

INTERAGENCY COUNCIL OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES AGENCIES, INC

275 Seventh Avenue, New York, NY 10001 / (212) 645-6360 / Fax (212) 627-8847

MEMORANDUM

TO:

Brad Hensley

NYC IDA

FROM:

Richard Bosch

RE:

SUS, 7th Avenue Application Materials

DATE:

December 30, 2004

Enclosed are copies of the application materials for the 7th Avenue project for Services for the Underserved. As we discussed, their requested loan amount is about more than what was in the public notice.

These materials will also be added to the due diligence CD that will be distributed by MCMG.

Thanks for all your help.

5He#4

PROJECT INFORMATION SUMMARY: Complete a separate set for each project

PROJECT #: 4

Project Address: 305 Seventh Avenue, 7th & 10th Floor, New York, NY 10027

Cross Streets: West 27th Street and West 28th Street

Title Company Used for Initial Purchase: L&H Abstract Corp./First American Title Company

tele#: 212-410-1166

Architect: Victor Stein Tele#:

Number of floors including basement: 2 Zoning category:

Services Provided in Facility: Corporate Offices

Gov't Funding Source(s)(select one, enter additional sources in "other":

OMRDD Other: Fleet Bank

If owned, initial closing date: 9/15/2000

is this a mortgage?

outstanding principal due (est.): \$

maturity date:

any pre-payment penalties?

Lending institution name & address:

If leased: lease term (start and end dates and available options): N/A

Landlord Name & Address: N/A

Date Program became (or is projected to become) operational:

Estimates for all COSTS involved in project:

Land & building acquisition \$
New Construction \$

Renovations/Building Improvements

Machinery/Equipment
Fees/Other Soft Costs

Other (Explain)
Total Project Costs

\$ \$300,000 \$ \$250,000

Proposed SOURCES to finance the COSTS

Bonds (i.e., this financing)

Loans from other sources

Fund Balance

Capital Campaigns

Other Sources

\$1,344,323

\$\$
\$\$
\$\$
\$\$

Total Project Sources

LOAN AMOUNT REQUESTED: \$1,344,323

Provide brief responses to the following questions on a separate page and attach to the corresponding Project Information Summary, Page 1

- Describe in detail the nature of the proposed project. Describe the site and any improvements on it. Describe proposed construction/renovation, if any.
 Complete renovation of the 7th and 10th floor, inclusive of bathrooms, office spaces, sprinklers, electrical and phone and data systems.
- 2. What is the purpose of this project? What services are/will be provided? Renovation of Executive/Administrative offices where all centralized agency functions operate.
- 3. Indicate, if applicable, the estimated dates for construction/renovation start and completion and financing drawdowns.

 Contruction began in July 2004 and to be completed by February 2005.
- 4. When is payment due date for improvements /construction costs? (i.e. contractors) On a monthly basis through the above period.
 What source of funds is the Applicant intending to use to pay for these improvements if the proceeds of a tax exempt bond issue are not available right away? Fleet Bank
 If the project costs have already been paid, please identify what source of funds was applied to these costs in the first instance, when the cost was initially paid. Fleet Bank
- 5. Will any entity/person other than the Applicant use the project facility? No Does the applicant intend to lease any portion of the project facility. No List all present tenants including Name, contact person and telephone, square feet and floor(s) occupied, and lease expiration/renewal dates. In addition, indicate if additional space will be leased out and to what extent.No
- 6. Will the project facility be operated by the Applicant or by someone else? **Applicant**If the operator is expected to be an entity other than the Applicant, who will operate the facility?

 If applicable, please provide a copy of the contract pursuant to which the operator will be present.
- 7. If any of the present or proposed tenants in this project are related to, or affiliated with the Applicant, please identify and indicate the percentage of occupancy. N/A
- 8. If any of the present or proposed tenants in this project are related to, or affiliated with the seller of the property, please identify and indicate the percentage of occupancy. N/A
- 9. Is there a relationship, legally, by virtue of common control, or through related personnel, directly or indirectly, between the Applicant and the present owner of the project site"? No if so, please provide details.
- 10. Has the Applicant, any existing or proposed tenant of the proposed project facility, or any person related to any of the foregoing, received or benefited from with the past six months, or is contemplating to receive or benefit from within the next six months, tax-exempt financing anywhere within the United States? No If yes, please provide details.

PROJECT COST WORKSHEET:

A2a Site#4

AGENCY: Services for the Underserved Costs You Wish to Finance			Project: 305 Seventh Avenue PPA Letter Amounts					
				1				
			Total PPA	ì	-		Option Paid	
COSTS	Amount		<u>Purchase</u>	Building		Land	by OMRDD	
Renovation Cost			\$0					
options paid by agency				1 				
(minus DASNY Bond)								
					<u> </u>			
Subtotal (available for financing					Conting	-		
			Total PPARehab	<u>Rehab</u>	ency	Design	(Asst. Tech)	
Rehab/Renovation			\$0					
Design								
minus Assistive Tech paid by OMR	•			!				
	£							
Subtotal (available for financing)	\$							
			Total PPA Soft	lall other		logal/aga	Interest on	
Soft Costs				all other soft costs		ounting	Interest on land	
closing costs on initial purchase			\$0					
short term interest paid on interim								
financing environmental			75.03±3					
appraisals								
other legal and accounting costs								
Subtotal (available for financing)								
			Total PPAStart					
Start Up			<u>Up</u>					
furniture			\$0			-		
equipment	\$300,000							
pre-op staffing								
staff training								
perishables								
miscellaneous	1 10							
	6200.000							
subtotal (available for financing)	\$300,000							
RAND TOTALS			\$0					

