



New York City  
Industrial Development Agency



# BENEFITS APPLICATION

Applicant Name: Coda Resources Ltd. (R/E Holding Company is: LADS AVENUE ASSOCIATES LLC)	
Name of operating company (if different from Applicant):	
Operating Company Address: 960 ALABAMA AVENUE BROOKLYN NY 11207	
Website Address: <a href="http://www.codaresources.com">www.codaresources.com</a> ; <a href="http://www.cambridgeresources.com">www.cambridgeresources.com</a>	
EIN #: <span style="background-color: black; color: black;">XXXXXXXXXX</span>	NAICS Code: 423990
State and date of incorporation or formation: NY 1947	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 type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Natural Person
<input type="checkbox"/> C Corporation	<input checked="" type="checkbox"/> S Corporation
<input type="checkbox"/> 501(c)(3) Organization	<input type="checkbox"/> Other: _____
Are any securities of Applicant publicly traded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

### Applicable Program (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.

Bond Programs	Incentive Programs
<input type="checkbox"/> Manufacturing Facilities Bonds (Please complete Manufacturing Questionnaire under Supplementary Forms)	<input checked="" type="checkbox"/> Industrial Incentive (IIP)
<input type="checkbox"/> Not-For-Profit Bonds	<input type="checkbox"/> Industrial Developer
<input type="checkbox"/> Exempt Facilities Bonds	<input type="checkbox"/> Commercial Growth

### Applicant Contact Information

	Name/Title	Company	Address	Email	Phone
Applicant Contact Person	Baruch Travitsky	Coda Resources	960 Alabama Avenue	<a href="mailto:btravitsky@codaresources.com">btravitsky@codaresources.com</a>	
Attorney	Andrew Greene	Andrew Greene & Associates P.C.	202 Mamaroneck Avenue, White Plains, NY 10601	<a href="mailto:ag@aglaws.net">ag@aglaws.net</a>	
Accountant	Steve Lepselter	Jaekle, Kearney & Lepselter	233 Seventh Street, Suite 201 Garden City NY 11530	<a href="mailto:stevel@jklcpas.com">stevel@jklcpas.com</a>	
Consultant/Other					

**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

**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								
Construction Soft Costs								
Fixed Tenant Improvements								
Machinery Furnishings and/or Equipment								
Debt Service Reserve Fund								
Capitalized Interest								
Costs of Issuance								
Fees (explain):								
Other (explain)								
<b>Total Sources</b>								

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 checked="" type="checkbox"/> New York City	% of Total?	100
<input type="checkbox"/> New York State (excluding NYC)	% of Total?	
<input type="checkbox"/> United States (excluding NYS & NYC)	% of Total?	
<input type="checkbox"/> Outside United States	% of Total?	
<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: 3-4387-1	Street address and zip code: 960 Alabama Avenue 11207 (A/K/A/ 906 Wortman Avenue 11207)
Zoning: F2	Number of Floors: 2
Square footage of existing building:	Square footage of land: 100,000
Anticipated square footage of building following construction and/or renovation: 100,000	Anticipated square footage of non-building improvements following construction and/or renovation (i.e., parking lot construction): 100,000
Intended use(s) of site (check <u>all</u> that apply): <input type="checkbox"/> Retail <input checked="" type="checkbox"/> Manufacturing/Industrial <input checked="" type="checkbox"/> Office <input type="checkbox"/> Non-profit For ALL USES other than Non-profit or Retail, please also complete <b>Energy Questionnaire</b>	
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. <b>SEE Explanation – Attachment # 2</b>	

**Anticipated Ownership of Premises**

1. Please check all that 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: 12/31/2013
<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 checked="" 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: LADS ASSOCIATES LLC	EIN # of Affiliate: [REDACTED]
Address of Affiliate: 960 Alabama Avenue; Brooklyn NY 11207. A/K/A 906 Wortman Avenue; Brooklyn, NY 11207	
Affiliation of Affiliate to Applicant: R/E Holding Company of Operating Company	
Contact Person: Baruch Travitsky	Title of Contact Person: CFO
Phone Number(s): 718 649-1666	

**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.

1. Anticipated Facility Operations Start-Date: Before 12/31/2013
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):  Full-time (working 35 or more hours per week):
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):  Full-time (working 35 or more hours per week):

How many of these employees are expected to be relocated to the Project Location on or about the Facility Operations Start Date? N/A

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

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	3	4	5	6	7	Total New Growth
Permanent Full-time	57	58	59	60	60	62	63	
Permanent Part-time	0	0	0	0	0	0	0	

**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 **not include** compensation paid to Principals. Please note this information is required to be provided to the Agency on an annual basis.

