



BENEFITS APPLICATION

nancial Assistance, the Project Financial Assistance may be limited to deferral fro
lo
501(c)(3) Organization Other:
☐ C Corporation ☒ S Corporation
Qualified to conduct business in NY? ⊠ Yes □ No
NAICS Code: 445110
and City, NY 11101

Applicant Contact Information

Not-For-Profit Bonds

Exempt Facilities Bonds

Questionnaire under Supplementary Forms)

Manufacturing Facilities Bonds (Please complete Manufacturing

	Name/Title	Company	Address	Email	Phone
Applicant Contact Person	Edward Suh/ General Counsel	Bogopa Service Corp.	650 Fountain Ave. Brooklyn, NY 11208		
Attorney	Allen Perlstein	FHKP, LLP	3000 Marcus Ave. Lake Success, NY 11042		
Accountant	Victor Trygubchuk	Liss, Okun & Associates	98 Cuttermill Road #422N Great Neck, NY 11021		
Consultant/Other					

 \boxtimes

Industrial Incentive (IIP)

Industrial Developer

Commercial Growth

Background

Please provide a brief description of the company history and nature of the business, including a description of the industry, competitors, services offered on a separate sheet. (See Attachment 1)

Proposed Project Activities

Please provide answers to the following four questions on a separate page. (See Attachment 2)

- 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.

	Sources of Funds (If needed use an additional sheet to indicate all sources and uses)							
Uses of Funds	Bond Proceeds	Commercial Financing (Loan 1)	Commercial Financing (Loan 2)	Affiliate/ Employee Loans	Capital Campaign	Company Funds	Other (Identify):	Total Uses
Land & Building Acquisition								
Construction Hard Costs								
Construction Soft Costs								
Fixed Tenant Improvements		\$2,025,000				\$675,000		\$2,700,000
Machinery Furnishings and/or Equipment		\$1,275,000				\$425,000		\$1,700,000
Debt Service Reserve Fund								
Capitalized Interest								
Costs of Issuance								
Fees (explain):								
Other (explain)								
Total Sources		\$3,300,000				\$1,100,000		\$4,400,000

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:

☑ New York City	% of Total? 100%
☐ New York State (excluding NYC)	% of Total?
☐ United States (excluding NYS & NYC)	% of Total?
☐ Outside United States	% of Total?
☐ N/A – No equipment is planned to be purchased for the	nis Project

Project Location Detail

Project Location		Project Location #	f 1 of 1		
			p code: 42-02 Northern Blvd. Long Island City, NY		
Borough/Block/Lot: Queens/ Section 2/ Block	k 183/ Lot 51	11101			
Zoning: M1-5		Number of Floors: 1			
Square footage of existing building: 74,637 S	q. Ft.	Square footage of lan	d: 146,206 Sq. Ft.		
Anticipated square footage of building following renovation: 74,637 Sq. Ft.	ng construction and/or		otage of non-building improvements following enovation (i.e., parking lot construction): N/A		
–	ufacturing	☐ Office	☐ Non-profit		
For ALL USES other than Non-profit or Retail					
Is there any improved space which is currently Will any improved space be occupied by subtout If yes to either, please attach a separate page (2) square footage of subtenant operations, (3) Attachment 3)	enant(s) (whether Affilia e and provide details suc	tes or otherwise)? 🔲 `	Yes ☐ No enant business(es) (whether Affiliates or otherwise),		
Please check all that apply: Applicant or an Affiliate is or expects to be	the fee simple owner of	the Project Location	(Projected) Acquisition date:		
	-				
Applicant or an Affiliate leases or expects If you checked the box above, please select or			(Projected) Lease signing date: 9/17/2012		
☑ Lease is for an entire building and prop	-				
Lease is for a portion of the building an	•				
		-4 :-444 :-4	ti di Bait I		
accurately described in a supplementary d		st or intended interes	t in the Project Location, which may be more		
2. If an Affiliate owns or controls (or will own or completing the chart provided below:	control) a Project Locati	on, then describe such	Affiliate by choosing one of the following selections		
☐ General Partnership	☐ Limited Partnership		C Corporation		
S Corporation	☐ Limited Liability Cor	npany	☐ 501(c)(3) Organization		
☐ Natural Person	Other (specify):				
Name of Affiliate:		EIN # of Affiliate:			
Address of Affiliate:		1			
Affiliation of Affiliate to Applicant:					
Contact Person:		Title of Contact Pers	on:		
Phone Number(s):		1			

