

**COUNTIES OF WARREN AND WASHINGTON
INDUSTRIAL DEVELOPMENT AGENCY**

APPLICATION TO PURCHASE REAL PROPERTY

**TO: COUNTIES OF WARREN & WASHINGTON
INDUSTRIAL DEVELOPMENT AGENCY
Attn.: Contracting Officer
5 Warren Street, Suite 210, Glens Falls, NY 12801**

Tel. and Fax#: (518) 792-1312
WEBSITE: www.warren-washingtonida.com

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

CONTACT PERSON FOR APPLICANT WITH RESPECT TO THIS APPLICATION:

TELEPHONE NO.: _____ **FAX NO.:** _____

E-MAIL ADDRESS: _____

IF APPLICANT REPRESENTED BY AN ATTORNEY, COMPLETE THE FOLLOWING:

NAME OF ATTORNEY: _____

FIRM NAME: _____

ATTORNEY'S ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TELEPHONE NO.: _____ **FAX NO.:** _____

E-MAIL ADDRESS: _____

NOTE: **PLEASE READ THE INSTRUCTIONS ON PAGE 2
BEFORE FILLING OUT THE REST OF THIS FORM.**

APPLICATION INSTRUCTIONS TO PURCHASE PROPERTY FROM THE AGENCY
(Pursuant to WWIDA Guidelines and Procedures Manual)

1. The Agency will not approve any application to purchase unless, in the judgment of the Agency, said application contains sufficient information upon which to base a decision; whether to approve or tentatively approve the project contemplated therein.
2. Fill in all blanks, using "none" or "not applicable" or "N/A" where the question is not appropriate to the project which is the subject of the application.
3. If an estimate is given as the answer to a question, put "(est.)" after the figure or answer.
4. If more space is needed to answer any specific question, attach a separate sheet, and so state on the application form.
5. If the information necessary to respond to a particular question is unknown at the time of submittal of the application, so indicate in the appropriate space(s) on the application.
6. **SEQRA:** The Agency will not give final approval to the application until the Agency receives a completed Environmental Assessment Form (EAF) concerning the project which is the subject of the application. [Forms may be obtained on the Agency's website or by contacting the Agency Office].

7. **SITE PLAN:**

Prior to closing, a site plan must be submitted to the Agency for approval showing:

- a. Building outline and exterior dimensions.
 - b. Vehicular circulation
 - c. Provisions for parking.
 - d. Provisions for loading.
 - e. Provisions for unpaved open space (not specified in 7 b, c, d)
 - f. Provisions for landscaping of all areas.
 - g. Locations and dimensions of any appurtenant structures.
 - h. Distances of all site improvements from property lines (setbacks).
 - i. Provisions for handling storm runoff including erosion and flood control.
8. When completed, **return six (6) copies of the application, the EAF, and any supporting documentation** to the Agency at the address indicated on the first page of the application.
9. **The applicant will be required to pay to the Agency all actual costs incurred in connection with the application and the transaction contemplated herein, including the Agency's legal fees.**

10. Failure to develop the property in accordance with the terms of the sales contract will result in reversion of title to the Agency.

I. INFORMATION CONCERNING PERSON(S) TO WHOM THE AGENCY IS TO SELL THE PROPERTY (HEREINAFTER REFERRED TO AS THE "COMPANY")

A. Company name: _____
Present Address: _____
City: _____ State: _____ Zip: _____
Employer's I.D. No.: _____

B. If the Company differs from the Applicant, give details of relationship:

C. Indicate type of business organization of Company:

____ Corporation
Type of Corporation: _____
Country incorporated in: _____
State incorporated in: _____
Date incorporated: _____
Date authorized to do business in New York: _____

____ Limited Liability Company (LLC)
Type of LLC: _____
State organized in: _____
Date organized: _____
Number of members: _____

____ Partnership
Type of Partnership: _____
State organized in: _____
Date organized: _____
Number of general partners: _____
Number of limited partners: _____

____ Sole Proprietorship
D/B/A, if any: _____
Name of Owner: _____
Has a Certificate of Doing Business under an Assumed Name been filed?
If so, where?: _____

D. Is the Company a subsidiary or indirect affiliate of any other organization(s)?

Yes No

If "yes," please indicate name of related organization(s) and relationship:

E. 1. **Management of Company:** List all owners, officers, directors, members and/or general partners (complete all columns for each person):