1. If employees are to be relocated on the Facility Operations-Start Date, what will be the average annual compensation per relocated employee?  
 Part-time: N/A Full-time:
2. With regard to the employees currently employed at the Project Location, what is the current average annual compensation per employee?  
 Part-time: 10,000 Full-time: 66,000
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: Full-time: 50,000
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:  
 Annual salary of highest compensated part-time employee:  
 Annual salary of lowest compensated part-time employee:

**Full-Time**

Average annual compensation per employee: 60,000  
 Annual salary of highest compensated full-time employee: 80,000  
 Annual salary of lowest compensated full-time employee: 30,000

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.

We offer generous health insurance – currently Oxford which we cover 80% of the deductible and 80% of the premium cost based on single coverage. We offer a 401(k) plan with a discretionary 25% match that we've historically made the past 5 years. We offer an FSA and transit program and general training for our software platform.

**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. **See Attachment # 3**
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. See attachment # 4
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 above
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
Ranir	PO Box 8877 Grand Rapids, Michigan	Dan Nowak			<a href="mailto:Dan.nowak@ranir.com">Dan.nowak@ranir.com</a>	17%
JCP	PO Box 689 Salt Lake City, UT 84110	Paula Wenger			<a href="mailto:pprice@jcp.com">pprice@jcp.com</a>	4.5%
NAPA / Balkamp	2601 S Holt Rd Indianapolis, IN	Brad Goodfellow			<a href="mailto:bgoodfellow@balkamp.com">bgoodfellow@balkamp.com</a>	6.5%
WATSCO	2665 S Bayshore Drive Miami, FL 33133	Edward Mendelsohn			<a href="mailto:emendelsohn@watsco.com">emendelsohn@watsco.com</a>	4%

8. List major suppliers:

Company Name	Address	Contact	Phone	Fax	Email
Generate Rise	No 1 Da Zhi Lane Taichung Hsien Taiwan	Ms. Doreen			<a href="mailto:service@jing-gi.com">service@jing-gi.com</a>
China Golden	2 Ice House St St George's Building Central HK	Miki Lai			
Jet Success	Thailand	Grace Kuo			<a href="mailto:Grace.kuo@hwlok.com">Grace.kuo@hwlok.com</a>
T&G Corp	Renaissance Tower Seoul, Korea	Mr. Kim			<a href="mailto:tnqwk@netsgo.com">tnqwk@netsgo.com</a>

9. List major Funding sources (if applicable):

Company Name	Address	Contact	Phone	Fax	Email

10. List unions (if applicable):

Union Name	Address	Contact	Phone	Fax	Email

11. List banks:

Bank Name	Address	Contact	Phone	Fax	Email	Account Type and Number
Signature Bank	1225 Franklin Avenue Garden City, NY 11530	Bruce Watterson	[REDACTED]	516 408-5018	<a href="mailto:bwatterson@signatureny.com">bwatterson@signatureny.com</a>	Checking 1500452885

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, 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 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; 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:

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 indemnittees 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.

Requested, Represented, Certified, Acknowledged, Understood and Agreed by Applicant,

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 20 day of February, 2013. \_\_\_\_\_

This day of , 20 .

Name of Applicant: Coda Resources

Name of Preparer: \_\_\_\_\_

Signatory: Baruch Travitsky

Signatory: \_\_\_\_\_

Title of Signatory: CFO

Title of Signatory: \_\_\_\_\_

Signature: 

Signature: \_\_\_\_\_



### Core Application Background Information

Coda Resources Ltd. is a third generation American company headquartered in New York City. Over the past sixty five + years, CODA has developed a sterling reputation for integrity and honorable business practices by providing high quality products with quality customer service.

Today, we focus on providing distribution services with inventory stock & management systems, full-service customized contract manufacturing and supply chain support as well as Coda's branded products which are sold under our name or the name of our DBA, Cambridge Resources, or as privately labeled products. Distribution services are typically provided to large retailers such as Federated and JCP. Product lines include disposable oral care products, industrial products including: cable ties, hose clamps, electrical connectors, web strapping and other products. Industries serviced include: Oral Care, HVAC, Plumbing, Auto Sales, Electrical and Retail. Many of Coda's industrial products are also sold under the licensed Stanley name.

CODA's revolutionary Flexible Manufacturing Dynamic Sourcing service makes it possible for our clients to get to market faster, with better product, and at lower costs than their competition.

The backbone of CODA Resources is our diversified team of business professionals, including an experienced staff of engineering, production, and logistics specialists. This blend of expertise enables us to provide world class management as we strive each and every day to bring the highest levels of professionalism and thoroughness to meet our clients' needs.

Coda's main competitors in the Industrial products sold are:

Bay State Cable Ties (Crestview, Florida)  
Gardner Bender (Milwaukee, Wisconsin)  
Thomas & Betts Corporation (Memphis, TN)

In the Oral care industry, our main competitors are:

Lede (Shanghai, China)  
Lerc (Ningbo, China)  
AlSCO (Sturbridge, Massachusetts)

### **Core Application Attachment # 1**

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.

We would like to modernize our operations as well as create a more competitive business environment. To achieve this we would like to install a 400 KW PhotoVoltaic Solar Panel on our roof. At the same time we will repair the roof as assessed by the onsite engineers and solar installation team. We will also update our entire 100,000 sq ft warehouse with Fiber Optic Cabling, LC/PC Duplex MutiliMode Cabling and Wireless Routers to allow for a modernized Inventory System. We will build and modernize new offices within our warehouse. We will update our IT systems, Hardware as well as Software.

2. Please provide a brief description of how the proposed Project will affect current operations.

The project will allow us to remain in NYS and prevent us from moving to a currently empty facility which we own in Burgaw, NC. It will allow us to reduce our operational utility costs for running our operations and add a new updated software system we are planning for the coming year to allow us to effectively compete and continue to grow in new product lines and industries.

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

- a) 400 KW POLYCRYSTALLINE SOLAR MODULE SYSTEM, with Inverter and commercial solar monitoring system.
- b) Fiber Optic Cable Runs to Connect all our offices with higher speed and transmission capability.. Rewire for upgraded phone, internet and network connectivity with Plenum rated wiring. We are updating our IT infrastructure which will be facilitated by the connectivity upgrades as well.
- c) Create additional office space and build a new showroom and inventory management center

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

Begin work & construction in the middle of April and complete before year end.

**Core Application Attachment # 2**

The projects will serve to enhance the building described and the operating entity (applicant). There is a related additional tenant that occupies around 1/3 of the building location named Lifestyle Forms. That tenant, a NY based manufacturer of mannequins, is not paying for these investments or designed to be the primary beneficiary of the expenditures to be incurred. However, some of the energy savings anticipated will ultimately pass through to that beneficiary.

**Core Application Attachment # 3**

Coda Resources was selected for a random audit to examine the 2010 through present books by the NYS DOL UI Tax Division to ensure the integrity of the Unemployment Insurance Fund. The audit began around 2 weeks ago, and as of this date it seems like there have been no issues identified and the auditor responsible for that audit has been satisfactorily responded to on all questions and requests.

**Core Application Attachment # 4**

Coda Resources and the Tropper family in the ordinary course of business have received Empire Zone certification for their business in the past. They have also received SBA loans on a related entity and are applying for various Federal, State and City incentives for the projects being embarked upon at this time.

617.20  
**Appendix C**  
**State Environmental Quality Review**  
**SHORT ENVIRONMENTAL ASSESSMENT FORM**  
**For UNLISTED ACTIONS Only**

**PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)**

1. APPLICANT/SPONSOR Coda Resources Ltd.	2. PROJECT NAME PhotoVoltaic System Installation
3. PROJECT LOCATION: Municipality <u>NY</u> County <u>KINGS</u>	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <u>960 Alabama Avenue; Brooklyn, NY 11207</u> <u>Corner of Cozine &amp; Alabama Avenues</u>	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: <u>Installation of 400KW PhotoVoltaic System on Roof</u>	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres    Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe:	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p style="text-align: center;">I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE</p> Applicant/sponsor name: <u>Baruch Travitsky</u> Date: <u>2/20/2013</u> Signature: _____	

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment**



**PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)**

<p>A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, coordinate the review process and use the FULL EAF.</p>
<p>B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? <input type="checkbox"/> Yes <input type="checkbox"/> No                  If No, a negative declaration may be superseded by another involved agency.</p>	
<p>C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)</p> <p>C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:</p> <p>C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:</p> <p>C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:</p> <p>C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:</p> <p>C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:</p> <p>C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:</p> <p>C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:</p>	
<p>D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:</p>	
<p>E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain briefly:</p>	

**PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)**

**INSTRUCTIONS:** For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

- Check this box if you have identified one or more potentially large or significant adverse impacts which **MAY** occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.
- 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 **AND** provide, on attachments as necessary, the reasons supporting this determination.

2/20/2013

\_\_\_\_\_  
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)

