

Babylon Industrial Development Agency

ROBERT STRICOFF
CHIEF EXECUTIVE OFFICER

Name: DWS Associates, Inc. Address: 240 S. fehrway, Bayshore, NY 11706 Phone Number(s):					
Phone Number(s):					
Fax Number(s)					
E-mail Address:					
Website Address: www.dwsprinzing.com					
Applicant EIN Number:					
Application Date:					
1. Financial Assistance Requested (check applicable option(s)):					
☐ Bond Financing ☐ Straight Lease					
2. Officer of Applicant serving as contact person:					
Firm: D WS					

47 WEST MAIN STREET, SUITE 3, BABYLON, NY 11702 - TEL: (631) 587-3679 FAX: (631) 587-3675

WEBSITE: WWW.BABYLONIDA.ORG
E-MAIL: INFO@BABYLONIDA.ORG

3. Attorney of Applicant:

Name: James Mash	Firm: O'Reilly, Mass, Corresull
Phone #: 516.741-1717	Fax #: 516. 741-1717
E-mail Address:	Addressiand Old Country Rd
I marshe onclaw.	

4. CFO/Accountant of Applicant:

Firm: VWS
Fax #: 631-667-07 04
Address: 240 S. fehrway
Bayshore: NY 11706

5. Financial Advisor or Consultant (if applicable):

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

6.	Applicant is (check one of the following, as applicable):				
	☐ General Partnership	☐ Limited Partnership	C Corporation		
	S Corporation	☐ Limited Liability Company	☐ Natural Person		
	☐ 501(c)(3) Organization	Other (specify):			
7.	Are any securities of Applicant p	ublicly traded?			
	☐ Yes 🖼 No				
8.	Applicant's state of incorporation	or formation:			
9.	Applicant's date of incorporation	or formation: 1865			
10.	. States in which Applicant is qual	lified to do business:			
11.	. Please provide a brief description	n of Applicant and nature of its business	s:		
•	Printer - La food + ben	ebel + packaga erage andustri-	es.		

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. Please check all that apply:					
0	Applicant or an Affiliate is the fee simple owner of the Project realty.				
	Applicant or an Affiliate is no	t currently, but expects to be the fee si	mple owner of the Project realty.		
ū	Applicant or an Affiliate is not the owner of the Project realty, but is the occupant of a material portion thereof for the conduct of its business pursuant to a lease or other occupancy agreement.				
Q	Applicant or an Affiliate is not the owner of the Project realty, but expects, immediately following the closing, to be the occupant of a material portion thereof for the conduct of its business pursuant to a lease or other occupancy agreement.				
•	None of the above categories fully describe Applicant and its relation to the Project realty, which may be more accurately described as follows (please provide copies of supporting documentation, as applicable):				
otl	13. If a special-purpose entity ("SPE") that is owned and controlled by the Applicant will own or otherwise control the Project realty, the SPE will be a (check one of the following as applicable):				
	☐ General Partnership	☐ Limited Partnership	☐ C Corporation		
	☐ S Corporation	☐ Limited Liability Company	☐ Not-for-profit 501(c)(3) Entity		
	☐ Natural Person	☐ Other (specify):			

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	Attitution with Applicant	SL& Hoors (Percent of Occupancy)	Lease Expiration	Lenant Business
Dus Ause.	631-667	Applicant	100%	2022	Printing
Dus Acre.	6666				0
				<u> </u>	

Project Description and Financial Information

Project Site

riet: /00	
ion: 068.00	
k(s): 01,00	
s): 012.002	0
et address and zip code: 89 North Industry Court, Deer Park, NY	11729
ing GA-Light Industrial	
a (acreage):	
are footage of existing building(s): 31,000	
nber of floors:	
nded use(s) (e.g., office, retail, etc.): Manufacturing & distribution	

- 1. Please provide the following Project information:
 - a. Please provide a brief description of the proposed Project:

Printed Labels we print and ship labels for the food and beverage industry.

b. Indicate the estimated date for commencement of the Project:

2/1/2010

c. Indicate the estimated date for the completion of the Project:

4/1-/2010

d. Will the Project require any special permits, variances or zoning approval?