Name	Address	Office Held	Other Principal Affiliations

E. 2. **Company's Principal Bank(s):**

II. DATA REGARDING PROPOSED PROJECT

A. **Description of the Property:**

1. Street address: _____
2. Tax Map Number: _____
3. Size of Parcel: _____
4. Lot Number on Field Map: _____

Are there any variances or special permits needed? Yes No

If yes, list below and attach copies of all such variances or special permits:

B. **Provide a brief narrative description of the proposed development of the Property:**

C. **Buildings:**

1. Indicate number and size of new buildings:

2. Describe the principal uses to be made by the Company of the building or buildings to be constructed:

D. What are the **principal products** to be produced at the Project?

E. What are the **principal activities** to be conducted at the Project?

F. Who will be the **primary suppliers and vendors** for the products or services to be produced at the facility?

G. **Construction time table:**

1. When will construction of this Project commence?

2. When will construction be completed?

H. **Indicate the projected amount of funds to be expended on this Project by the Company in the next three years and the purposes of such expenditures:**

III. EMPLOYMENT IMPACT

A. Indicate the number of people that will be employed at the Project at the end of the first, second and third years after the Project has been completed (do not include construction workers).

TYPE OF EMPLOYMENT **Full time means 30 hours or more per week.*

	Professional/ Managerial/ Technical	Skilled	Unskilled/Semi- skilled	Totals
Present Full Time*				
Present Part Time				
Present Seasonal				
PRESENT TOTAL				
First Year Full Time				
First Year Part Time				
First Year Seasonal				
FIRST YEAR TOTAL				
Second Year Full Time				
Second Year Part Time				
Second Year Seasonal				
SECOND YEAR TOTAL				
Third Year Full Time				
Third Year Part Time				
Third Year Seasonal				
THIRD YEAR TOTAL				

B. Indicate the number of construction workers likely to be employed:

C. Who will be the General Contractor to be used for this project?

D. What efforts will be made to hire local construction workers?

IV. PROJECT COST/FINANCING

A. State the costs reasonably necessary for the acquisition of the Project site and the construction of the proposed Project including the acquisition and installation of any machinery and equipment, necessary or convenient, in connection therewith, including any utilities, access roads, or appurtenant facilities, using the following categories:

DESCRIPTION OF COST

LAND	\$
BUILDINGS	
MACHINERY & EQUIPMENT	
FURNITURE & FIXTURES	
UTILITIES, ROADS and APPURTENANT COST	
ARCHITECTS & ENGINEERING FEES	
LEGAL FEES	
BANK FEES	
CONSTRUCTION LOAN FEES & INTEREST	
OTHER (Specify)	
TOTAL PROJECT COST:	\$

B. Has the applicant already made application for Bank financing?

Yes No

If yes, indicate name of Bank: _____

C. Amount of loan requested: _____ Dollars

D. Attach copy of Bank commitment, if available (must be supplied prior to closing).

V. **PRELIMINARY ENVIRONMENTAL QUESTIONS**

1. Number of square feet to be paved: _____

2. Is any outside storage or are outside operations planned:

Yes No

If "Yes", please describe: _____

3. Planned hours of operations: _____ to _____

4. Number of days per week of operation: _____

5. Maximum # of motor vehicles trips generated per day: _____

6. How many acres of vegetation (trees, shrubs, ground cover) will be removed from the site? _____

7. Will the project routinely produces odors? Yes No

If "Yes", please describe: _____

8. Will project produce operating noise exceeding the local ambient noise levels?

Yes No

If "Yes", please describe: _____

9. Will any hazardous material be used in or produced by the operation?

Yes No

If "Yes", please explain: _____

VI. **COVENANTS AND RESTRICTIONS**

Applicant acknowledges receipt of the Declaration of Covenants and Restrictions for the Airport Industrial Park and agrees to comply with the terms thereof.

[Signature Pages Follows]

IN WITNESS WHEREOF, the Applicant has duly executed the Application

this _____ day of _____, 20 ____.

(Name of Applicant)

By: _____
(Signature/Office held)

ATTACHMENTS:

- ___ Completed EAF Form
- ___ Site Plan, if available, as per instructions
- ___ Bank Commitment, if available
- ___ Supporting documents, if any
- ___ Other: _____

Additional Narrative or Comments:

