

FORM APPLICATION FOR FINANCIAL ASSISTANCE

TOWN OF HEMPSTEAD INDUSTRIAL DEVELOPMENT AGENCY

PROJECT APPLICATION

11/19

DATE: 5/4/2020		
APPLICATION OF:	NovaPark LLC	
	Name of Owner a	nd/or User of Proposed Project
ADDRESS:	51 Charles Lindbergh E	Blv'd
	Uniondale, NY 11553	
CONTACT:	Itzhak Goldberg	
PHONE NUMBER:		
EMAIL ADDRESS:		
FAX NUMBER:		
Type of Application:	☐ Tax-Exempt Bond	☐ Taxable Bond
Type of Application.	Li Tax-Exempt Donu	i axable bond
		☐ Refunding Bond
	☐ Special S	Straight Lease

Part I: Owner & User Data

1. Owner Data:

A	. Owner (Applicat	nt for assistance): NovaPark LLC	
		Charles Lindbergh Blvd	
	-	iondale, NY11553	
	Federal Emp	loyer ID #:	Website:
	Title of Offic	ertifying Application:tlzhak Goldbooker:	erg E-mail:
В.	Business Type:	orship □ Partnership □	
C.	Public Corpo State of Incor	ration Listed on poration/Formation: Section Delaware poration/Formation: industry"; "distributo	
D.	Owner Counsel: Firm Name: Address:	Certilman Balin Adler & Hyman 90 Merrick Ave, 9th Floor East Meadow, NY 11554 Daniel J. Baker	
	Individual At	torney:	
	Phone Number	et	E-mail:
E.	Principal Stockho	olders, Members or Partners, if any, or	f the Owner (5% or more equity):
		Name	Daysont Oxygad

	Angion Biomedica Corp	10%				
	Rina Kurz / Itzhak Goldberg	45% / 45%				
F.	Has the Owner, or any subsidiary or affiliate of the Owner, or any stockholder, partner, member, officer, director or other entity with which any of these individuals is or has been associated with: i. ever filed for bankruptcy, been adjudicated bankrupt or placed in receivership or otherwise been or presently is the subject of any bankruptcy or similar proceeding? (if yes, please explain)					
	ii. been convicted of a felony, or motor vehicle violation)? (if yes,	misdemeanor, or criminal offense (other than a please explain)				
G.	If any of the above persons (see "E", abo interest in the Owner, list all other organizat such persons having more than a 50% interes NO	ve) or a group of them, owns more than 50% ions which are related to the Owner by virtue of st in such organizations.				
Н.	Is the Owner related to any other organization so, indicate name of related organization and NO	n by reason of more than a 50% ownership? If relationship:				
I.	List parent corporation, sister corporations an None	nd subsidiaries:				
	prior industrial development financing in th	or person) been involved in or benefited by any e municipality in which this project is located, Municipality herein means city, town or village,				

	county in which it is located.)	corporated city, town If so, explain in full	or village, the unincorporated areas of the:
	TOH IDA PILOT 2012-202	2 Angion Biomedica	a/NovaPark
	for the subject premises		
K.	List major bank references of	the Owner:	
	Alliance Bernstein		
	CitiBank		
nd the us	applicants for assistance or wher)**		relationship will exist between the owner
2 1.	Address:		
	Federal Employer ID #:		
	NAICS Code:	-	
	User Officer Certifying Applic	cation:	
	Title of Officer:		
	Phone Number:		E-mail:
В.	Business Type:		
В.	Business Type: Sole Proprietorship	Partnership □	Privately Held
B.	•	•	Privately Held
B.	Sole Proprietorship	Listed on _	-

i. If yes, the remainder of the questions in this Part I, Section 2 (with the exception of "F" below) need not be answered if answered for the Owner.

	i	i. If no, please complete all quest	ions below.
E.	User's C	Counsel:	
	Firm	Name:	······································
	Addı	ress:	
	Indiv	ridual Attorney:	
	Phon	e Number:	E-mail:
F.	Principal	Stockholders or Partners, if any	(5% or more equity):
		Name	Percent Owned
G.	family m	embers, or any stockholder, partr ndividuals is or has been associate ever filed for bankruptcy, been	adjudicated bankrupt or placed in receivership or is the subject of any bankruptcy or similar
	ii.	ever been convicted of a felon violation)? (if yes, please explai	y or criminal offense (other than a motor vehicle