State Environmental Quality Review SHORT ENVIRONMENTAL ASSESSMENT FORM (SUPPLEMENTED) For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Appli					
APPLICANT/SPONSOR Services for the Underserved	2. PROJECT NAME				
Services for the Onderserved	305 Seventh Avenue				
3. PROJECT LOCATION: Municipality: 305 Seventh Avenue, 7 th & 10 th Fl., New York	, NY 10027 County: New York				
4. PRECISE LOCATION (Street address and road intersections, pro					
305 Seventh Avenue, New York, NY 10027; between 27th & 28th	Streets				
IS PROPOSED ACTION: ()New ()Expansion (X)Modification/Alteration					
7. DESCRIBE PROJECT BRIEFLY: Corporate/ Administrative	Offices for 55 employees				
7. AMOUNT OF LAND AFFECTED: Initially16,800sq ft acres Ultimately 16,800sq ft acres					
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZON If No, describe briefly. YES	VING OR OTHER EXISTING LAND USE RESTRICTIONS?				
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT () Residential () Industrial (X) Commercial () Ag Describe.Office Condominium Highrise Buildings	griculture () Park/Forest/Open Space () Other				
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUN GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCANYC, Building Department					
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENT YesIf yes, list agency name and permit/approval: NYC, Building De					
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PI	ERMIT/APPROVAL REQUIRE MODIFICATION?				
13. SUPPLEMENTAL PROJECT DESCRIPTION:					
A. Is site currently vacant or developed? (If developed, indica	te current and previous site uses.) developed				
B. Proposed building square footage for any new construction	or expansion. N/A				
C. Dimensions of any new construction. N/A					
D. Number of existing and proposed parking spaces. N/A					
F. Number of employees currently; number of employees upon completion of the project. (55) before (55) after					

PART 1 - PROJECT INFORMATION (continued)

14. WHAT ARE THE PEAK HOURS FOR VEHICULAR TRIP GENERATION (e.g., 8 A.M. - 9 A.M.)? 9-11am

WHAT IS THE MAXIMUM NUMBER OF VEHICULAR TRIPS GENERATED IN EACH OF THE PEAK HOURS (COMBINATION OF EMPLOYEE, BUSINESS/VISITOR TRIPS)?

4

- 15. WILL THE PROJECT PRODUCE OPERATING NOISE AUDIBLE OUTSIDE OF (i.e., EXCEEDING) LOCAL AMBIENT NOISE LEVELS? N_0
- 16. IS THE PROJECT LOCATED WITHIN THE NEW YORK CITY DESIGNATED COASTAL ZONE? N_{0}
- 17. WILL THE PROJECT ROUTINELY PRODUCE ODORS NOTICEABLE OUTSIDE OF ANY PROJECT BUILDINGS FOR MORE THAN ONE HOUR PER DAY? No
- 18. WHAT WASTES WILL BE GENERATED BY THE PROJECT? LIST AMOUNTS OF EACH GENERATED ON A DAILY OR MONTHLY BASIS: 100 cubic yards
- 19. IS THE APPLICANT AWARE OF AND/OR HAVE ANY REASON TO BELIEVE THERE ARE ANY HAZARDOUS AND/OR TOXIC OR SIMILAR MATERIAL(S), SUBSTANCE(S) AND/OR WASTE(S), INCLUDING BUT NOT LIMITED TO PETROLEUM PRODUCTS, PRESENT AT THE SITE WHICH MAY POSE A HEALTH OR PHYSICAL HAZARD TO PERSONS EMPLOYED AT OR VISITING THE SITE?

No

If yes, please provide specific information regarding all such material(s), substance(s) and /or waste(s) on a separate piece of paper.

20. IS THE APPLICANT AWARE OF AND/OR HAVE ANY REASON TO BELIEVE THERE ARE ANY HAZARDOUS AND/OR TOXIC OR SIMILAR MATERIAL(S), SUBSTANCE(S), AND/OR WASTE(S), INCLUDING BUT NOT LIMITED TO PETROLEUM PRODUCTS, PRESENT AT PROPERTIES IN THE VICINITY OF THE SITE, WHICH MAY POSE A HEALTH OR PHYSICAL HAZARD TO PERSONS EMPLOYED AT OR VISITING THE SITE?No

If yes, please provide specific information regarding all such material(s), substance(s) and/or waste(s) on a separate piece of paper.

21. IS THE PROJECT SITE WHOLLY OR PARTIALLY IN A STATE DESIGNATED TIDAL OR FRESHWATER WETLAND OR THE UPLAND BUFFER AREA OF SUCH A WETLAND?

Νo

22. DOES THE ACTION OCCUR WHOLLY OR PARTIALLY WITHIN, OR SUBSTANTIALLY CONTIGUOUS TO ANY HISTORIC BUILDING, STRUCTURE, FACILITY, SITE OR DISTRICT OR PREHISTORIC SITE THAT IS LISTED ON THE NATIONAL REGISTER OF HISTORIC PLACES OR THAT HAS BEEN RECOMMENDED BY THE NEW YORK STATE BOARD ON HISTORIC PRESERVATION FOR NOMINATION FOR INCLUSION IN THE NATIONAL REGISTER, OR THAT IS LISTED ON THE STATE REGISTER OF HISTORIC PLACES? FOR ASSISTANCE IN ANSWERING THIS QUESTION, YOU MAY WISH TO CALL THE NYC LANDMARKS PRESERVATION COMMISSION AT (212) 487-6782 FOR ASSISTANCE. No

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OR MY KNOWLEDGE

Applicant/Sponsor Name: Melvin Turfer Date 12/28/04

Signature: