

Lynette A. Jackson

9/10/86

FINANCIAL SERVICES CORPORATION
OF
NEW YORK CITY
APPLICATION FOR FINANCIAL ASSISTANCE

For Internal Use:
Date Issued: 1/26/88
Date Rec'd.: _____
Intake #: _____
RM: _____

INDUSTRIAL RETENTION & RELOCATION PROGRAM
ONLY

INFORMATION FOR APPLICANTS

Applications are considered on a first-come, first-served basis with complete applications being given priority; therefore, it is in your best interest to submit all required material as early as possible.

The information required herein is essential to determine the eligibility of a project for financial assistance and related benefits. Please answer all questions, and provide all information requested in the Schedules. Insert "NONE" or "NOT APPLICABLE", where necessary. If an estimate is given, put "EST" after the figure.

All information contained in this application will be treated confidentially, to the extent permitted by law. Under the Freedom of Information Law, FSC must provide access to documents unless they contain trade secrets which would cause you injury if they were disclosed. PLEASE IDENTIFY ANY INFORMATION FALLING UNDER THIS CATEGORY WHEN YOU SUBMIT YOUR APPLICATION.

Please note that you are required to notify FSC subsequent to the submission of your application of any development which might materially affect or change the information contained herein. Failure to do so could result in the nullification of the approval of this application.

This application applies only to the Industrial Retention and Relocation (IRR) Program. This application does not in any way entitle you to proposed benefits under the program. However, you must complete this application prior to signing or entering into any agreement to lease, purchase or otherwise occupy space in a new location. FAILURE TO COMPLETE THIS APPLICATION PRIOR TO ENTERING INTO AN AGREEMENT TO OCCUPY SPACE IN A NEW LOCATION WILL MAKE YOU INELIGIBLE FOR BENEFITS UNDER THE IRR PROGRAM.

In addition you must make your space available for measurement before you move your facilities. You must allow at least three (3) weeks for this verification. No verifications will be performed after you have relocated your facilities. No grants will be awarded without a completed verification.

FINANCIAL SERVICES CORPORATION OF NEW YORK CITY

APPLICATION

INDUSTRIAL RESTRICTION & RELOCATION PROGRAM

Applicant's Legal Name: RITE LITE NOVELTY CO.
Address: 946 McDonald Ave. City: _____
Brooklyn, NY 11218 Telephone No.: 718-436-7070

IRS Employer ID Number: _____ S.I.C. Codes _____

NY State Dept. of Labor Reg. Number: _____

Company Officer Completing This Application:

Name: Alex Rosenthal Title: President

Contact Person:

Name: Alex Rosenthal Telephone: _____

Referred by (specify): LARRY SOKOL Title: FSC PROJECT MANAGER Telephone: _____

1. How did you become aware of the IRR Program?

- Advertising (specify) NY MAFIC ADS
- Personal Referral (specify) _____
- Governmental Referral (specify) _____
- Other (specify) _____

2. Is the applicant as:

- Corporation: if yes, Public Private
- IF PUBLIC CORPORATION, on which exchange is it listed? _____
- State of incorporation _____
- Sole Proprietorship
- Partnership
- Subchapter S Corporation
- DISC
- Other (specify) _____

3. Date Established 1949

4. Is the applicant a) subsidiary of another corporation? b) the parent company to another corporation? affiliated with another corporation. If so, give name, address and phone contact of such parent, subsidiary or affiliated company. NO

Do you do business under any other name? If so, list below (i.e. trade name, d/b/a, brand name, etc.) and include a copy of the Certificate(s) of Incorporation.

NO

- 5. Have any of the applicant's principal stockholders or any partners, officers or directors ever been convicted of any criminal offense, other than a motor vehicle violation? YES () NO (✓)
If yes, please provide details on Schedule B.
- 6. Is the applicant, or any principal stockholder or any partner, officer or director presently a plaintiff defendant in any civil or criminal proceeding? YES () NO (✓)
If yes, please provide details on Schedule B.
- 7. Please list names, address and social security numbers of all directors, officers and shareholders owning class of out standing shares on Schedule A.

FAILURE TO ANSWER QUESTIONS #5 AND #6 ACCURATELY COULD RESULT IN THE IMMEDIATE TERMINATION OF THIS APPLICATION OR BENEFITS.

8. APPLICANT'S ACCOUNTANT

NAME OF FIRM: SAMUEL A. KAUFER

ADDRESS: [REDACTED]

CONTACT PERSON AND TITLE: SAM KAUFER

TELEPHONE NUMBER: [REDACTED]

9. APPLICANT'S ATTORNEY

NAME OF FIRM: ALLEN I. GROSS LAW OFFICE

ADDRESS: [REDACTED]

CONTACT PERSON AND TITLE: AARON STEIN - ASSOCIATE

TELEPHONE NUMBER: [REDACTED]

10. Applicant's Present Location(s) within the City of New York

	<u>ADDRESS</u>	<u>TOTAL GROSS SQ. FEET OCCUPIED INCLUDING BASEMENT</u>	<u>AVERAGE GROSS SQ. FEET PER FLOOR</u>	<u>PURPOSE FOR WHICH USED</u>	<u>OWNED RENTED</u>
1.	<u>946 McDonald Ave, Brooklyn, NY</u>	<u>5000 sq. ft.</u>	<u>2500 sq. ft.</u>	<u>WAREHOUSES, PRODUCTION SHIPPING + OFFICES</u>	<u>RENTED</u>
2.					
3.					

(a) FOR THOSE LOCATIONS RENTED BY APPLICANT:

<u>NAME OF LESSEE AND ADDRESS OF LEASED PREMISES</u>	<u>PERIOD OF OCCUPANCY</u>	<u>LEASE COMMENCEMENT AND LEASE TERMINATION DATE</u>	<u>ANNUAL RENTAL EXCLUDING TAXES AND UTILITIES</u>	<u>REAL ESTATE TAXES PAID UNDER LEASE</u>	<u>COMMERCIAL OCCUPANCY TAX</u>	<u>TOTAL</u>
1. RITE LITE NOVELTY CO. 946 McDonald Ave. Brooklyn, NY	9 months	7/1/87 3/31/88	36,000	—	2160-	38,160-
2.						
3.						

(b) FOR THOSE LOCATIONS RENTED (continued):

<u>NAME OF LESSEE AND ADDRESS OF LEASED PREMISES</u>	<u>NAME AND ADDRESS OF LANDLORD</u>	<u>TELEPHONE NO.</u>
1. RITE LITE NOVELTY CO. 946 McDonald Ave, Brooklyn, NY	DECS-WARE INC. 944 McDonald Ave, Brooklyn, NY	
2.		
3.		

Only firms engaged in an eligible use as defined by the program criteria and leasing from an entity owning it which has no relationship to the lessee are eligible.

11. If approval of this application is obtained, Applicant will relocate its operations from which of its present location(s).

946 McDonald Ave. Brooklyn, NY

12. Indicate applicant's projected moving date.

March 21, 1988

13. BUSINESS DESCRIPTION

Describe fully the nature of applicant's business and the principal product produced and/or services performed.

Manufacture & assembly of brass giftware + wholesale distribution of SAME.

14. RELOCATION INFORMATION

Provide the following information relating to applicant's relocation site.

<u>ADDRESS</u>	<u>BLOCK, LOT AND CENSUS NUMBER</u>	<u>SQUARE FOOTAGE TO BE OCCUPIED</u>	<u>ANNUAL RENT INCLUDING TAXES AND UTILITIES*</u>	<u>NUMBER OF FLOORS TO BE OCCUPIED INCLUDING BASEMENT</u>	<u>ENDING</u>	<u>RENTED OR OWNED</u>	<u>IF RENT LENGTH OF LEASE</u>
260 47th St. Brooklyn, NY	BL-763 LOT 37	10,000	PURCHASE	3	M-1	OWNED	

15. For what purpose was applicant's relocation site most recently used (e.g. light manufacturing, heavy manufacturing, assembly, etc).

light manufacturing

16. Will relocation site be leased by Applicant? YES () NO (✓)

If YES, indicate present lessor/owner of your relocation site:

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

* If annual rent is not broken out so as to exclude taxes and utilities please provide a reasonable estimate and mark the answer to this question "Estimate."

17. Will a real estate holding company, partnership or other such entity be formed or involved in the proper ownership or lease of the relocation site? YES () NO (✓)

If YES, please explain.

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

OWNERS: _____

PERCENTAGE OF OWNERSHIP: _____

18. To applicant's knowledge, is there any legal impediment (e.g. Zoning) to housing your company's operations at the relocation site. If yes, please explain fully.

NO

19. If the business operations at the relocation site will require any local ordinance or variance to be obtained or requires a permit or prior approval of any local, state or federal agency or body other than normal occupancy/construction permits), including apportionment of any lot, please specify.

<u>TYPE</u>	<u>CONTACT PERSON & TELEPHONE NUMBER</u>	<u>EXPECTED APPROVAL DATE</u>

20. Is the applicant currently a tenant in the building to be occupied?

YES () NO (✓)

a. If YES, how many additional square feet will the applicant occupy?*

21. Is Applicant planning to use the entire proposed facility?

YES (✓) NO ()

a. If NO, what percentage will applicant initially occupy _____ %

* Provide total usable square feet.

22. TENANTS AND SUB-TENANTS - FOR OWNER OCCUPANTS ONLY

(a) Give the following information with respect to all present tenant(s) and sub-tenants at the relocation site.

<u>NAME OF TENANT CONTACT PERSON & TELEPHONE NUMBER</u>	<u>NATURE OF TENANT'S BUSINESS</u>	<u>NO. OF JOBS</u>	<u>SQUARE FEET & FLOORS OCCUPIED</u>	<u>LEASE EXPIRATION DATE/RENEWAL OPTIONS</u>
/				

(b) Please indicate which of the above tenants, if any, will vacate applicant's initial use of the facility.

(c) Have the above tenants been notified that they will be required to vacate the premises? YES () NO ()

23. ESTIMATED RELOCATION COSTS

- a. Physical relocation \$
 - b. Disassembly of equipment \$ 5,000.-
 - c. Reassembly of equipment \$ 5,000.-
 - d. Leasehold Improvements \$
- Totals \$

24. Would applicant be interested in having an engineer experienced in construction and energy conservation at both applicant's existing site and your relocation site to determine what your new energy costs will be and, what, if anything, can be done to reduce these costs?

Yes ✓ NO

25. Would applicant be interest on having a police officer experienced in crime prevention survey the relocate site to determine what applicant's security needs will be in anticipation of a possible grant for security costs from the Public Development Corporation?

Yes ✓ NO

CERTIFICATION

I, the undersigned, request that this application be submitted for review. I hereby certify that the information contained herein and the attachments hereto, are to the best of my knowledge and belief accurate and descriptive of the project requesting assistance. I understand that intentional misstatements or misleading information contained herein could be cause for rescission of approval and benefits.

I hereby consent and agree that FSC may at its discretion disclose any information with respect to Applicant as may be required or appropriate in any respect, in statements or testimony submitted to any municipal, state or federal regulatory body having or claiming to have jurisdiction over FSC.

AUTHORITY TO COLLECT AND DISCLOSE EMPLOYMENT INFORMATION

I authorize any private or governmental entity, including but not limited to the New York State Department of Labor, to release to the Financial Services Corporation of New York City or its successor or assigns, any and all employment information in its control relating to the Applicant and any and all of its existing or future affiliates and subsidiaries. FSC may disclose the information in connection with the administration of its program.

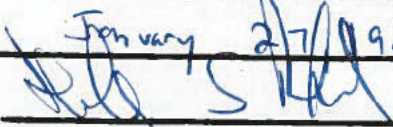
ACKNOWLEDGEMENT OF RECAPTURE PROVISIONS

I have been fully informed of the actions I or the Company may take which would result in an obligation to repay the benefits received under this program.

By: 
Signature of Chief Executive Officer

Type Name and Title: ALEX ROSENTHAL - PRESIDENT

Date: January 27/1988 1/27/88

Attested By: 
Signature of Chief Financial Officer/Secretary, or Notary Public

SCHEDULE B - All Programs

Management Information

Provide a biography or resume on all individuals listed in Exhibit A. Include business experience, education, position in company, employment history, length of association with company and any outside directorships. Please provide information on secondary management as well.

Alex Rosenthal

Born 1/23/56 graduated high school 1973, received B.A. in 1976. ATTENDED MASTERS OF BUSINESS PROGRAM FOR 37 CREDITS BEFORE DROPPING OUT TO JOIN FAMILY BUSINESS AS A RESULT OF AN ILLNESS OF A FAMILY MEMBER IN 1979. HAS BEEN A PARTNER IN THE BUSINESS SINCE 1981 & IS RESPONSIBLE FOR ALMOST THE ENTIRE OPERATION INCLUDING SALES, FINANCE & PRODUCTION.

Jacob Rosenthal

Born 3/29/09 in Hungary he completed high school and went into the lumber business eventually owning his own lumberyard. After surviving the Holocaust, he began producing brass giftware in N.Y. in 1948. Today he is still active in the business, mainly in the production end.

SCHEDULE C

Please attach copies of two estimates from licensed moving companies detailing all moving costs associated with the physical relocation of machinery, equipment, supplies, and inventory. Please have the estimates broken down to reflect separately the cost of disassembly of equipment, moving and reassembly. Also note that two estimates are required for each type of activity.

SCHEDULE D

Please attach a copy of applicant's most recent payroll, and of applicant's last eight consecutive quarters IA5 or IA5a "Employer's Report of Contributions" as submitted to the New York State Department of Labor Unemployment Insurance Division.

Is the payroll submitted typical of your employment during the past year? If not, what was your average employment last year?

~~no~~ ABOUT . 20% lower than this.

Is the payroll submitted the same as your projected employment at your new location for the next year? If not, what does applicant expect its average employment to be next year?

I expect to add about 5 people to the payroll.

SCHEDULE E

Please attach copies of the leases and/or deed relating to applicant's current location(s) covering at least the previous two years. Also attach an unsigned copy of the new lease covering the five (5) year requirement.

Dated: _____

RIDER TO APPLICATION

The Applicant represents and warrants that, to the best of its knowledge, neither it nor any of its substantially owned subsidiaries have, since July 13, 1985, sold or agreed to sell, and shall not during the term of any loan, grant or other financial assistance that it may receive from The City of New York or the Financial Services Corporation of New York City sell or agree to sell, goods or services, other than food or medical supplies, directly to the South African police, military, prison system or the department of cooperation and development or directly to a corporation owned or controlled by the South African government and established expressly for the purpose of procuring such goods and services for the aforesaid agencies.

The Applicant represents and warrants that, to the best of its knowledge, neither it nor any of its substantially owned subsidiaries have, since July 13, 1985, violated nor will they during the term of any loan, grant or other financial assistance that it may receive from The City of New York or the Financial Services Corporation of New York City violate the Export Administration Act of 1979, as amended, or the Arms Export Control Act of 1976 as amended, by unlawfully exporting or reexporting goods to the Republic of South Africa or Namibia.

By: *Alex Rosenthal*
Signature of Chief Executive Officer

Alex Rosenthal
Type Name and Title

3/14/88
Date

Rayle Dewoz
Attested By