

PROJECT APPLICATION

Confidentiality	AND COMPANY OF THE	图数46.31年75.36年9·北西蒙尔。东西中心名
"Certification" section IV of this be disclosed unless such inform indicate which information prov	Application). Under the New York Stration contains trade secrets (which, if ided in this Application constitutes tra	fidentially to the extent permitted by law (see ate Freedom of Information Law, information must disclosed, would cause irreparable harm). Please ade secrets with an explanation as to why in a letthe New York City Industrial Development Agency.
Are you applying for the:	Bond Program Small Industry Incentive Program Industrial Incentive Program	0
(SIIP, if annual revenues are le	ss than \$5 million and IIP, if annual re	evenues are greater than \$5 million)
By what date do you wish to ci	ose the proposed project financing?	December 1989
I. Applicant Information	THE RESIDENCE OF THE PARTY OF T	
Applicant's Name: MOU		
Address: 89-2	o looper Ave. GI	endale, New York 11385
Phone/Fax Numbers:		·
tS Employer ID Number		
S.I.C. Code:		
NY State Dept. of Labor		
Number (if applicable)		
Officer of Applicant completing	this application (contact person):	
Name: JAMES RUE	DA Title:_	PRESIDENT
Phone #:	Fax #:	
Applicant's operation: Man	Pomanea Seawes 60	
Brief description of business:	company services co	MMERCIAL CITATIS
for storage		
To describe what kind of entity	Applicant is, please check one of the	s following:
☐ Public Corp. ☐ Private Co	rp. General Partnership Limite Other (specify)	ed Partnership
Applicant's State of Incorporati States in which Applicant is qu	alified to do business:	States.
Applicant's Attorney: Name:	BRUCE CLARIO Pho	one #
m and Address:_		
Applicant's Accountant: Name:	TONY SERO_Ph	one #:
Firm and Address:_		-

II. PROJECT INFORMATION

	1.	Compan plans to 1	CUCKER THE MORELLE KNOWN, OL	
Lend & Building (Acquisition) New Construction Loans (Please Identify Sources) From England Renovations/Building Improvements Officer Equity/Loans Fees/Other Soft Costs Other (explain)	2.	Please give beat estimates for all antic		the
New Construction Loans (Please Identify Sources) Renovations/Building Improvements 7,000 Company funds Machinery/Equipment Officer Equity/Loans Fees/Other Soft Costs 50,000 Other Sources (Please Identify)	Line	and Funda	Sources of Funds	
Renovations/Building Improvements 7,000 Company funds Machinery/Equipment Officer Equity/Loans Fees/Other Soft Casts 50,000 Other Sources (Please Identify)	Lend	& Building (Acquisition)	Bonds	284.70
Machinery/Equipment Fees/Other Soft Casts SO,000 Other Sources (Please Identify) Other (explain)	Naw	Construction	Loans (Please Identify Sources)	w Ear
Fees/Other Soft Casts 50,000 Other Sources (Please Identify) Other (explain)	Ren	ovations/Building Improvements 75	000 Company funds	JAS 1
Other (explain)	Mac	hinery/Equipment	Officer Equity/Loans	
	Fees	/Other Soft Costs 50,	000 Other Sources (Please Identify)	
Total Project Costs Total Project Sources	Othe	or (explain)		
	Tota	Project Costs	Total Project Sources	

Please explain costs, loans and other sources of funding on a separate sheet.

3. Please provide the following information relating to the proposed project site.

& Section Number	Footspe of Land	Footage of Building	Owned or Leased	Floors including Basement	Zoning
9419	26,000	35,000	-	2	11-3
149	ds.				
	Hoch 9419	310ch 26,000	300ch 35,000 35,000	300cli 36,000 35,000 -	Building Besement Stock 25,000 - 2

4. Please provide the following information regarding all present and proposed tenant(s) and sub-tenant(s) at the proposed project site, their percentage of occupancy, and affiliation with the Applicant.

Name Contact & Phone	Affiliation with Applicant	Square Feet & Floors (Percent of Occupancy)	Lease Expiration	Tenant Business

5. Provide street address, borough or town, for premises which you currently own or lease, even if you don't occupy same. Do you plan to terminate/sell/vacate/remain at such premises? With respect to currently leased premises, provide the name and address of the landlord and the expiration date of the lease term. Please provide additional details on an attached sheet.

Property Location	Borough/ Town	Own/Lease	Landlord	Lease Expiration	Planned Disposition
89-20 Ceoper Ave	Queens	Leise	S. Ricci Service	month to	vacade
43-37 metropolitan Au		Lease	Bue Cong	month	Vacate

6.	Is there a relationship, by virtue of common control or through related persons, directly or
	indirectly, between the Applicant and the present owner of the project site?

