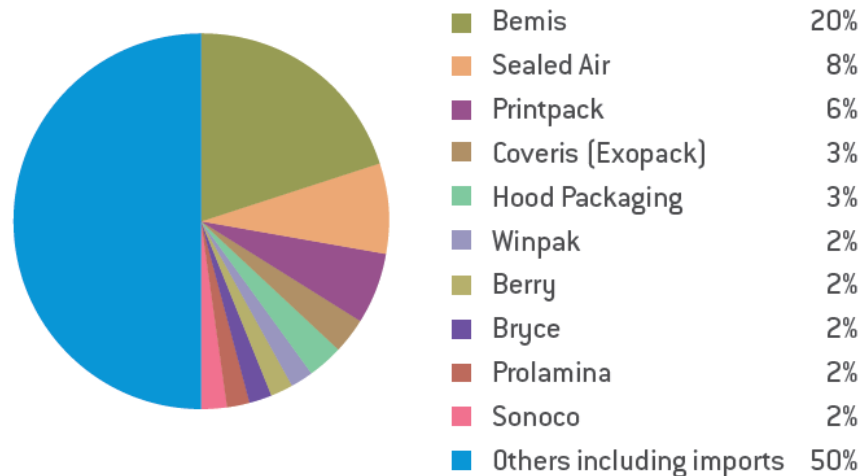
Page 2

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.

- TC Transcontinental recently acquired Ultra Flex which is a manufacturing company that was founded in 1974. The principal business is the conversion of plastic film into bags and printed stock for its industrial customers. The end product of Ultra Flex is then used as consumer product packaging.

Competitive Landscape
North American Converter
Flexible Packaging Market Share



Proposed Project Activities

1. Please provide a brief overview of the entire proposed Project.

The Ultra Flex facility requires approximately \$16.4mm in upgrades to equipment and facilities. These upgrades will take place in some extent in all of their facilities with the majority of the work to be done in 975 Essex, 744 Barriman, 494 Wortman, 506 Wortman, 518 Wortman and 977 Shepherd.

975 Essex will have upgrades in equipment to include RTO (incinerator), Duplex linear Laminators, new hazardous waste room, and an underground Solvent Tank for the Laminators for a total spend of approximately \$12.1 mm.

977 Shepard St will have upgrades in equipment to include: Compressed Air System, Chillers, for a total spend of approximately \$329,000.

744 Berriman will be where the bag department is relocated for a total of \$150,000

494 Wortman- extruder laminator for \$115,000

506 Wortman- New presses for \$775,000

518 Wortman- new Slitter machine for \$366,500, there is also another approximate \$2.6 million in miscellaneous and contingency.

*please see the attached spreadsheet for a detailed list of location and expenditures.

2. TC is expecting a shortfall of \$7.5mm over the next five (5) years and is looking to the state and local government for assistance. Currently, there are 256 jobs at risk.
3. Please provide a brief description of how the proposed Project will affect current operations.

The project will allow UF to increase productivity and efficiency and lower its production costs. The new equipment will also provide capabilities to produce high quality products.

4. Please provide a brief description of renovations/construction of the proposed Project.

New equipment will be purchased and the facilities will be updated.

5. Please provide a brief timeline for the entire proposed Project.

The project should be completed by the end of the fourth quarter of 2020.

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. UF has received NYSESD grant funds and NYPA grants.

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. NYSESD grand funding, Investment Tax Credits, Employee Tax Credits and NYPA Re-charge.


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 | | | |
|--|--|-----------------------|--|
| Transcontinental Inc | | | |
| Name of Action or Project: Transcontinental Inc / Investment project Transcontinental Ultra Flex Inc. | | | |
| Project Location (describe, and attach a location map): 975 Essex Street, Brooklyn, NY 11208-5419 | | | |
| Brief Description of Proposed Action: Capital investment and job creation - acquisition of new manufacturing equipment | | | |
| Name of Applicant or Sponsor: Transcontinental Inc. | | Telephone: [REDACTED] | |
| | | E-Mail: [REDACTED] | |
| Address: 1 Place Ville Marie, bureau 3315 | | | |
| City/PO: Montreal | | State: Quebec | Zip Code: H3B 3N2 |
| 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 type="checkbox"/> |
| | | | YES <input checked="" 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: Will require NYCDEP building permits NYSDEC/ NYCDEP air permits | | | NO <input type="checkbox"/> |
| | | | YES <input checked="" type="checkbox"/> |
| 3.a. Total acreage of the site of the proposed action? | | 1.5 acres | |
| b. Total acreage to be physically disturbed? | | 1.5 acres 1.5 Acres | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | | 3.6 acres 3.6 Acres | |
| 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 type="checkbox"/> Commercial <input 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 | | | |

| | | |
|---|-------------------------------------|-------------------------------------|
| 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 |
| Metropolitan Paper Recycling/Ultra Flex hazwaste generator | <input type="checkbox"/> | <input checked="" 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: _____ | NO | YES |
| Metropolitan Paper Recycling | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor name: <u>ISABELLE CÔTÉ</u> | | Date: <u>March 3, 2016</u> |
| Signature: <u></u> | | |

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: | | |
| 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.

| | |
|--|--|
| <input type="checkbox"/> | 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. |
| <input type="checkbox"/> | 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