# **Babylon Industrial Development Agency**

ROBERT STRICOFF
CHIEF EXECUTIVE OFFICER

			Applicant Cor	itact An	d Basic Information
Name:	APOGEE	TRA	NSLITE, INC.		
Address:	593 ACO	RN S	TREET, DEER PAR	K, NY 1	1729
P hone Nu	m ber(s):				
Fax Numb	per(s):				
E-mail Ac					
Website A		w	WW.APOGEETRA	NSLITE	COM
	EIN Number:				
Аррисан	EIN Number.				
Application	on Date:	M	ARCH 25, 2014		
	1. Financial	l Assi:	stance Requested (che	ck applic	eable option(s)):
			Bond Financing	2	K Straight Lease
	2. Officer of	of App	licant serving as cont	act person	n:
ı		•••		_	Firm:
					Fun:
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ļ					
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47 WEST MAIN STREET, SUITE 3, BABYLON, NY 117O2 - TEL: (631) 587-3679 FAX: (63f) 587-3675 WEBSITE: WWW.BABYLONIDA.ORG E-MAIL: INFO@BABYLONIDA.ORG

# 3. Attorney of Applicant:

Name: PETER L. CURRY, ESQ	Firm: FARRELL FRITZ, P.C.
Phone #: (516) 227-0700	Fax#: (516) 336-2208
E-mail Address: PCURRY@FARRELLFRITZ.COM	Address: 1320 RXR PLAZA, UNIONDALE, NY 11556

# 4. CFO/Accountant of Applicant:

Name: ALAN MARKS	Firm: STANLEY MARKS & CO.
Phone #: <b>845-565-5400</b>	Fax#: <b>845-565-9487</b>
E-mail Address: AMARKS@STANLEYMARKSLLP.COM	Address: 32 FOSTERTOWN ROAD, NEWBURGH, NY 12550

# 5. Financial Advisor or Consultant (if applicable): N/A

Name:	Firm:
Phone #:	Fax#:
E-mail Address:	Address:

6. 7.	Applicant is (check one of the General Partnership  X S Corporation  501 (c)(3) Organization  Are any securities of Applicant	Limited I Limited I Cother (sp	Partnership Liability Company pecify):		C Corporation Natural Person
••	The any becames of rippinear	ic publicly under			
	☐ Yes	X No			
8.	Applicant's state of incorporate	tion or formation:	NEW YORK		
9.	Applicant's date of incorporat	ion or formation:	MARCH 23, 20	001	
8.	States in which Applicant is q	ualified to do busi	ness:		

.

9. Please provide a brief description of Applicant and nature of its business: THE APPLICANT IS A LEADING DESIGNER AND MANUFACTURER OF LIGHTING AND ELECTRICAL FIXTURES AND COMPONENTS, INCLUSING THE FIXTURES USED IN THE NEW YORK, BOSTON, WASHINGTON, D.C., AND LOS ANGELES SUBWAY AND MASS TRANSIT SYSTEMS.

Please note: An "Affiliate" means any individual, corporation, partnership, joint venture, sole proprietorship, limited liability company, trust or other entity that controls, is controlled by or is under common control with the Applicant.

12.	Plea	ase check all that apply:				
		Applicant or an Affiliate is	the fee simple owner of the Project re	alty.		
	X	Applicant or an Affiliate is	Applicant or an Affiliate is not currently, but expects to be the fee simple owner of the Project realty.			
			not the owner of the Project realty, but uct of its business pursuant to a lease of			
			not the owner of the Project realty, bu ant of a material portion thereof for the agreement.	• •		
			es fully describe Applicant and its relat d as follows (please provide copies of s			
13	or of		SPE") that is owned and controlled pject realty, the SPE will be a			
		General Partnership S Corporation Natural Person	Limited Partnership  X Limited Liability Company  Other (specifi):	C Corporation Not-for-profit 501 (c)(3) entity		

Name of SPE:
Address:
Phone Number(s):
Contact Person:
Affiliation of SPE to Applicant:
Owners of SPE and each respective ownership share:
SPE EIN Number:

Please note: If information required above for the SPE is unknown at time of Application submission, then please submit any missing information to the Babylon IDA as soon as it becomes available.

14. Give the following information with respect to all proposed tenants and sub-tenants at the proposed project site. Provide information on an additional sheet if space is needed.

Company Name:	Phone	Affiliation with Applicant	SF & Floors (Percent of Occupancy)	Lease Expiration	Tenant Business
CRW LIGHTING, INC.		ARMS- LENGTH	10,777 – 27.25%	2/15	MANUFACTURING AND DISTRIBUTION OF COMMERCIAL LIGHTING FIXTURES
			· · · · · · · · · · · · · · · · · · ·	-	

# Project Description and Financial Information

# Project Site

District:				
Section: 61				
Block(s): 1				
/				
Lot(s): 19.0	106			
<u> 100001.</u>				
Ctus at a diducan	and in anda. 502 ACC	analemment mer	CD DADIZ AN 11730	
Street address	and zip code; 593 ACC	JRN STREET, DEE	ER PARK, NY 11729	
Zoning:				
Area (acreage			. <del></del>	
	e of existing building(s):	39,500		
Number of fl		LANGUEL CONTINUES	2 AND DECEMBER OF	
•	) (e.g., office, retail, etc.): M			
1. Ple	ease provide the followi			
a.	Please provide a brief	description of the	e proposed Project:	
			TENANT AT THE PROJECT FACILITY. IT	1
	<del>-</del>	-	ENT AND UPGRADE THE FACILITY IN FION. IT HAS SOUGHT A LARGER	
			FFOLK COUNTY, BUT HAS DETERMINED	)
TO	STAY AND GROW	AT THE PROJI	ECT FACILITY.	
b.	Indicate the estimated	date for commer	ncement of the Project: MAY, 2014	
c.	Indicate the estimated	date for the comp	pletion of the Project:	
d.	Will the Project requir	re any special per	rmits, variances or zoning approval?	
		☐ Yes	X No	
	If Yes, please expla	ıın:		
e.	Is any governmental e	ntity intended or	proposed to be an occupant at the Project site?	
		☐ Yes	X No	
	If Yes, please expla	in:		
	· · · · · · · · · · · · · · · · · · ·			

# 2. Please complete the following summary of Project sources and uses:

# PROJECT COSTS

# PROJECT FUNDING

Land acquisition		Bonds	
Building acquisition existing	\$2,950,000	Loans	2,600,000
New construction		Affiliate/employee loans	-
Renovations	300,000	Company funds	1,235,000
Fixed tenant improvements		Other (explain)	
Machine and/or equipment	400,000		
Soft costs	150,000		
Furnishings	35,000		
Other (explain)			<del></del>
Total Project Costs	3,835,000	Total Project Funding Sources	3,835,000
	1		

# Background Information on Applicant and Applicant's Affiliates

Please note: "Principal" means the following with respect to the Applicant and/or the SPE: all persons (entities or individuals) that control the Applicant and/or the SPE, and/or own more than 10 percent of either; all executive officers; all directors; and all members and general partners for, respectively, limited liability companies and partnerships.

Please answer the following questions and, if necessary, include additional information as an attachment:

1.	currently receiving, financia	liate or Principal, ever received, or is any such person or entity all assistance or any other kind of discretionary benefit from any mental entity or agency, or any public authority or public benefit relopment corporation?
	□Yes	X No
	If Yes, please provid	le details on an attached sheet.
	enefit corporations, and local	governmental entities or agencies, public authorities or development corporations, shall be referred to as "Public
2.	at the Project site, obtained	liate or Principal, or any existing or proposed occupant, or is any such person or entity in the process of obtaining, other assistance from the Babylon IDA?
	□Yes	X No
	If Yes, please provide	details on an attached sheet.
3.	Has Applicant, or any Affili obligation to a Public Entity	ate or Principal, ever defaulted on a loan or other?
	☐ Yes	X No
	If Yes, please provide detail	s 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	X No		
	If Yes, please provide details	on an attached sheet.		
already covered above (e.		ate or Principal, have any contingent liabilities not adgment liens, lis, pendens, other liens, etc.)? Please ner loans taken in the ordinary course of business only if in		
	☐ Yes	X No		
	If Yes, please provide details of	on an attached sheet.		

# 6. List of major customers:

Company Name	Address	Contact	Phone
METROPOLITAN TRANSPORTATION AUTHORITY	341 MADISON AVENUE, NEW YORK, NY 10017		
MASSACHUSETTS BAY TRANSIT AUTHORITY	10 PARK PLAZA, SUITE 3910, BOSTON, MA 02116		
- Macon Island			

### 7. List major suppliers:

Company Name	Address	Contact	Phone
Duke Supply	1 Bay Avenue	Pete	516-624-7518
Hadco Metal	120 Spagnoli Road	Jaye Salter	631-270-9822
Yard Metals	999 Motor Parkway	Jennifer	631-232-1600
Universal Lgt	26 Century Blvd	Silvia Garcia	615-316-5100

### 8. List unions (if applicable):

Company Name	Address	Contact	Phone
Local Union #3 F Division	Flushing, NY	Anthony Esponda	718-591-4000

### 9. List banks/current accounts:



# 10. List licensing authorities, if applicable: DMV commercial licenses

Company Name	Address	Contact	Phone
			**

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 Babylon IDA Board, in order to obtain from the Babylon IDA Board an expression of intent to provide the financial assistance for the Project. I understand that this expression of intent will take the form of an inducement resolution to be adopted by the Board.

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 that all of the information provided in these Application Materials is accurate, true and correct. 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 Babylon IDA Board to reject the request made in the Application Materials.

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; that the Babylon IDA may be required under SEQR to make a determination as to the Project's environmental impact and that in the event the Babylon IDA does determine 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 Supervisor of the Town; that under the New York State Freedom of Information Law ("FOIL"), the Babylon IDA may be required to disclose the Application Materials and the information contained therein; and that Applicant shall be entirely responsible and liable for the fees referred to in these Application Materials, including (in the case of Bonds) but not limited to payment of the New York State bond issuance fees (if applicable to the Bonds in question) based upon the aggregate principal amount of the Bonds.

#### I further understand and agree as follows:

That in the event the Application Materials are not submitted to the Babylon IDA Board for any reason including negative results obtained through the background check, and/or, with respect to Application Materials that are submitted to the Babylon IDA Board, in the event the Babylon IDA Board rejects same, then, under either of said circumstances, Applicant shall have no recourse against the Babylon IDA, or any directors, officers, employees or agents of the Babylon IDA, for the Application Fee, or for other expenses incurred by Applicant or other parties on behalf thereof, or for damages or specific performance; and that the Application Fee is under all circumstances (including but not limited to the ones just described and the ones described in the next succeeding paragraph) non-refundable; and

That if the Town of Babylon IDA Board adopts an inducement resolution with respect to the request made in the Application Materials, such adoption shall not be deemed a guaranty that the Town of Babylon IDA Board will adopt an authorizing resolution; or that the Babylon IDA will then provide the induced financial assistance; and

That Applicant shall indemnify the Babylon IDA for fees and disbursements incurred by bond counsel (in the case of a Bond transaction) or by project counsel (in the case of a straight-lease transaction); and that bond counsel or project counsel (as applicable) shall be a third-party beneficiary of this indemnity to the Babylon IDA regardless of whether financial assistance is granted and a bond closing or straight lease closing occurs and if no closing occurs, regardless of the reason thereafter and regardless of whether a closing was within or without the control of any of the Public Participants; and

That in the event Babylon IDA discloses the Application Materials in response to a request made pursuant to FOIL, Applicant hereby authorizes the Babylon IDA to make such disclosure and hereby releases the Babylon IDA from any claim or action that Applicant may have or might bring against the Babylon IDA, its directors, officers, agents, employees and attorneys, by reason of such disclosure; and that Applicant agrees to defend, indemnify and hold the Babylon IDA and its 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 Babylon IDA reserves the right in its 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	l by	Applicant,
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this day of MARCH 2014

Name of Applicant: APOGEE TRANSLITE, INC.

By: Printed Name of Signer: RICHARD NICOLAI, PRESIDENT

Title of Signer: Signature:\_\_\_

Requested, Represented, Certified, Acknowledged, Understood and Agreed by Applicant, this Charles day of CERRUARY 2014

Name of Applicant: APOGEE TRANSLITE, INC.

Printed Name of Signer: RICHARD NICOLAI, RESIDENT
Title of Signer: Signature: By:

#### Retail Questionnaire

1.			onsist of facilities or property that are or will be primarily ds to customers who personally visit the Project?
		☐ Yes	X No
2.	reg prii	istered vendor under Article 2	es," will the applicant or any other project occupant be a 8 of the Tax Law of the State of New York (the "Tax Law") alle of tangible personal property" (as defined in Section 110)
		□Yes	□No
3.			onsist of facilities or property that are or will be primarily rices to customers who personally visit the Project?
		☐ Yes	X No
4.	If the answer to question I or question 3 is "Yes," what percentage of the cost of the Prowill be expended on such facilities or property primarily used in making retail sales of goor services to customers who personally visit the Project? Percent		s or property primarily used in making retail sales of goods
5,			estion 3 is "Yes," and the answer to question 4 is more than my of the following apply to the Project:
	a.	Will a not-for-profit corporat	ion operate the Project?
		X Yes	□ No
	b.	Is the Project likely to attract of Babylon?	t a significant number of visitors from outside the Town
		Yes	X No
	c.		or the contemplated financial assistance from the ted jobs outside the State of New York?
		☐ Yes	□No

d.	not, but for the Project, be re	of the Project to make available goods or services that would easonably accessible to Town of Babylon residents because ssible retail trade facilities offering such goods or services?
	Yes	X No
e.	economic development zo Law; or (b) a census tract of area contiguous thereto) tha rate of at least 20 percent for of its households receiving	d in one of the following: (a) an area designated as an one pursuant to Article 18-B of the General Municipal or block numbering area (or census tract or block numbering t, according to the most recent census data, has (i) a poverty or the year to which the data relates, or at least 20 percent g public assistance, and (ii) an unemployment rate of at ide unemployment rate for the year to which the data relates?
	□Yes	□ No
5.	Project preserve permanen	bdivisions (c) through (e) of question 5 are "Yes," will the t, private sector jobs or increase the overall number of bs in the State of New York?
	If "Yes", please furnish deta	ils in a separate attachment.
7.	If the answers to any of sub furnish details in a separate	divisions (a) through (e) of question 5 are "Yes," please attachment.

THE UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above, and	
in any statement attached hereto, are true and correct.	

Name of Applicant: APOGEE TRANSLITE, INC.

Printed Name of Signer: RICHARD NICOLAI\_

Title of Signer: PRESIDENT

Signature:		
Date:		

Printed Name of Signer: RICHARD NICOLAL

Title of Signer: PRESIDENT

Signature: )

Date:

# Anti-Pirating Questionnaire

1.		result in the removal of a plant or facility of the of the Project, from an area in New York State (but area within the Town of Babylon?
	☐ Yes	X No
	If "Yes," please provide the following in Address of the to-be-removed plant or fa	
	Names of all current occupants of the to-	be-removed plant or facility:
2.	Will the completion of the Project a facilities of the Applicant, or of any p New York State other than the Town o	result in the abandonment of one or more plants or proposed occupant of the Project, located in an area of Babylon?
	□Yes	X No
	If "Yes," please provide the following in Addresses of the to-be-abandoned plant(	
	Names of all current occupants of the to-	-be-abandoned plants or facilities:
3.		any way cause the removal and/or abandonment of York State (but outside of the Town of Babylon)?
	☐ Yes	X No
	If "Yes," please provide all information	relevant to such future removal and/or abandonment:

If the answer to either question 1, 2 or 5, is "Yes," please continue and ans	wer
questions 4 and 5.	
York La Daniant	ـــ

4.	Is the Project reasonably necessary to of any proposed occupants of the Pro	preserve the competitive position of this Applicant, or ject, in its industry?
	☐ Yes	□ No
5.		discourage the Applicant, or any proposed occupant lant or facility to a location outside New York State?
	Yes	$\square$ No
	If the answer to question 4 and/or q of paper a detailed statement explaini	uestion 5 is "Yes," please provide on a separate sheet ing same.

in any statement attached hereto, are true and correct.
Name of Applicant: APOGEE TRANSLITE, INC.
By Printed Name of Signer: RICHARD NICOLAI
Title of Signor PRESIDENT
Signature:

THE UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above, and

By Printed Name of Signer: RICHARD NICOLAI

Title of Signor PRESIDENT

#### **Employment Questionnaire**

The Town of Babylon Industrial Development Agency requires all Applicants to fill out this Employment Questionnaire. As used in this Questionnaire, "Company" means the Applicant; "Project Location" means the project location which Applicant has identified in its Application; and "Tenant" means any person or entity to whom or to which Applicant intends to lease part or all of the Project Location. If Applicant is a real estate holding company that is an affiliate of an operating company and Applicant intends to lease the Project Location to such operating company, then the Applicant and the operating company must fill out separate copies of this Questionnaire.

Applicant Name:

Aaa	ress:		
Pho	ne Number(s):		
I.R.	S. Employer ID Number:		
Dep	artment of Labor. Registration N	Tumber:	
Proj	ect Location:		
1.	How many employees does a of Application submission?	Applicant employ in the Town of	Babylon at the time
	Number	Average Annual Salary (FT) Hourly Rate (PT)	On average Part -time Workers Hours per week
	Time 26 Time 0	\$1,856,537.12 \$ 0	
2.	How many employees referred Application submission?	to in question 1 reside in the Town o	f Babylon at the time of
1	Number	Average Annual Salary (FT) Hourly Rate (PT)	On average Part -time Workers Hours per week
	Full Time1 Part Time0	\$ <u>44,188.18</u> \$	Trouis per week

3.	How many employees does Applicant employ outside of the Town of Babylon but in New
	York State at the time of Application submission?

Number Average Annual On average
Salary (FT) Part -time Workers
Hourly Rate (PT) Hours per week

Full Time 0 \$ 0
Part Time 0 \$ 0

4. How many employees does the applicant employ at the project location (annual average) at the time of Application submission? N/A

Average Annual Salary On average 0
(FT) \$71,500 Part -time Workers 0
Hourly Rate (PT) Hours per week 0

Full Time: 26
Part Time 0

Number

5. Projected employment at Project Location for the Applicant on December 31 of each of the five calendar years following the completion of the Project. N/A

Year	Number of	Average	Number of	Average	Average	Average	Total
	Full-time	Annual	Port-time	Hourly	Hours per	Annual	Estimated
	Employees	Full-time	Employees	Rate	week	Part-time	Annual
		Salary		Part-time	Part-time	Salary	Payroll
4					ļ <u>.</u>		
7	26	71,500	0	0	0	0	1,856,537
2	27	71,500	0	0	0	0	1,856,537
3	28	71,500	0	0	0	0	1,856,537
4	29	71,500	0	0	0	0	1,856,537
5	30	71,500	0	0	0	0	1,856,537

6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level.

7.	Please provide documentary evidence (Form Year end W-2, Form EEO-1 or external or internal payroll statements(last quarter or year end statements) supporting the answer provided in question numbers 1, 3 and 4.
	Attached.
8.	Does Applicant intend to employ new employees at the Project Location, and/or will Applicant transfer current employees from premises currently being used? Please provide details. N/A
("Do undo	thorize any private or governmental entity, including but not limited to the New York State Department of Labor OL"), to release to the Babylon IDA and to its successors and assigns, any and all employment information or DOL's control that is pertinent to the Company and the Company's employees. This authorization shall remain ffect throughout the term of this Lease.
Nan	ne of Applicant: APOGEE TRANSLITE, INC.
Ву І	Printed Name of Signer: RICHARD NICOLAI
Title	of Signer PRESIDENT_
Sign	ature:
Date	:
	ch to this Questionnaire your most recent four quarters of the NYS-45 "Quarterly Combined Withholding, Wage orting and Unemployment Insurance Return." Attach additional pages if necessary.

Does Applicant intend to employ new employees at the Project Location, and/or will
Applicant transfer current employees from premises currently being used? Please provide
details.

I authorize any private or governmental entity, including but not limited to the New York State Department of Labor ("DOL"), to release to the Babylon IDA and to its successors and assigns, any and all employment information under DOL's control that is pertinent to the Company and the Company's employees. This authorization shall remain in effect throughout the term of this Lease.

Name of Applicant: APOGEE TRANSLITE, INC.

By Printed Name of Signer: RICHARD NICOLAI

Title of Signer PRESIDENT\_

.........

Date: 3

Attach to this Questionnaire your most recent four quarters of the NYS-45 "Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Return." Attach additional pages if necessary.

## Labor Questionnaire

The Applicant and its Affiliates hereinafter will be referred to as the "Companies" or individually as a "Company." If any of the following questions applies to none of these Companies, answer "NONE"; but, for any question that does apply, be sure to specify to which of the Companies the answer is relevant. When the space provided for an answer is insufficient, provide the answer on a separate sheet of paper and attach that paper to this Questionnaire.

i.	List all of the labor union contracts and currently a party:	colle	ective bargaining arrangements to which any of the Companies is
	Local Union No. 3		
2.	Have any of the Companies during the calendar year experienced labor unrest consumer boycotts, mass demonstrations	situ	rent calendar year and the five calendar years preceding the current lations, including pending or threatened labor strikes, hand billing, ther similar incidents?
	□Yes X	No	If Yes, please explain:
3.			deral and/or state unfair labor practices complaints asserted during the years preceding the current calendar year?
	□Yes X	No	If Yes, please describe and explain current status of complaints:
4.			leral and/or state unfair labor practices complaints asserted during the years preceding the current calendar year?
	□Yes X	No	If Yes, please explain:

	X Yes	$\square_{No}$	If No, please provide details on an attached sheet.
	What steps do the Cor	npanies take as a matt	er of course to ascertain their employees' employment status?
	the Companies comple aployment Eligibility Ve		ired documentation related to this inquiry, such as
	☐ Yes	X No	If No, please explain:
	or federal department, ag workers and/or their wor	ency or commission h king conditions and/or y Company during the	e New York State Department of Labor or any other local, state aving regulatory or oversight responsibility with respect to their wages, inspected the premises of any Company or audited current calendar year or during the three calendar years
	☐ Yes	X No	
en tha	tity and when the inspe-	ction occurred. Briefly d and any fines or re	escribe the nature of the inspection, the inspecting governmental describe the outcome of the inspection, including any report medial or other requirements imposed upon the Company of
	Has any Company incur to an employee benefit p		urred, any liability (including withdrawal liability) with respect on plan?
	Yes	X No	
If go	the answer to this quest vernmental entities that	ion is "Yes," quantifi have had regulatory co	the liability and briefly describe its nature and refer to any intact with the Company in connection with the liability:
]	preceding the current cal	endar year, the subject	e they been at any time during the three calendar years of any complaints, claims, proceedings or litigation arising g, promoting, compensating or general treatment of employees?
	☐ Yes	X No	
	the answer to this is "Yes clude sexual harassment		en answering this question, please consider "discrimination" to

THE UNDERSIGNED HEREBY CERTIFIES that the answers and information provided above, and in any statement attached hereto, are true and correct.

Name of Applicant: APOGEE TRANSLITE, INC.

By: Printed Name of Signer: RICHARD NICOLAI

Title of Signer: PRESIDENT

Signature:

Date:

ZERCOLVÉMENTO OL COURS PER PORTO DE LA COURSE DE LA COURS

By: Printed Name of Signer: RICHARD NICOLAI

Title of Signer: PRESIDENT

Signature:

Date: 3/24/14

In the matter of the Application of:	FULL DISCLOSURE AFFIDAVIT
P.O. Address	
<del></del>	
to the TOWN OF BABYLON	
(title of applicable Board(s)	
STATE OF NEW YORK	
Jss.: COUNTY OF SUFFOLK	
being duly sworn, deposes as	nd savs
This affidavit is made by your deponent and intended to of Babylon to fulfill requirements of Article XXIII of the Babylon with respect to the above-entitled Application property located and described as follows:	be filed with the above board of the Town the Building Zone Ordinance of the Town of
2. The name and address of the Applicant are as follows:	
3. The name and address of the person who has made and	signed this Application are as follows:
4. The names and addresses of all persons having any inter this Application direct or indirect, vested or contingent, interest as a contract vendor, contract vendee, lessor, st contract lessee, holder of any beneficial interest, contract mortgagor, mortgagee, holder of any encumbrance of lien, guarantor, assignee, agent or broker, or otherwise, as the result of advancing or lending funds in connectic property and regardless of whether the interest may aris by this Board, are as follows:	regardless of whatever such person has an ub-leesor, contract lessor, lessee, sublessee, at holder of any beneficial interest, en, contract holder of any encumbrance or and regardless of whether the interest arises on with the acquisition or development of the
Lynne Nicolai	7 The Hunt St. James, NY 11780
Neal Morofsky	465A Edgewood Avenue St. James, NY 11780

5. The names and addresses of all persons who will receive any benefit as a result of their work, effort or services in connection with this Application are as follows:

6.	The names and addresses of all persons hereinabove set forth under paragraph number 4 or paragraph number 5 of this affidavit who also have any interest such as described in paragraph number 4 or in paragraph number 5 of this Affidavit, in any property within one mile of the property described in this Application, are as follows:
<b>7</b> .	The names and addresses of all persons hereinabove set forth under paragraph number 4 or paragraph number 5 of this Affidavit who are officers or employees of the Town of Babylon, are as follows:
8.	In detail, the nature and extent of the Interest in the property described in this Application, of all officers or employees of the Town of Babylon set forth under paragraph number 7 of this Affidavit, are as follows:
9.	The names and addresses of all persons hereinabove set forth under paragraph 4 or paragraph 5 of this Affidavit, who are related to any officer or employee of the Town of Babylon are as follows:
10.	In detail, the nature of the relationship between all persons set forth in paragraph number 9 of this Affidavit and any officers or employees of the Town of Babylon, are as follows:
11.	In detail, the nature and extent of the interest in the property described in the Application of all persons set forth under paragraph number 9 of this Affidavit, are as follows:
	The undersigned affirms the truth and completeness of the foregoing under penalty of perjury:
	Sworn before me this day day of 20

Page 2 of2

#### CERTIFICATION FOR BOND

RICHARD NICOLAI deposes and says that HE is the PRESIDENT of APOGEE TRANSLITE, INC., the corporation named in the attached application: that he has read the foregoing application and knows the contents thereof; that the same is true to his knowledge.

Deponent further says that the reason this verification is being made by deponent and not by **APOGEE TRANSLITE**, **INC.** is because the said Company is a corporation. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge, are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as an officer of and from the books and papers of said corporation.

As an officer of said corporation (hereinafter referred to as the "applicant"). Deponent acknowledges and agrees that applicant shall be and is responsible for all costs incurred by the Town of Babylon Industrial Development Agency (hereinafter referred to as the "Agency") acting on behalf of the applicant in connection with this applicant and all matters relating to the issuance of bonds, 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 cost incurred with respect to the application, up to that date and time, including fees to general and bond counsel for the Agency. Upon successful conclusion and sale of the required bond issue, the applicant shall pay to the Agency an administrative fee set by the Agency not to exceed an amount equal to 1% of the total project cost financed by the bond issue, which amount is payable at closing. The Agency's Bond Counsel's fees, its general counsel's fees and the administrative fee may be considered as a cost of the project and included as party of any resultant bond issue.

		Chief Executive Officer of Company
Sworn to before me this		
day of	, 20	
(Sea		

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Chief Executive Officer of Company

Sworn to before me this	
day of	, 20
(Seal)	

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	Chief Executive Officer of Company
Sworn to before me this	
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Chief Executive Officer of Company

Sworn to before me this	
day of	, 20_
(Sea	d)

10. Does action involve a permit approval, or fu	
governmental agencyyesno	(Federal, State of Local)?
11. Does any aspect of the action have a currer	ntly valid permit or approval?
no yes	
If yes, list agency name and permit / approva	al
12. As a result of proposed action will existing p	ermit / approval require modification?
no	
I certify that the information provided abo	ve is true to the best of my knowledge:
Applicant/Sponsor: Name	Date
Signature	

11. Does any aspect of the action have a currently valid permit or approval?	
yes	
no	
If yes, list agency name and permit / approval	
12. As a result of proposed action will existing permit / approval require modification?yes	
no	
I certify that the information provided above is true to the best of my knowledge:	
Applicant/Sponsor. Name RIGNAVLA NICOLA bate 3/24/2	2014
Pal Ohl. On -	
Signature 1	

### **Short Environmental Assessment Form**

Part 1 - Project Information (To be completed by Applicant or Project Sponsor)

Applicant/Sponsor: APOGEE TRANSLITE, INC.
Project Name: APOGEE TRANSLITE, INC.
Project Location:
SCTM#
Precise Location- Municipality/County:
(Street address and road Intersections, prominent land marks, etc., or provide map)
Is Proposed Action New Expansion Modification/ Alteration
Describe Project Briefly:
Amount of Land Affected (initially) acres (ultimately) acres
Will proposed action complies with existing zoning or other existing land use strictions?
What is present land use in vicinity of project? ResidentialIndustrialCommercialAgriculturePark / Forrest/ Open SpaceOther Describe:

# Prepared by Project Sponsor

Notice: This document is assigned to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form, Parts A through E. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Provide any additional information you believe will be needed to complete Parts 2 and 3.

It is expected that completion of the full EAF will be dependent on information requiring such additional work is unavailable, so indicate and specify each instance.

Name of action:
Location of Action (include Street address, Municipality, County)
Location of Applicant/Sponsor:
Business Telephone:
Address
City/ PO:
State:
Zip Code:
Name of Owner (if different):
Business Telephone:
Address:
City/PO:
State:

Zip Code:

A. Site Description: Physical setting of overall project, both developed and undeveloped areas: 1. Present land use: Urban Industrial Commercial Resident (suburban) \_Rural (non-farm) Forest Agriculture \_Other Total acreage of project area: \_\_\_ acres. Approximate Acreage Presently After Completion Meadow or Brush land (Non Agricultural) acres acres Forested \_ acres \_acres Agricultural (includes orchards, croplands, pasture, etc.) acres acres Wetland (freshwater or tidal as per articles 24, 25 of ECL) acres acres Water Surface Area acres acres Unvegetate (rock, earth or fill) acres acres \_ \_acres Roads, Buildings, Other Paved Surfaces acres \_\_\_acres\_\_\_acres Other: (indicate type) 3. What is the predominant soil type (s) on project site? a.. Soil Drainage: moderately well drained \_\_\_\_\_% of site \_\_poorly drained \_\_\_\_% of site b. If any agricultural land is involved, how many acres of soil are classified within soil group c. 1 through 4 of the NYS Classification System? acres. (See NYCRR 370). 4. Are there bedrock outcroppings on project site? \_ a. What is the depth to bedrock? \_\_\_\_ (in feet) 5. Approximate percentage of proposed project site with slopes: \_\_0-10% \_\_\_\_ 10-15% \_\_\_\_ 15% or greater 6. Is project substantially contiguous to, or contain a building, site or district, listed on the State or National Registers of Historic Places: \_\_\_\_\_yes \_\_\_\_no

Please complete each question- Indicate N.A. if not applicable

7.	Is project substantially contiguous to a site listed on the Register of National Natural  Landmarks: yes no
8.	What is the depth of the Water Table? (in feet)
9.	Is the site located over a primary, principal or sole source aquifer? yesno
10.	Does hunting, fishing or shell fishing opportunities presently exist in the project area?  Yes no
11.	Does project site contain any species of plant or animal life that is identified as threatened or endangered? Yes no According to Identify each species
12.	Are there any unique or unusual land forms on the project site? (i.e. cliffs, dunes, other geological formations)yes no  Describe
13.	Is the project site presently used by the community or neighborhood as an open space or recreation area?yes no  If yes explain
14.	Does present site include scenic views known to be important to the community? yesno
15.	Are there streams within or contiguous to project area? Yes no a. Name of stream and name of river to which it is tributary:
16.	Lakes ponds, wetland areas within or contiguous to project area:  a. b. size
17.	Is the site served by existing public utilities: yesno a. If yes, does sufficient capacity exist to allow connection? yes no b. B. If yes, will improvements be necessary to allow connection?Yes no

18.	Is the site located in an agricultural district certified pursuant to Agriculture and
	Markets Law, Article 25-AA Section 303 and 3047?Yes no
19.	ls the site located in or substantially contiguous to a Critical Environmental Area designated pursuant to article 8 of the ECL and 6 NYCRR 617? _ Yes _ no
20.	Has the site ever been used for disposal of solid or hazardous wastes?yes no
	B. Project Description
	<ol> <li>Physical dimensions and scale of project, (fill in dimensions as appropriate)         <ul> <li>Total contiguous acreage owned or controlled by project sponsors</li></ul></li></ol>
	<ol> <li>How much natural material, (i.e. rock, earth, etc.) will be removed from the site?</li> <li>tons/cubic yards.</li> </ol>
	3. Will disturbed areas be reclaimed?yesno N/A a. If yes, for what intended purpose is the site being reclaimed? b. Will topsoil be stockpiled for reclamation?Yes no
	c. Will upper subsoil be stockpiled for reclamation? Yes no

4.	How many acres of vegetation, (trees, shrubs, ground covers) will be removed from site: acres
5.	Will any mature forest, (over 100 years old) or other locally important vegetation be removed by this project?yes no
6.	If single phase project: Anticipated period of construction months, (including demolition).
7.	If Multi-phased:  a. Total number of phases anticipated(number)  b. Anticipated date of commencement phase 1: monthyear.    (including demolition)  c. Approximate completion date of final phase: month year  d. Is phase 1 functionally dependent on subsequent phases? yes no
8.	Will blasting occur during construction? Yes no
9.	Number of jobs generated:  a. during construction  b. after project is complete
10.	Number of jobs eliminated by this project .
11.	Will project require relocation of any projects or facilities? Yes no If yes explain
12.	Is surface liquid waste disposal involved? Yes no a. If yes, indicate type of waste, (sewage, industrial, etc.) and amount
12.	Is subsurface liquid waste disposal involved?yes_no.  Explain:
14.	Will surface area of existing water body increase or decrease by proposal?yes no Explain;
	Is project or any portion of project located in a 100 year flood plain?yes no

<ol><li>16. Will the project generate solic</li></ol>	d waste	? yesno
<ul> <li>a. If yes, what is the arr</li> </ul>	ount pe	er monthtons)
<li>b. If yes, will an existing</li>	solid w	vaste facility be used?yes no
c. If yes, give name		
<li>d. Will any wastes not g</li>	o into a	sewage disposal system or into a sanitary
landfill?Yes		
e. If yes, explain	<del> </del>	
17. Will the project involve the dis	sposal o	of solid waste? yes no
		d rate of disposal? tons/month.
		d site life? years.
18. Will project use herbicides or	pesticio	desyes no
19. Will project routinely produce	odors (	(more than one hour a day}?
yes no		
20 Mill project produce enerating	a noiss	eveneding the legal ambient point levels?
yes no	g noise	exceeding the local ambient noise levels?
21. Will project result in an increa	se in er	neray use?
yes no		<b>3.</b>
<del></del> -		
22. If water supply is from wells,	indicate	pumping capacity gals/min.
23. Total anticipated water usage	per da	ygals/day.
	ate or F	ederal Funding? yes no
If yes, explain		
25. Approvals required:		TypeSubmittal Date
City, Town, Village Board	yes	no
City, Town, Village Plan Bd.	yes	no
City, Town, Zoning Board	yes	no
City, County, Health Dept.	yes	no
Other Local Agencies	yes	no
Other Regional Agencies	yes	no
State Agencies	yes	no
Federal Agencies	yes	no

# C. Zoning and Planning Information

1.	Does proposed action involve a planning or zoning decisionyes no If yes, indicate decision required:			
	zoning amendment zoning variance special use permit subdivision site plan new revision of master plan			
	resource management planother			
2.	What is the zoning classification of the site?			
3.	What is the maximum potential development of the site if developed as permitted by the proposed zoning?			
4.	What is the proposed zoning of the site?			
	What is the maximum potential development of the site if developed as permitted by the proposed zoning?			
6.	Is the proposed action consistent with the recommended uses in adopted local land use plans? yesno			
7.	What are the predominant land use(s) and zoning classifications within a % mile radius of proposed action?			
	Is the proposed action compatible with adjoining/surrounding land uses within a % mile? yesno			
9.	If the proposed action is the subdivision of land, how many lots are proposed?			
	Will proposed action require any authorization(s) or the formation of sewer or water districts?yes no			
11.	Will the proposed action create a demand for any community provided services (recreation, education, police, and fire protection)?yes no			
	if yes, is existing capacity sufficient to handle projected demand?yesno			
	Will the proposed action result in the generation of traffic significantly above present levels?yes no			
	If yes, is the existing road network adequate to handle the additional traffic?			
	_ yes no			

_			
13	Intorm	STIANS	l Details

Attach any information as may be needed to clarify your project. If there are or may be any adverse impacts associated with your proposal. Please discuss such impacts and the measures which you propose to mitigate or avoid them.

### E Verification

I certify that the information provided above	e is true to the best of my knowledge.			
Applicant /Sponsor Name:				
Signature:	Date:			
If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with the assessment.				
Project Manager:				
Signature:	Date:			

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# E Verification

I certify that the information provided above is true to the best of my	knowiedge.			
Applicant /Sponsor Name:  Signature: Date:	<u>=3/24/2014</u>			
If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with the assessment.				
Project Manager:				
Signature: Date				

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