4.		e of operation (manufacturing, wholesale, distribution, retail, etc.) and products and/or ices:
3.	Des etc.	cribe your present location (acreage, square footage, number buildings, number of floors,
2.	Ow	ned or Leased:
1.		Part II – Operation at Current Location **(if the Owner and the User are unrelated entities, answer separately for each)** rent Location Address:
	L.	List major bank references of the User:
	K.	Has the User (or any related corporation or person) been involved in or benefited by any prior industrial development financing in the municipality in which this project is located whether by this agency or another issuer? (Municipality herein means city, town or village or if the project is not in an incorporated city, town or village, the unincorporated areas of the county in which it is located.) If so, explain in full:
	J.	List parent corporation, sister corporations and subsidiaries:
,	I.	Is the User related to any other organization by reason of more than a 50% ownership? If so, indicate name of related organization and relationship:

5	. Are other facilities or related companies of the Applicant located within the State? Yes □ No □
	A. If yes, list the Address:
6.	If yes to above ("5"), will the completion of the project result in the removal of such facility of facilities from one area of the state to another OR in the abandonment of such facility of facilities located within the State? Yes \square No \square
	A. If no, explain how current facilities will be utilized:
	B. If yes, please indicate whether the project is reasonably necessary for the Applicant to maintain its competitive position in its industry or remain in the State and explain in full:
7.	Has the Applicant actively considered sites in another state? Yes □ No □ A. If yes, please list states considered and explain:
8.	Is the requested financial assistance reasonably necessary to prevent the Applicant from moving out of New York State? Yes \(\sigma\) No \(\sigma\) A. Please explain:
9.	Number of full-time equivalent employees at current location and average salary:
	Part III – Project Data
l.	Project Type:
	A. What type of transaction are you seeking?: (Check one)
	Straight Lease ☑ Taxable Bonds ☐ Tax-Exempt Bonds ☐ Equipment Lease Only ☐
	B. Type of benefit(s) the Applicant is seeking: (Check all that apply)

Sales Tax Exemption 🗖

Mortgage Recording Tax Exemption 🗷

PILOT Agreement: 🔀

2.	Loc	ation of p	oject:		
	A.	Street Add	lress: 51 Charles Lindbergh Blv'd, Uniondale, NY 11	553	
	B.	Tax Map:	District 002 Section 44 Block F Lot(s) p/o	377	
	C.	Municipal	Jurisdiction:		
		i. ii. iii.	Town: Town Of Hempstead Village: None School District: #2		
	D	Acreage: _	6.5		
3.	Proj	ject Compo	onents (check all appropriate categories):		
A	. {	Constructi i.	on of a new building	No	
В	,]	Renovation i.	ns of an existing building Square footage: 60K (total bldg 108K sq ft)		No
С	.]		of an existing building Square footage:		
D	.]	Land to be i.	cleared or disturbed		
E	. (Construction i. ii.	on of addition to an existing building \(\sigma\) Yes \(\sigma\) Square footage of addition: Total square footage upon completion:		
F.	. <i>1</i>	~	of an existing building	ď	No
G.	I		of machinery and/or Equipment		No
			HVAC, electrical	7-12-14 - He	
Н		To what le	ength will the project ensure energy efficiency in the design Applicant will use best efforts to utilize energy efficiency.	gn and ciency	operations? in design and
			operations.		

4.	<u>C</u>	urrent Use at Proposed Location:						
	A	. Does the Applicant currently hold fee title to the proposed location? YES						
	i. If no, please list the present owner of the site:							
	В	Present use of the proposed location: Three current tenants: Labcorp-diagnostic lab, Jovia call						
		center, Angion - Pharmaceuticals; prospective tenant: Chem Rx - Pharmaceuticals, (Attached Addendum)						
	C.	Is the proposed location currently subject to an IDA transaction (whether through this Agency or another?) Yes No						
		i. If yes, explain: TOH IDA Pilot						
	D.	Is there a purchase contract for the site? (if yes, explain):						
	E.	Is there an existing or proposed lease for the site? (if yes, explain): Yes INO ChemRx, Proposed, Angion - Existing, Jovia - Existing, LabCorp - Ending June, 2020						
5.	Pro	Proposed Use:						
	A.	Describe the specific operations of the Applicant or other users to be conducted at the project site:						
		Pharmacy services to long term facilities and Jovia call center						
	B.	Proposed product lines and market demands:						
		Pharmaceuticals to high need populations						
	C.	If any space is to be leased to third parties, indicate the tenant(s), total square footage of the project to be leased to each tenant, and the proposed use by each tenant:						
		See Attached Addendum						
	D.	Need/purpose for project (e.g., why is it necessary, effect on Applicant's business):						