Core Application - Proposed Project Packet (2 of 2) Please complete Proposed Project Packet for EACH Project Location

Employment Information

The following information will be used as part of the NYCIDA'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 Agreement.

- Anticipated Facility Operations Start-Date: July 1, 2013
- 2. Number of Employees Applicant employed throughout New York City as of the last pay period:

 Part-time (working between 17.5 and 35 hours per week):

 Full-time (working 35 or more hours per week):
- 3. If Applicant currently occupies and operates at the Project Location, how many Full- and Part-time Employees are employed at Project Location?

 Part-time (working between 17.5 and 35 hours per week): N/A Full-time (working 35 or more hours per week): N/A
- 4. Number of Employees Applicant expect to employ throughout New York City on the Facility Operations Start-Date:
 Part-time (working between 17.5 and 35 hours per week): 30 Full-time (working 35 or more hours per week): 80

How many of these employees are expected to be relocated to the Project Location on or about the Facility Operations Start Date? None

Part-time (working between 17.5 and 35 hours per week): N/A Full-time (working 35 or more hours per week): N/A

5. 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.

Years following Facility Operations Start Date	1	2		4			7	Total New Growth
Permanent Full-time	2	2	2	2	2	0	0	10
Permanent Part-time	1	1	1	1	1	0	0	5

Wage Information

The questions in this section apply only to **Permanent Employees** employed or to be employed at the Project Location, and this information should <u>not include</u> compensation paid to Principals. Please note this information is required to be provided to the Agency on an annual basis.

- If employees are to be relocated on the Facility Operations-Start Date, what will be the average annual compensation <u>per relocated employee?</u>
 Part-time: NA Full-time: NA
- 2. With regard to the employees currently employed at the Project Location, what is the current average annual compensation <u>per employee?</u>

 Part-time: N

 Full-time: NA
- 3. For new employees expected to be hired in the first year following the Facility Operations Start-Date, what is the projected average annual compensation per employee? Part-time: \$17,500 Full-time: \$28,500
- 4. For all new employees (again, excluding Principals) expected to be hired during the three-year period following the Facility Operations Start-Date, please project the following:

Part-Time

Average annual compensation per employee: \$17,500
Annual salary of highest compensated part-time employee: \$20,000
Annual salary of lowest compensated part-time employee: \$10,000

Full-Time

Average annual compensation per employee: \$29,000
Annual salary of highest compensated full-time employee: \$70,000
Annual salary of lowest compensated full-time employee: \$20,000

- 5. 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.
 - See Attachment- United Food & Commercial Worker's union (UFCW) Local 342 Collective Bargaining Agreement, for further details on regarding employee benefits and wages. The newly hired employees at the Project location will become members of this Union.

<u>Labor</u>

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 Companie including actual or threater	during the current calendar year or any of the five preceding calendar years experienced labor unrest situations ad labor strikes, hand billing, consumer boycotts, mass demonstrations or other similar incidents?	S,
	☐ Yes 🛛 N	If Yes, please explain on an attached sheet	
2.		received any federal and/or state unfair labor practices complaints asserted during the current calendar year or eding the current calendar year?	r any
	⊠ Yes □ No	If Yes, please describe and explain current status of complaints on an attached sheet (See Attachment	4)
3.		nave pending or threatened requests for arbitration, grievance proceedings or other labor disputes during the five calendar years preceding the current calendar year?	curren
	🛚 Yes 📋 No	If Yes, please explain on an attached sheet	
4.	Are all employees of the C	mpanies permitted to work in the United States?	
	⊠ Yes □ No	If No, please provide details on an attached sheet.	
	Do the Companies comple	and retain all required documentation related to this inquiry, such as Employment Eligibility Verification (I-9) fo	rms?
	⊠ Yes 🔲 No	If No, please explain on an attached sheet	
5.	local, state or federal depart	artment of Labor, the New York State Department of Labor, the New York City Office of the Comptroller or any ment, agency or commission having regulatory or oversight responsibility with respect to workers and/or their v es, inspected the premises of any Company or audited the payroll records of any Company during the cur ar years?	vorkind
	☐ Yes	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 have been issued and any fines or remedial or other requirements imposed upon any of the Companies a consequence.	: may as a
6.	Have any of the Companies including a pension plan?	incurred, or potentially incurred, any liability (including withdrawal liability) with respect to an employee benefit p	plan,
	☐ Yes	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 any complaints, claims, pr treatment of employees?	ne Companies now, or have they been at any time during the current or preceding five calendar years, the sub- ceedings or litigation arising from alleged discrimination in the hiring, firing, promoting, compensating or g	oject of general
	⊠ Yes ☐ No	If "Yes," provide details on an attached sheet. Note "discrimination" includes sexual harassment. (See Attachment 5)	

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. (See Attachment)
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.
Fo pe	r questions 7 through 12, below, please provide the answers on a separate page, and <u>be sure to include for EACH question (a) name of contact rson(s), (b) phone and fax numbers, and (c) email addresses.</u>
7.	Please provide a list of the Applicant's major customers and include the proportionate share of Applicant revenue that each customer represents.
	NA NA
8.	Please provide a list of the Applicant's major suppliers> (See Attachment 6)
9.	Please list major funding sources and/or investors> (See Attachment 6)
10.	Please list all labor union contracts and collective bargaining arrangements to which any of the Companies is a party> (See Attachment 6)
11.	Please list all banks where the Companies maintain accounts> (See Attachment 6)
12.	Please list any licenses and licensing authorities, if any licensure is required for Company operations> (See Attachment 6)
<u> </u>	<u>nti-Raiding</u>
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?
	If "Yes," please provide the names of the owners/operators and the addresses of the to-be-abandoned plant(s) or facility(ies):
lf '	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? \square Yes \square 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, 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, 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.

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 publiching 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; 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 Disclosure Policy and Procedure); 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:

Agreed by Applicant,

Requested, Represented, Certified, Acknowledged, Understood and

That notwithstanding submission of this Application, the Agency shall be under no obligation to present Applicant's proposed Project to its Board of Directors for approval. If the Agency presents Applicant's proposed Project to its Board of Directors for approval, the Agency does not guaranty that such approval will be obtained. If upon presenting Applicant's proposed Project to its Board of Directors 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 the Applicant hereby releases the Agency, NYCEDC, and the directors, officers, employees and agents of each (collectively, the "Indemnitees") from all claims that Applicant has or could assert and which arise out of this Application or out of any actions taken in connection with this Application or our of any other actions taken in connection with the proposed Project (collectively, the "Actions"). Applicant hereby indemnifies and holds harmless each of the Indemnities against any 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 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.

I acknowledge and agree that the Agency reserves its right in their 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.

I certify that, using due care, I know of no misstatement of material fact in

these Application Materials and know of no material fact required to be

•	stated in these Application Materials to make the statements made therei not misleading. Certified by Preparer,		
This 19th day of February, 2013.	This day of , 20 .		
Name of Applicant: <u>Bogopa LIC, Inc.</u>	Name of Preparer:		
Signatory: <u>Hwee III An</u>	Signatory:		
Title of Signatory: Chief Executive Officer	Title of Signatory:		
	Signature:		
Signature:			

Certification

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I further understand and agree as follows:

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I acknowledge and agree that the Agency reserves its right in their 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 19th day of February, 2013.

Name of Applicant: Bogopa LIC, Inc.

Signatory: Hwee III An

Title of Signatory: Chief Executive Officer

Signature:

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

This	day of	, 20		
Name o	of Preparer:		 	
Signato	ory:		 	
Title of	Signatory:			
Signati	ire.		 	