☐ Yes No

If Yes, please explain:

e. Is any governmental entity intended or proposed to be an occupant at the Project site?

If Yes, please explain:

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

PROJECT COSTS

PROJECT FUNDING

Land acquisition	Bonds	
Building acquisition	Loans	
New construction	Affiliate/employee loans	
Renovations	Company funds	
Fixed tenant improvements	Other (explain)	
Machine and/or equipment		
Soft costs		
Furnishings		
Other (explain)		
Total Project Costs	Total Project Funding Sources	

Possible interior and mechanical improvements
to be determined "

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. Has Applicant, or any Affiliate or Principal, ever received, or is any such person or entity

	currently receiving, financial assistance or any other kind of discretionary benefit from any local, state or federal governmental entity or agency, or any public authority or public benefit corporation, or any local development corporation?			
	☐ Yes ☐ No If Yes, please provide details on an attached sheet.			
pul	ase note: local, state and federal governmental entities or agencies, public authorities or olic benefit corporations, and local development corporations, shall be referred to as "Public tit(y)(ies)."			
2.	Has Applicant, or any Affiliate or Principal, or any existing or proposed occupant at the Project site, obtained, or is any such person or entity in the process of obtaining, or contemplating obtaining, other assistance from the Babylon IDA?			
	Yes No If Yes, please provide details on an attached sheet.			
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 at 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.	covered above (e.g., jud	igment liens,	r Principal, have any contingent liabilities not already lis, pendens, other liens, etc.)? Please include mortgage linary course of business only if in default.	
	☐ Yes	U 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

6. List major customers:

Company Name	Address	Contact	Phone
Apple + Rue	Post	Washington, NY	5/6-621-1122
Nirvana	Forest		315-942-4900
Brooklyn Brly	Comp Mil	ton; NY	845-795-2 171 716-795-9 930
Mayer Bres	<u> Bar</u>	- · / i/	315-624-2400
Work Barnsi	Co. UFI		781-830-8200
Paszene	C	anton, MA	101-020-00

7. List major suppliers:

Company Name	Address	Contact	Pinone
Clipford Appear	Harti	orl, CT	
Grushic Parper	Central	Islip, MY	631-761-9700
mid her low	Broad		708-345-7/7
General Porces	Nationa	Herenos, PA	724-224-350
James Survey	Neur	AC 70.01-	973-589-7800
Promun Co.	Tota	un, UD.	1713-8/2-090

8. List unions (if applicable):

Company Name	Address	Contact	Phone

9.	List banks/current accounts:			

10. List licensing authorities, if applicable:

Company Name	Address	Contact	Phone

Project Description and Financial Information

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 by Applicant,

this 3 day of December 2009:

Name of Applicant:

By:

Printed Name of Signer:

Title of Signer:

Signature:

Retail Questionnaire

1.	Will any portion of the Project consist of facilities or property that are or will be primarily used in making retail sales of goods to customers who personally visit the Project?					
		☐ Yes	™ No			
2.	regi: prin	stered vendor under A	1 is "Yes," will the applicant or any other project occupant be a cricle 28 of the Tax Law of the State of New York (the "Tax Law") retail sale of tangible personal property" (as defined in Section 110)?			
		□Yes	□No			
3.	Will	l any portion of the P I in making retail sale	roject consist of facilities or property that are or will be primarily s of services to customers who personally visit the Project?			
		☐ Yes	₽ No			
4.	will	be expended on such	1 or question 3 is "Yes," what percentage of the cost of the Project facilities or property primarily used in making retail sales of goods who personally visit the Project? percent			
5.	If th	e answer to question 3 percent, indicate wh	I or question 3 is "Yes," and the answer to question 4 is more than nether any of the following apply to the Project:			
	a. '	Will a not-for-profit c	orporation operate the Project?			
		☐ Yes	₩ No			
		Is the Project likely to Babylon?	o attract a significant number of visitors from outside the Town of			
		🗅 Yes	No			
	C.	Would the Applicant IDA, locate the related	, but for the contemplated financial assistance from the Babylon d jobs outside the State of New York?			
		Yes	No			

- d. Is the predominant purpose of the Project to make available goods or services that would not, but for the Project, be reasonably accessible to Town of Babylon residents because of a lack of reasonably accessible retail trade facilities offering such goods or services?
 - ☐ Yes No
- e. Will the Project be located in one of the following: (a) an area designated as an economic development zone pursuant to Article 18-B of the General Municipal Law; or (b) a census tract or block numbering area (or census tract or block numbering area contiguous thereto) that, according to the most recent census data, has (i) a poverty rate of at least 20 percent for the year to which the data relates, or at least 20 percent of its households receiving public assistance, and (ii) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates?
 - □ Yes No
- 6. If the answers to any of subdivisions (c) through (e) of question 5 are "Yes," will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York?
 - If "Yes", please furnish details in a separate attachment.
- 7. If the answers to any of subdivisions (a) through (e) of question 5 are "Yes," please furnish details in a separate 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: DWS Associates, Inc. By:	Printed Name of Signer: 7	Stail
Signature: /2/03/09	Title of Signer: President	

Anti-Pirating Questionnaire

1.	Will the completion of the Project result in the removal of a plant or facility of the Applicant, or of a proposed occupant of the Project, from an area in New York State (but outside of the Town of Babylon) to an area within the Town of Babylon? Yes No
	If "Yes," please provide the following information: Address of the to-be-removed plant or facility: 240 South tehn way Bay Shore, N.Y. 11706
	Bay Shore, N.Y. 11706 Names of all current occupants of the to-be-removed plant or facility: DWS Associates, Inc.
	elle DWS Printing
2.	Will the completion of the Project result in the abandonment of one or more plants or facilities of the Applicant, or of any proposed occupant of the Project, located in an area of New York State other than the Town of Babylon?
	Yes □No
	If "Yes," please provide the following information: Addresses of the to-be-abandoned plant(s) or facility(ies): 240 South Fehr Way Bay Shore NY 11706 Names of all current occupants of the to-be-abandoned plants or facilities:
	DWS Associates, Inc. 2/6/A DWS Printing
3.	Will the completion of the Project in any way cause the removal and/or abandonment of plants and facilities anywhere in New York State (but outside of the Town of Babylon)?
	Yes 🗆 No
	If "Yes," please provide all information relevant to such future removal and/or abandonment:
	DWS Associates, the is simply
	DWS Associates, the is simply relocating from Bay shore to Deer Park.

If the answer to either question 1, 2 or 3, is "Yes," please continue and answer questions 4 and 5.

4. 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

5. 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 DN

If the answer to question 4 and/or question 5 is "Yes," please provide on a separate sheet of paper a detailed statement explaining same.

DWS has reached capacing at it's current location, 240 s february Bayshare, M. This is a relocation project to allow future grown of the business.

٠.

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

Name of Applicant:

DWS Associates, Inc. By: Printed Name of Signer: Thomas Stails

Signature: Title of Signer: Press dear

Date: 12/03/09

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: DWS Associates, Inc

Address:

240 South Febr

Phone Number(s): 631-66	7-6666	
I.R.S. Employer ID Number:		
Department of Labor. Registration N	umber:	
Project Location:		
How many employees does Application submission?	oplicant employ in the Town of B	abylon at the time of
Number	Average Annual Salary (FT) Hourly Rate (PT)	On average Part –time Workers Hours per week
Full Time Part Time	\$	
2. How many employees referred to Application submission?	in question 1 reside in the Town of I	Babylon at the time of
Number	Average Annual Salary (FT) Hourly Rate (PT)	On average Part –time Workers Hours per week
Full Time	\$ \$	<u>Ø</u>

DWS Associates, Inc.

On average Part --time Workers

Hours per week

3. How many employees does Applicant employ outside of the Town of Babylon but in New

4. How many employees does the applicant employ at the project location (annual average) at

Average Annual

Salary (FT) Hourly Rate (PT)

York State at the time of Application submission?

Number

Full Time 3/Part Time 1

Number Average Annual Salary (FT) Hourly Rate (PT) Full Time Part Time S Average Part - time Workers Hours per week Full Time Part Time S Average Full-time Ful	the time of	f Application si	ıbmission?						
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. Year Number of Average Number of Average Hourly Hours per Annual Estimated Part-time Part-time		Number	Salar	y (FT)		Par	ttime Wo		
five calendar years following the completion of the Project. Year Number of Full-time Full-time Employees Part-time Employees Part-time Employees Part-time Part-		Ø	\$ \$	Ø .			Ø		
Full-time Employees Full-time Employees Rate Week Part-time Part-t						December	31 of each	of the	
2 33 64,000 / 11,00 20 2,123,000 3 34 64,500 / 11,50 20 2,280,500 4 35 64,800 / 12,00 20 2,280,500 5 36 65,200 / 12,00 20 2,380,500 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 101-5/6/101 / 200 750-11.00 per how 12 employees Killad Labor 12.00-35.00 per how 9 employees Clerical 13.00-3600 per how 4 employees Creative 35-3500 per how 2 employees Monagnet 35-3500 per how 2 employees	Year	Full-time	Annual Full-time	Part-time	Hourly Rate	Hours per week	Annual Part-time	Estimated Annual	
2 33 64,000 / 11,00 20 2,123,000 3 34 64,500 / 11,50 20 2,280,500 4 35 64,800 / 12,00 20 2,280,500 5 36 65,200 / 12,50 20 3,360,200 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay leve	1	32	\$ 62.500	1	9/0.50	20		2.011.000	
6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupation of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupation of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupation of the workforce at the Project Location. Please describe p		33		1	11,00	20			
6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 201-5/2/12/12/12/12/12/12/12/12/12/12/12/12/1		34	64,500		11,50	20		2,205,000	
6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels and number of employees at each pay level. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupational composition of the workforce at the Project Location. Please describe pay levels. 6. Describe the occupation of the workforce at the Project Location. Please describe pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay levels. 6. Describe pay levels and number of employees at each pay level			64,800				ļ.	2,280,500	
describe pay levels and number of employees at each pay level. on-skilled labor \$7.50-\$11.00 per how 12 employees Cilled Labor \$12.00-\$35.00 per how 9 employees Clerical \$13.00-\$35.00 per how 4 employees Treative \$25-3500 per how 2 employees Monagnet \$35-50 per how 2 employees	5	36_	65,200		12,50	00		12,360,240	,
reative \$ 25-3500 per hour 2 employees Management \$ 35-50 per hour 2 employees	describe pay levels and number of employees at each pay level. 101-5/5/16/ abor 7.50-4/1.00 per how 12 employees								
Monagenest \$35-50 per han 2 employees				- 0	han 1	4	empl	oyees	<u></u> _
				•		2		1	
				• ,					

mployment 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 Applicant; 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:	DWS Realty, LLC 10 Haven Court, Cen	
Address:	10 Haven Court, Cen	terport N.V. 1172/
Phone Number(s):	•	•
I.R.S. Employer ID Nu	ımber:	
Department of Labor.	Registration Number:	
Project Location:		
How many emplo Application submit		e Town of Babylon at the time of
Number	r Average Annual Salary (FT) Hourly Rate (PT)	On average Part –time Workers Hours per week
Full Time Part Time	\$ \$ \$ \$	<u></u>
2. How many employ Application submi	yees referred to in question 1 reside in ission?	the Town of Babylon at the time of
Number	Average Annual Salary (FT) Hourly Rate (PT)	On average Part –time Workers Hours per week
Full Time Part Time	\$ <u>0</u> \$ <u>0</u>	

DWS Realty, LLC

3.	How many employees does York State at the time of A	s Applicant employ outside of the pplication submission?	Town of Babylon but in New
	Number	Average Annual	On average
		Salary (FT)	Part -time Workers
	Ø	Hourly Rate (PT)	Hours per week
	Full Time	\$ \(\int_{3} \)	>-/
	Part Time	\$	

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

	Number	Average Annual Salary (FT)	On average Part –time Workers
	$\langle b \rangle$	Hourly Rate (PT)	Hours per week
Full Time Part Time		\$ \$	

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.

Year	Number of Full-time Employees	Average Annual Full-time Salary	Number of Part-time Employees	Average Hourly Rate Part-time	Average Hours per week Part-time	Average Annual Part-time Salary	Total Estimated Annual Payroll
1			1 1	-			
2	./.	1 1					
3						ļ	
4							
5						<u> </u>	

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

DWS Realty, LLC is just a holding company. No assets or employees for Several years.

- 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.
- 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.

details. Yes, it is the intention of DWS Associates, Inc. to add employees from the current # of 32.

All employees from current location wiel be trustered to the new location in Over Park.

l 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:

DWS Associates, Tk. By: Printed Name of Signer: Thomas Stail

Signature: Pres', demander

Signature: Pres', demand

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.

- 1. List all of the labor union contracts and collective bargaining arrangements to which any of the Companies is currently a party:
- 2. Have any of the Companies during the current calendar year and the five calendar years preceding the current calendar year experienced labor unrest situations, including pending or threatened labor strikes, hand billing, consumer boycotts, mass demonstrations or other similar incidents?

Yes No If Yes, please explain:

3. Have any of the Companies received any federal and/or state unfair labor practices complaints asserted during the current calendar year and the three calendar years preceding the current calendar year?

Yes UNO If Yes, please describe and explain current status of complaints:

An employee was terminated for striking his supervisor,
Subsequently, he filed a false claim of discrimination
which is being examined currently by the DOL.

4. Do any of the Companies have pending or threatened requests for arbitration, grievance proceedings, labor disputes, strikes or disturbances during the current calendar year and the three calendar years preceding the current calendar year?

☐ Yes No If Yes, please explain:

	X	Yes	□ No	If No, pleas	e provide det	tails on an	attached sheet.		
	Wh	at steps do 1 Comp	the Companies to Neted Fe	take as a matte	r of course to	o ascertain	their employees' e	employment status?	
			es complete an ation (1-9) form		quired docu	mentation	related to this inc	quiry, such as Empl	oyment
	X	Yes	□ No	If No, pleas	e explain:				
6.	or fee	deral departi or their work	ment, agency or ring conditions	commission l and/or their w	naving regula ages, inspect	atory or over	ersight responsibil mises of any Comp	or or any other local, ity with respect to we any or audited the pa ears preceding the cu	orkers ayroll
		l Yes	No						
	e: th	ntity and what may hav	en the inspecti	on occurred. I and any fines	Briefly descr	ibe the ou	tcome of the inspe	the inspecting govern ction, including any osed upon the Comp	reports
7.	an en		npany incurred, efit plan, includ			y liability	(including withdra	wal liability) with re	spect to
	I i	f the answer	r to this question I entities that ha	on is "Yes," o	uantify the literature	liability ar with the Co	id briefly describe ompany in connect	its nature and refer ion with the liability	to any
	tł d	ne current c	alendar year, th	e subject of a	ny complain	ts, claims,	time during the the proceedings or lit eneral treatment of	ree calendar years pr igation arising from Femployees?	eceding alleged
			to this is "Yes, Il harassment.	" provide deta	ils. When an	swering th	is question, please	consider "discrimina	tion" to
		As	previou	sly ind	licated	l in	Question	# 3.	

5. Are all employees of the Companies permitted to work in the United States?

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

Name of Applicant:

DUS Associates, FR By: Printed Name of Signer: Two STails

Signature:

Date: 12/8/09

In the n	natter of the Application of:	FULL DISCLOSURE AFFIDAVIT
P.O. Address		AITBATT
to	the TOWN OF BABYLON	
(title of	f applicable Board(s)	x
STATE	OF NEW YORK	
COUNT) ss. : TY OF SUFFOLK	
		being duly sworn, deposes and says
1.	of Babylon to fulfill requireme	deponent and intended to be filed with the above board of the Town onts of Article XXIII of the Building Zone Ordinance of the Town of ove-entitled Application made or intended to be made affecting as follows:
2.	The name and address of the A DWS ASSOCIA 340 South Bay Shore	ites, Inc.
3.	The name and address of the p Thomas Stail Crais Smith	
4.	in this Application direct or inc an interest as a contract vendor lessee, contract lessee, holder mortgagor, mortgagee, holder lien, guarantor, assignee, agent arises as the result of advancin	
	Thomas Sta Andrew St	aib I fine pt. Greenlawn MY 11720
5.		l persons who will receive any benefit as a result of their work, 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:
7.	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:
vone-N/A	
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:
Alm	
	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:
NONE	
	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:
NONE	
	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:
NOVE	
	The undersigned affirms the truth and completeness of the foregoing under penalty of perjury:
	Sworn before me this day 3 day of Occambo 2009



CERTIFICATION FOR BOND

(Name of	Chief Executive Officer of company
submitting application) deposes and says that he is the(Co	Office of the comment of the comment
in the attached application: that he has read the foregoing application the same is true to his knowledge.	n and knows the contents thereof; that
Deponent further says that the reason this verification is being made (Company Name) is because	by deponent and not by e the said Company is a corporation.
The grounds of deponent's belief relative to all matters in the said at own personal knowledge, are investigations which deponent has cau matter of this application as well as information acquired by depone officer of and from the books and papers of said corporation.	sed to be made concerning the subject
As an officer of said corporation (hereinafter referred to as the "appl agrees that applicant shall be and is responsible for all costs incurred Development Agency (hereinafter referred to as the "Agency") actir connection with this application and all matters relating to the issuar whatsoever, the applicant fails to conclude or consummate necessary reasonable or specified period of time to take reasonable, proper, or abandons, cancels, or neglects the application or if the applicant is uthe total bond issue required, then upon presentation of invoice, appl agents or assigns, all actual cost incurred with respect to the applicative fees to general and bond counsel for the Agency. Upon successful cissue, the applicant shall pay to the Agency an administrative fee set amount equal to 1% of the total project cost financed by the bond is closing. The Agency's Bond Counsel's fees, its general counsel's fee considered as a cost of the project and included as party of any resulting the project of the project and included as party of any resulting the project and inclu	I by the Town of Babylon Industrial ig on behalf of the applicant in nee of bonds, If, for any reason y negotiations or fails to act within a requested action or withdraws, nable to find buyers willing to purchase licant shall pay to the Agency, its tion, up to that date and time, including conclusion and sale of the required bond by the Agency not to exceed an sue, which amount is payable at ees and the administrative fee may be
Chie	Executive Officer of Company
Sworn to before me this	
day of, 2007	
(Seal)	

CERTIFICATION
submitting application) deposes and says that he is the President (title) of (title) of (Company Name), 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 \[\begin{align*}
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 on and all matters relating to the lease back transaction. 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, 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 of project counsel and general counsel for the Agency. 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, which amount is payable at closing.
Chief Executive Officer of Company
Sworn to before me this
DEBRA TELLEKAMP Notary Public, State of New York No. 01TE5039338 No. 01TE503938 No. 01TE503938 No. 01TE503938
Notary Public, Stato39338 No. 01TE5039338 No. 01TE5039338 Qualified in Suffolk County Qualified in Suffolk County Commission Expires February 21, 20

Project I.D). Numbei	г	
FIUJECT I.C). IYUIIIDEI		

Short Environmental Assessment Form

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

1.	Applicant/Sponsor: DWS Associales, Inc-
2.	Project Name:
3.	Project Location:SCTM#
4.	Precise Location- Municipality / County:
	(Street address and road intersections, prominent land marks, etc. or provide map)
5.	Is Proposed Action New Expansion Modification / Alteration
6.	Describe Project Briefly:
	moving relocating existing printing facility from
	moving/relocating existing printing facility from Bay Shore to Deer Park, NY.
7.	Amount of Land Affected (initially) acres (ultimately) acres
8.	What proposed action complies with existing zoning or other existing land use restrictions?
9.	What is present land use in vicinity of project? Residential
	Industrial
	Park / Forrest/ Open Space
	Other
	Describe:

10.	Does action involve a permit approval, or funding, now or ultimately from any other governmental agency:
11.	Does any aspect of the action have a currently valid permit or approval?
12.	As a result of proposed action will existing permit / approval require modification? yesno
	I certify that the information provided above is true to the best of my knowledge: Applicant / Sponsor: Name Passociares Date 12/8/09 Signature

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 / Spons	or:
Business Telephone:	UI.
Address	
City/ PO:	
State:	
Zip Code:	
Name of Owner, (if different):	N+G Realty Co.
Business Telephone:	631-242-9780
Address:	90 W. Industry Ct.
City/PO:	Deer Park
State:	NY
Zip Code:	11729
	Property Owner

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

A. Site Description:

Physical setting of overall project, both developed and undeveloped areas:

1. Present land use:

1.	Present land use:UrbanIndustrialCommercialResident (suburban)Rural (non-farm)ForrestAgriculture Other		
2.	Total acreage of project area: 1,8 acr	es,	
App	proximate Acreage	Presentl y	After Completion
Me	adow or Brush land (Non Agricultural)	acres	acres
	ested	acres	acres
	icultural (includes orchards, croplands, pasture, etc.)	acres	acres \
	tland (freshwater or tidal as per articles 24,25 of ECL)	acres	acres
	ter Surface Area	acres	acres
	vegetate, (rock, earth or fill)	acres	acres
	nds, Buildings, Other Paved Surfaces	acres	acres
Oth	ICF (indicate type)	acres	acres
	What is the predominant soil type (s) or a. Soil Drainage: well drained moderately well drained poorly drained b. If any agricultural land is involved, h soil group c. 1 through 4 of the NYS Classification Are there bedrock outcroppings on pro	% of site ained% of site% of site now many acres of so n System?acre	es. (See NYCRR 370).
	a. What is the depth to bedrock?	(in feet)	
	Approximate percentage of proposed p0-10%10-15%15% or greater		
6.	Is project substantially contiguous to, of the State or National Registers of Histo		

existing site to remain uncharged

7.	Is project substantially contiguous to a site listed on the Register of National Natural Landmarks:yesno
8.	What is the depth of the Water Table? Nh (in feet)
9.	Is the site located over a primary, principal or sole source aquifer?vesno
10.	Does hunting, fishing or shell fishing opportunities presently exist in the project area?
11.	Does project site contain any species of plant or animal life that is identified as threatened or endangered?yesno 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)yesno Describe
13.	. Is the project site presently used by the community or neighborhood as an open space or recreation area?yesno 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
16	a. b. size VA
17	a. If yes, does sufficient capacity exist to allow connection?

18	. Is the site located in an agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA Section 303 and 3047?yesno
19	designated pursuant to article 8 of the ECL and 6 NYCRR 617?yesno
20	. Has the site ever been used for disposal of solid or hazardous wastes?yesno
	B. Project Description
N/A	 Physical dimensions and scale of project, (fill in dimensions as appropriate) Total contiguous acreage owned or controlled by project sponsorsacres. Project acreage to be developed: acres initiallyacres ultimately. Project acreage to remain undeveloped: acres. Length of project in miles: (if appropriate). If the project is an expansion, indicate percent of expansion proposed%. Number of off-street parking spaces existing proposed. Maximum vehicular trips generated per hour (upon completion of project)? If residential: number and type of housing units:
	2. How much natural material, (i.e. rock, earth, etc.) will be removed from the site?tons/cubic yards.
	3. Will disturbed areas be reclaimed?yesnoN/A a. If yes, for what intended purpose is the site being reclaimed?
	b. Will topsoil be stockpiled for reclamation?yes