		Provide a	financial incentive to at	tract Chem Rx during extremely difficult market condition.
		LabCorp lea	ase terminates in June, 2020	and will be vacating. The broker has been trying to lease the space for 18 months
		This is the	only potential tenant id	dentified to occupy approximately 65% of the building.
	E.		portion of the project y visit the project loc	be used for the making of retail sales to customers who ation? Yes No No
		i.	the sale of retail go	age of the project location will be utilized in connection with ods and/or services to customers who personally visit the
6.	Pr	oject Work		
	A.	Has cons	truction work on this	project begun? If yes, complete the following:
		i. ii. iii.	Site Clearance: Foundation: Footings:	Yes I No I % COMPLETE Yes I No I % COMPLETE Yes I No I % COMPLETE
		iv.	Steel:	Yes D No 💆 % COMPLETE
		v.	Masonry:	Yes No XI % COMPLETE
		vi.	Other:	interior renovation, Roof and HVAC upgrade
	B.	What is th	ne current zoning?: _	Light industrial
	C.	Will the p	oroject meet zoning re	equirements at the proposed location?
		i	Yes 🗵	No 🗆
	D.	_		ed, please provide the details/status of the change of zone
				to the appropriate planning department? Yes \(\sigma\) No \(\sigma\)
7.	Pro	oject Comp	letion Schedule:	
	A.		ne proposed commend on/renovation/equipp	ement date for the acquisition and the ing of the project?
		i.	Acquisition: Lease J	ılıy 2020
		ii.	Construction/Renov	ration/Equipping: Six months
	В.		n accurate estimate of project is expected to	the time schedule to complete the project and when the first occur: 12/20

Part IV - Project Costs and Financing

1. Project Costs:

A. Give an accurate estimate of cost necessary for the acquisition, construction, renovation, improvement and/or equipping of the project location:

<u>Description</u>	<u>Amount</u>
Land and/or building acquisition	\$
Building(s) demolition/construction	\$
Building renovation	\$ 3,000,000.00
Site Work	\$
Machinery and Equipment	\$ 500,000.00
Legal Fees	\$
Architectural/Engineering Fees	\$
Financial Charges	\$ 300,000.00
Other (Specify)	\$
Total	\$ 3,900,000.00
2. Method of Financing:	
	Amount Term
A. Tax-exempt bond financing:	\$ years
B. Taxable bond financing:C. Conventional Mortgage:	\$ 3,900,000 (refinance) years vears
D. SBA (504) or other governmental finance	
E. Public Sources (include sum of all	, , , , , , , , , , , , , , , , , , ,
State and federal grants and tax credit	The state of the s
F. Other loans:	\$ years
G. Owner/User equity contribution:	\$years
Total Project C	Costs \$ 3,900,000.00

i. What percentage of the project costs will be financed from public sector sources?

		Notice
3.	Pr	oject Financing:
	A.	Have any of the above costs been paid or incurred (including contracts of sale or purchase orders) as of the date of this application? Yes □ No ☒
		i. If yes, provide detail on a separate sheet.
	В.	Are costs of working capital, moving expenses, work in progress, or stock in trade included in the proposed uses of bond proceeds? Give details:
		N/A
	C.	Will any of the funds borrowed through the Agency be used to repay or refinance an existing mortgage or outstanding loan? Give details:
		N/A
	D.	Has the Applicant made any arrangements for the marketing or the purchase of the bond or bonds? If so, indicate with whom:
		N/A
		Part V - Project Benefits
1.	Mo	rtgage Recording Tax Benefit:
		Mortgage Amount for exemption (include sum total of construction/permanent/bridge financing):
		\$ \$
	В.	Estimated Mortgage Recording Tax Exemption (product of Mortgage Amount and%):
		\$
2	Sale	es and Use Tax Benefit:

A. Gross amount of costs for goods and services that are subject to State and local Sales and Use Tax (such amount to benefit from the Agency's exemption):

1.

	*	\$ <u>2,1</u>	00,000.00							
	 B. Estimated State and local Sales and Use Tax exemption (product of 8.625 % and figure above): \$181,125.00 									
	C. If your project has a landlord/tenant (owner/user) arrangement, please provide a breakdow of the number in "B" above:									
		i.	Owner: \$ 18	1,125.00						
		ii.	User: \$ <u>0</u>							
3.	3. Real Property Tax Benefit:									
	A. Identify and describe if the project will utilize a real property tax exemption benefit other than the Agency's PILOT benefit: NONE									
	B. Agency PILOT Benefit:									
		i.	Term of PILO	OT requested: 1	2 years					
		ii.	schedule and anticipated to Exhibit A he	l indicate the ax rates and as creto. At such	estimated amo sessed valuation time, the Applic	Agency staff will create a PILOT unt of PILOT Benefit based on and attached such information to cant will certify that it accepts the benefit to be granted by the Agency.				
** Thi and ex	is app ecute	lication w d.**	vill not be deen	ned complete an	d final until <u>Exhi</u>	<u>bit A</u> hereto has been completed				
Part VI – Employment Data										
1.	 List the Applicant's and each users present employment, and estimates of (i) employment at the proposed project location at the end of year one and year two following project completion and (ii) the number of residents of the Labor Market Area* ("LMA") that would fill the full-time and part-time jobs at the end of the second year following completion: 									
			Present	First Year	Second Year	Residents of LMA				
		Time Time**	245*	130**	255**	60-70%				

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Nassau and Suffolk Counties.

* The Labor Market Area includes the County/City/Town/Village in which the project is located as well

^{*115} of these FTE's are employed by LabCorp which is vacating in June, 2020.
**ChemRx, the proposed replacement tenant to LabCorp. estimates FTE count of 125+.

** Agency staff converts Part-Time jobs into FTEs for state reporting purposes by dividing the number of Part-Time jobs by two (2).

2. Salary and Fringe Benefits:

	Average Salary or Range of Salary	Average Fringe Benefits or Range
Retained and Created		of Fringe Benefits
Salary Wage Earners	\$50,000 - \$375,000	\$20,000
Commission Wage		
Earners		
Hourly Wage Earners		
1099 and Contract		
Workers		<u> </u>

Note: The Agency reserves the right to visit the facility to confirm that job creation numbers are being met.

Part VII - Representations, Certifications and Indemnification

- 1. Is the Applicant in any litigation which would have a material adverse effect on the Applicant's financial condition? (if yes, furnish details on a separate sheet)
- 2. Has the Applicant or any of the management of the Applicant, or any of these individuals immediate family members, the anticipated users or any of their affiliates, or any other concern with which such management has been connected, been cited for a violation of federal, state or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or other operating practices? (If yes, furnish details on a separate sheet)
- 3. Is there a likelihood that the Applicant would not proceed with this project without the Agency's assistance? (If yes, please explain why; if no, please explain why the Agency should grant the benefits requested)

The proposed work fo	r the prospective tenant, ChemRx, would not be viable without
benefits.	

4. If the Applicant is unable to obtain financial assistance from the Agency for the project, what would be the impact on the Applicant and on the municipality?

60% bldg vacancy-property will not support current mortgage obligation

5. The Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if financial assistance is provided for the proposed project:

§ 862. Restrictions on funds of the agency. (1) No funds of the agency shall be used in respect of any project if the completion thereof would result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the project occupant located within the state, provided, however, that neither restriction shall apply if the agency shall determine on the basis of the application before it that the project is reasonably necessary to discourage the project occupant from removing such other plant or facility to a location outside the state or is reasonably necessary to preserve the competitive position of the project occupant in its respective industry.

Initial \DG

6. The Applicant understands and agrees that in accordance with Section 858-b(2) of the General Municipal Law, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the project will be listed with the New York State Department of Labor, Community Services Division and with the administrative entity of the service delivery area created pursuant to the Job Training Partnership Act (PL 97-300) in which the project is located (collectively, the "Referral Agencies"). The Applicant also agrees, that it will, except as otherwise provided by collective bargaining contracts or agreements to which they are parties, first consider for such new employment opportunities persons eligible to participate in federal job training partnership programs who shall be referred by the Referral Agencies

Initial 1D6

7. The Applicant confirms and acknowledges that the owner, occupant, or operator receiving financial assistance for the proposed project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations.

Initial 106

8. The Applicant confirms and acknowledges that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of any financial assistance and the reimbursement of an amount equal to all or part of any tax exemption claimed by reason of the Agency's involvement the Project.

Initial 105

9. The Applicant confirms and hereby acknowledges that as of the date of this Application, the Applicant is in substantial compliance with all provisions of Article 18-A of the New York

General Municipal Law, including, but not limited to, the provision of Section 859-a and Section 862(1) of the New York General Municipal Law.

Initial US

10. In accordance with Section 862(1) of the New York General Municipal Law the Applicant understands and agrees that projects which result in the removal of an industrial or manufacturing plant of the project occupant from one area of the State to another area of the State or in the abandonment of one or more plants or facilities of the project occupant within the State is ineligible for financial assistance from the Agency, unless otherwise approved by the Agency as reasonably necessary to preserve the competitive position of the project in its respective industry or to discourage the project occupant from removing such other plant or facility to a location outside the State.

Initial 1DG

11. The Applicant represents and warrants that to the Applicant's knowledge neither it nor any of its affiliates, nor any of their respective partners, members, shareholders or other equity owners, and none of their respective employees, officers, directors, representatives or agents is, nor will they become a person or entity with who United States persons or entities are restricted from doing business under regulations of the Office of Foreign Asset Control (OFAC) of the Department of the Treasury (including those named on OFAC's Specially Designated and Blocked Persons List or under any statute, executive order including the September 24, 2001, Executive Order Block Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism, or other governmental action and is not and will not assign or otherwise transfer this Agreement to, contract with or otherwise engage in any dealings or transactions or be otherwise associated with such persons or entities.

Initial UDG

12. The Applicant confirms and hereby acknowledges it has received the Agency's fee schedule attached hereto as Schedule A and agrees to pay such fees, together with any expenses incurred by the Agency, including those of Transaction Counsel, with respect to the Facility. The Applicant agrees to pay such expenses and further agrees to indemnify the Agency, its members, directors, employees and agents and hold the Agency and such persons harmless against claims for losses, damage or injury or any expenses or damages incurred as a result of action taken by or on behalf of the Agency in good faith with respect to the project.

Initial 106

13. The Applicant confirms and hereby acknowledges it has received the Agency's [Construction Wage] Policy attached hereto as <u>Schedule B</u> and agrees to comply with the same.

Initial 106

14. The Applicant hereby agrees to comply with Section 875 of the General Municipal Law. The Company further agrees that the financial assistance granted to the project by the Agency is subject to recapture pursuant to Section 875 of the Act and the Agency's [Recapture and Termination] Policy, attached hereto as <u>Schedule C</u>.

Part IX - Certification

Itzhak Goldberg	(name of representati	ve of company submitting) of NovaPark LLC	application) deposes and
says that he or she is the $\frac{N}{2}$ (company name) named in t	Manager (title)	of NovaPark LLC	foregoing application and
(company name) named in t knows the contents thereof:	the attached application;	to his or her knowledge.	
knows the contents thereof.	and him me same is not	to the or man	

Deponent further says that s/he is duly authorized to make this certification on behalf of the entity named in the attached Application (the "Applicant") and to bind the Applicant. The grounds of deponent's belief relative to all matters in said Application which are not stated upon his/her personal knowledge are investigations which deponent has caused to be made concerning the subject matter this Application, as well as in formation acquired by deponent in the course of his/her duties in connection with said Applicant and from the books and papers of the Applicant.

As representative of the Applicant, deponent acknowledges and agrees that Applicant shall be and is responsible for all costs incurred by the [Town of Hempsteed] Industrial Development Agency (hereinafter referred to as the "Agency") in connection with this Application, the attendant negotiations and all matters relating to the provision of financial assistance to which this Application relates, whether or not ever carried to successful conclusion. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails to act within a reasonable or specified period of time to take reasonable, proper, or requested action or withdraws, abandons, cancels or neglects the application or if the Applicant is unable to find buyers willing to purchase the total bond issue required, then upon presentation of invoice, Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred with respect to the application, up to that date and time, including fees to bond or transaction counsel for the Agency and fees of general counsel for the Agency. Upon successful conclusion and sale of the transaction contemplated herein, the Applicant shall pay to the Agency an administrative fee set by the Agency in accordance with its fee schedule in effect on the date of the foregoing application, and all other appropriate fees, which amounts are payable at closing.

Representative of Applicant

Sworn to me before this / 5/2
Day of May / 1, 20 20

(seal)

4822-2875-1665.2

DANIEL J. BAKER
Notary Public, State of New York
No. 02BA6068267
Oualified in Suffolk County

Qualified in Suffolk County My Commission Expires 12/31/20 2/ Pursuant to ED. 202.7

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