D YES

NO If yes, please provide all details on attached sheet.

7. Will a real estate holding company, limited liability company, or partnership be formed to own the project or premises?

YES

If yes, please provide the name and address of same, the kind of entity (corporation, partnership, etc.), and its officers, partners, shareholders, members, and their respective percentage ownership, etc.

To follow

III. DUE DILIGENCE

1.	List name(s), address(es), and phone and fax numbers of any other entity in which, directly or indirectly, Applicant or any of its shareholders, partners, directors, or officers individually or
	collectively hold 5% or more of the stock or ownership interest (an "Affiliate"). Please include real estate holding companies if applicable.

Entity Name	Address	Phone/Fax Percent Interest
BJR Inc.		

2.	Has Applicant or any of its Affiliates ever received, or is currently receiving, financial assists or any other kind of discretionary benefit from any governmental entity or agency, including New York City Industrial Development Agency?	ance g the
	New York City Industrial Development Agency	

- TYES NO If yes, please provide all details on attached sheet.
- 3. Has the Applicant, or any existing or proposed tenant of the proposed project facility, or any person related to any of the foregoing, received or benefitted from within 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?
 - ☐ YES ☐ NO If yes, please provide all details on attached sheet.
- 4. Has Applicant, or any stockholder, partner, officer or director, or any entity with which any of the foregoing individuals have been associated, ever been adjudicated bankrupt or placed in receivership, or otherwise been the subject of a bankruptcy or similar proceedings (prior or current)?
 - TYES BNO If yes, please provide all details on attached sheet.
- 5. Have any of Applicant's stockholders, partners, officers or directors ever been convicted of any criminal proceedings?
 - ☐ YES ☐ NO If yes, please provide all details on attached sheet.
- 6. Is Applicant, or any stockholder, partner, officer or director of Applicant, a plaintiff or defendant in any civil or criminal proceedings?
 - YES □ NO If yes, please provide all details on attached sheet.

See Attached.

individua	sponded yes to the p is and entities current n attached sheet.				
	plicant have any cor ; judgment liens; oth		(e.g., pending cl	aims; federal, state	e or local
□ YES	NO If yes	s, please provide a	Il details on attacl	hed sheet.	
. Has App	licant filed all require	ed tax returns with	appropriate gove	mmental jurisdiction	ons entitie
■ YES	□ NO If no.	please provide all	details on attach	ed sheet.	
Yease provide t	ne following informat	ion:			
O. Compan	y Principals (please a	ttach a brief resur	ne)		
Name	Title	Address		Social Security Number	Date of Birth
James Rues	a Resident				
1. Major C	ustomers				
Company Nam	e Address		Phone/Fax	Contact Person	Percent of Sale
	Contract of the last of the la	A 1			
	See	Abuched			
	See	Abuched			
	See	Afteched			



INTERSTATE - LOCAL - OVERSEAS

DOT No. T10941 ICC No. MC242537

63-37 Metropolitan Ave., Middle Village, NY 11379 Tel.: 718-386-4151

89-20 Cooper Avenue, Glendale, NY 11385 Tel.: 718-997-6868 Fax: 718-997-9874

CUSTOMERS



2. Citibank Suzanne Lemarkis (Art Curator)



3. Lucy Peters International



4. Restaurant Associates





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SUPPLIERS

United Parcel Service
2. Eastern Seaboard Packaging
3. Explorer Transport
4. Victory Packaging
5. Yellow Book

12. Major Suppliers

Company Name	Address	Phone/Fax	Contact Person
	See Attached		

13. Unions

Union	Address	Phone/Fax	Contact Person	Contract Expiration
	NA			

4. Banks

Bank Name	Contact Person	Phone/Fax	Type of Account
Bank of N.Y			
9900 Metropoliter	Aut		
Forest Hills My			
1/37			

IV. CERTIFICATION

I, the undersigned, request on behalf of <u>Alma Semies Inc.</u> ("Applicant") that this Application, including financial data and any tax returns submitted herewith, be submitted for review by the Board of Directors of the New York City Industrial Development Agency ("IDA"). I hereby certify that the information contained herein and in the attachments hereto, are, to the best of my knowledge and belief, accurate, true and correct. I understand that any intentional misstatements or misleading information contained herein, or the omission of relevant information, could be cause for rescission of IDA approval and IDA benefits. Further, I fully understand and accept the fees associated with the IDA program, including but not limited to the IDA Closing Fee; I fully understand and accept the benefit package I am to receive under the IDA program; and I acknowledge receipt from the IDA of a memorandum explaining legal, insurance and various real estate related requirements, all of which will be necessary for the contemplated project.

On behalf of Applicant, I hereby acknowledge and agree that Applicant shall be, and is responsible for, and shall promptly pay all costs incurred by the IDA, in connection with document negotiations, closing and, where applicable, bond issuance and sale, whether or not closing occurs and whether or not bond issuance and sale occur in applicable instances. The aforesaid costs, and Applicant's obligation hereunder to pay for same, shall include, but not be limited to, attorney's fees. Applicant's obligations hereunder are absolute and shall in no event be contingent upon closing.

On behalf of myself, all other principals of Applicant, and Applicant, I hereby authorize the IDA and the New York City Department of Investigation (DOI) to initiate their background clearance procedure with respect to myself, all other principals of Applicant, and Applicant. I, all other principals of Applicant, and Applicant agree to give the DOI permission to secure all necessary personal data from all relevant sources, public and private, and I, all other principals of Applicant, and Applicant further agree to cooperate in all phases of the DOI background and clearance procedure. I, all other principals of Applicant, and the Applicant agree to hold the IDA and the City of New York harmless with respect to any claims for injury, damage, loss or expense which may arise should the above mentioned background clearance procedure not be completed satisfactorily.

In behalf of Applicant and its existing and future affiliates, I authorize any private or governmental entity, including but not limited to The New York State Department of Labor ("DOL"), to release to the IDA and/or to the New York City Economic Development Corporation ("EDC"), and/or to the successors and assigns of either (collectively, the "Information Recipients"), any and all employment information under its control and pertinent to Applicant and its existing and future affiliates and the employees of same. In addition, upon the IDA's request, Applicant shall provide to the IDA any employment information in Applicant's possession or in the possession of any of Applicant's existing and future affiliates, which is pertinent to Applicant and Applicant's existing and future affiliates and the employees of same. Information released or provided to Information Recipients by the DOL, or by any other governmental entity, or by any private entity, or by Applicant itself (collectively, "Employment Information"), may be disclosed by the Information Recipients in connection with the administration of the programs of the IDA, and/or EDC, and/or the successors and assigns of either, and/or the City of New York, and/or as may be necessary to comply with law; and, without limiting the foregoing, the Employment Information may be included in (x) reports prepared by the Information Recipients pursuant to New York City Local Law 69 of 1993, (y) other reports required of the IDA, and (z) any other reports required by law. If the IDA approves this Application and the IDA Board of Directors approves the financing project which is the subject of this Application, this authorization shall remain in effect through the term of the financial assistance documents which the Applicant and the IDA will enter into at closing. If the IDA does not approve this Application, and/or the IDA Board of Directors does not approve the project which is the subject of this Application, this authorization shall remain in effect through the earlier to occur of the aforesaid decisions not to approve.

I, all other principals of Applicant, and Applicant, understand that the IDA may be requested to disclose the information contained in this Application and the attachments hereto, under applicable disclosure laws, or at the request of investigative law enforcement or other governmental bodies. On behalf of myself, all other principals of Applicant, and Applicant, I authorize the IDA to disclose any such information, under such law or where so requested, and I, all other principals of Applicant and the Applicant release the IDA from any liability to the Applicant, all other principals, and/or myself for such disclosure. I also authorize the IDA at its discretion to transmit this Application, including any financial data or tax returns submitted herewith, to the IDA's financial advisors.

On behalf of Applicant, I acknowledge and agree that the IDA reserves the right to require Applicant to submit at Applicant's sole expense, such other documentation as the IDA may require in addition to the documentation required hereunder, and that all such documentation, whether requested hereunder or hereafter, shall be provided at Applicant's sole cost and expenses, and shall be in form and substance satisfactory to the IDA.

Approval of this Application may only be granted by the IDA's Board of Directors through the Board's adoption of an inducement or authorizing resolution for the project described in this Application. Additionally, it is understood and agreed that the \$2,500 Application fee accompanying this Application is non-refundable, regardless of whether or not this Application is so approved. Applicant acknowledges and accepts that: the \$2,500 Application fee will accrue toward payment of the IDA Closing Fee should closing occur; and if and when the IDA's Board of Directors approves this Application, the Agency may additionally require Applicant to pay at such time an amount equal to 1/10 of a percent of the bond/project amount (as applicable), which payment shall also accrue toward payment of the IDA Closing Fee should closing occur.

Date:

Certification By:

ture of Chief Executive Officer

Attested By:

Financial Officer/Secretary

JAMES RUEDA
Printed Name

Robert Meditz