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?yesno
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:monthyear d. Is phase 1 functionally dependent on subsequent phases?no
8.	Will blasting occur during construction?yesno
10.	Number of jobs generated: a. during construction b. after project is complete Number of jobs eliminated by this project Will project require relocation of any projects or facilities?
12	a. If yes, indicate type of waste, (sewage, industrial, etc.) and amount
13	. Is subsurface liquid waste disposal involved?yesno. Explain:
14	. Will surface area of existing water body increase or decrease by proposal?yesno Explain:
15	. Is project or any portion of project located in a 100 year flood plain? yesno

a. If yes, what is the amount per monthno b. If yes, will an existing solid waste facility be used?no c. If yes, give name d. Will any wastes not go into a sewage disposal system or into a sanitary landfill?yesno e. If yes, explain					
17. Will the project involve the disposal of solid waste?					
18. Will project use herbicides or pesticidesyesno					
19. Will project routinely produce odors, (more than one hour a day)? yesno					
20. Will project produce operating noise exceeding the local ambient noise levels? yesno					
21. Will project result in an increase in energy use?yesno					
	Ja				
22. If water supply is from wells, i	indicate pumping capacitygals/min. NA				
22. If water supply is from wells, i	indicate pumping capacitygals/min.				
23. Total anticipated water usage	indicate pumping capacitygals/min. NA e per daygals/day. NA cate or Federal Funding?yesno				
23. Total anticipated water usage	e per daygals/day. N(A .ate or Federal Funding?yesno				
23. Total anticipated water usage 24. Does project involve Local, Sta	e per daygals/day. NA ate or Federal Funding?yesno				
23. Total anticipated water usage 24. Does project involve Local, Statif yes, explain Sashir 25. Approvals required:	e per daygals/day. NA ate or Federal Funding?yesno				
23. Total anticipated water usage 24. Does project involve Local, Startif yes, explain 25. Approvals required: City, Town, Village Board City, Town, Village Plan Bd.	gals/day. N(A tate or Federal Funding?				
23. Total anticipated water usage 24. Does project involve Local, Statif yes, explain 25. Approvals required: City, Town, Village Board	e per daygals/day. NA sate or Federal Funding?yes no \(\) A Tox Abarement Type Submittal Date yes no				
23. Total anticipated water usage 24. Does project involve Local, Startif yes, explain 25. Approvals required: City, Town, Village Board City, Town, Village Plan Bd.	gals/day. NA ate or Federal Funding?				
23. Total anticipated water usage 24. Does project involve Local, Statif yes, explain Sablo 25. Approvals required: City, Town, Village Board City, Town, Village Plan Bd. City, Town, Zoning Board	rate or Federal Funding?				
23. Total anticipated water usage 24. Does project involve Local, Starlf yes, explain 25. Approvals required: City, Town, Village Board City, Town, Village Plan Bd. City, Town, Zoning Board City, County, Health Dept.	rate or Federal Funding?				
23. Total anticipated water usage 24. Does project involve Local, Statif yes, explain 25. Approvals required: City, Town, Village Board City, Town, Village Plan Bd. City, Town, Zoning Board City, County, Health Dept. Other Local Agencies	rate or Federal Funding?				

C. Zoning and Planning Information

	Does proposed action involve a planning or zoning decisionyesno If yes, indicate decision required:
	zoning amendmentzoning variancespecial use permit
	subdivisionsite plannew revision of master plan
	resource management plan other
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?
5.	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 ½ mile radius of proposed action?
8.	Is the proposed action compatible with adjoining/surrounding land uses within a ¼ mile?yesno
9.	If the proposed action is the subdivision of land, how many lots are proposed?
10.	Will proposed action require any authorization(s) or the formation of sewer or water districts?
11.	Will the proposed action create a demand for any community provided services (recreation, education, police, and fire protection)?yesno if yes, is existing capacity sufficient to handle projected demand?yesno
12.	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?

existing of a subanged 6. I

D. Informational 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

certify that the information provided above is	· -
Applicant /Sponsor Name: Das As	sociares, lac.
Signature:	Date: 12/8/09
If the action is in the Coastal Area, and you are before proceeding with the assessment.	a state agency, complete the Coastal Assessment Form
Project Manager:	
Signature:	Date: