

**NASSAU COUNTY INDUSTRIAL
DEVELOPMENT AGENCY**

APPLICATION FOR FINANCIAL ASSISTANCE
(Straight Lease)

APPLICATION OF:

AVR CARLE PLACE TWO ASSOCIATES, LLC

APPLICANT NAME

Please respond to all questions in this Application for Financial Assistance (the "Application") by, as appropriate:

- filling in blanks;
- checking the applicable term(s);
- attaching additional text (with notation in Application such as "see Schedule H, Item # 1", etc.); or
- writing "N.A.", signifying "not applicable".

All attachments responsive to questions found in this Application should be clearly labeled and attached as Schedule H to the Application. If an estimate is given, enter "EST" after the figure. One signed original and 9 copies of the Application (including all attachments) must be submitted.

The following amounts are payable to the Nassau County Industrial Development Agency (the "Agency") at the time this Application is submitted to the Agency: (i) a \$1,000 non-refundable application fee (the "Application Fee"); (ii) a \$3,500 expense deposit for the Agency's Transaction Counsel fees and expenses (the "Counsel Fee Deposit"), (iii) a \$2,500 expense deposit for the cost/benefit analysis with respect to the project contemplated by this Application (the "Cost/Benefit Deposit"), and (iv) a \$500 expense deposit for the real property tax valuation analysis, if applicable, with respect to the project contemplated by this Application (the "Valuation Deposit"). The Application Fee will not be credited against any other fees or expenses which are or become payable to the Agency in connection with this Application or the project contemplated herein (the "Project"). In the event that the subject transaction does not close for any reason, the Agency may use all or any part of the Counsel Fee Deposit, the Cost/Benefit Deposit and/or the Valuation Deposit to defray the cost of Transaction Counsel fees and expenses, the cost of obtaining a cost/benefit analysis and/or the cost of obtaining a real property tax valuation with respect to the Project. In the event that the subject transaction does close, the Counsel Fee Deposit, the Cost/Benefit Deposit and the Valuation Deposit shall be credited against the applicable expenses incurred by the Agency with respect to the Project.

Every signature page comprising part of this Application must be signed by the Applicant or this Application will not be considered complete or accepted for consideration by the Agency.

The Agency's acceptance of this Application for consideration does not constitute a commitment on the part of the Agency to undertake the proposed Project, to grant any Financial Assistance with respect to the proposed Project or to enter into any negotiations with respect to the proposed Project.

Information provided herein may be subject to disclosure under the New York Freedom of Information Law (New York Public Officers Law § 84 et seq.) ("FOIL"). If the Applicant believes that a portion of the material submitted with this Application is protected from disclosure under FOIL, the Applicant should mark the applicable section(s) or page(s) as "confidential" and state the applicable exception to disclosure under FOIL.

11/20/13
DATE

PART I. APPLICANT

A. APPLICANT FOR FINANCIAL ASSISTANCE (If more than one applicant, copy application and complete for each applicant):

Name: AVR CARLE PLACE TWO ASSOCIATES,LLC

Address: 1 EXECUTIVE BLVD, YONKERS NY 10701

Primary Contact: STEVEN EICKELBECK

Phone: 914 965 3990 Fax: _____

E-Mail: steven.eickelbeck@avrrealty.com

NY State Dept. of Labor Reg #: N/A Federal Employer ID #: _____

NAICS Code #: _____

B. BUSINESS TYPE (Check applicable status. Complete blanks as necessary):

Sole Proprietorship ___ General Partnership ___ Limited Partnership ___

Limited Liability Company X Privately Held Corporation ___

Publicly Held Corporation ___ Exchange listed on _____

Not-for-Profit Corporation ___

Income taxed as: Subchapter S X Subchapter C ___
501(c)(3) Corporation ___ Partnership ___

State and Year of Incorporation/Organization: Delaware – September 15th, 2011

Qualified to do Business in New York: Yes X No ___ N/A ___

C. ANY ENTITY PROPOSED TO BE A USER OF THE PROJECT:

Name: Applicant will own the hotel. An independent company will operate the hotel under a franchise agreement.

Relationship to Applicant: _____

G. Is the Applicant related to any other entity by reason of more than 50% common ownership? If YES, indicate name of related entity and relationship:

YES ___ NO X

H. List parent corporation, sister corporations and subsidiaries, if any:

AVR REALTY COMPANY,LLC

I. Is the Applicant (including any parent company, subsidiary or related entity or person) or any principal(s) of the Applicant or its related entities involved in any litigation or aware of any threatened litigation that would have a material adverse effect on the Applicant's financial condition or the financial condition of said principal(s)? If YES, attach details.

YES ___ NO X

J. Has the Applicant (or any parent company, subsidiary or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, ever been involved, as debtor, in bankruptcy, creditors rights or receivership proceedings or sought protection from creditors? If YES, attach details.

YES ___ NO X

K. Has the Applicant (or any parent company, subsidiary or related entity or person) or any principal(s) of the Applicant or its related entities, ever been charged with or convicted of any felony or misdemeanor (other than minor traffic offenses), or have any such related persons or principal(s) held positions or ownership interests in any firm or corporation charged or convicted of a felony or misdemeanor (other than minor traffic offenses)? If YES, attach details.

YES ___ NO X

L. Has the Applicant (or any parent company, subsidiary or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, been cited for (or is there pending proceeding or investigation with respect to) a violation of federal, state or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, taxation, or other operating practices? If YES, attach details.

YES ___

NO X

M. Is the Applicant (or any parent company, subsidiary or related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, delinquent or have any of the foregoing persons or entities been delinquent on any New York State, federal or local tax obligations within the past five (5) years? If YES, attach details.

YES ___

NO X

N. Complete the following information for principals (including, in the case of corporations, officers and members of the board of directors and, in the case of limited liability company, members and managers) of the Applicant:

<u>Name</u>	<u>Title</u>	<u>Other Business Affiliations</u>
Allan V. Rose_	Managing Member	See attached Schedule
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do any of the foregoing principals hold elected or appointive public positions? If YES, attach details.

YES ___

NO X

Are any of the foregoing principals employed by any federal, state or local municipality or any agency, authority, department, board, or commission thereof or any other governmental or quasi-governmental organization?

YES ___

NO X

O. Operation at existing location(s) (Complete separate Section O for each existing location):

1. (a) Location: N/A
- (b) Number of Employees: Full-Time: ___ Part-Time: ___
- (c) Annual Payroll, excluding benefits: _____
- (d) Type of operation (e.g. manufacturing, wholesale, distribution) and products or services: _____
- (e) Size of existing facility real property (i.e., acreage of land): _____

(f) Buildings (number and square footage of each): _____

(g) Applicant's interest in the facility.

FEE TITLE (i.e. own) LEASE OTHER (describe below)

(h) If Applicant leases, state annual rent and lease expiration date: _____

2. If any of the facilities described above are located within the State of New York, is it expected that any of the described facilities will be closed or be subject to reduced activity? If YES, complete the attached Anti-Raiding Questionnaire (Schedule D).

YES ___ NO ___

P. Has the Applicant considered moving to another state or another location within New York State? If YES, explain circumstances.

YES ___ NO ___

N/A

Q. Does any one supplier or customer account for over 50% of Applicant's annual purchases or sales, respectively? If YES, attach name and contact information for supplier and/or customer, as applicable:

YES ___ NO X

R. Does the Applicant (including any related entity or person) or any principal(s) of the Applicant or its related entities, or any other business or concern with which such entities, persons or principal(s) have been connected, have any contractual or other relationship with the Agency or the County of Nassau? If YES, attach details.

YES X NO ~~___~~

S. Attach a brief history of the Applicant and its business/operations.
Single purpose entity formed for the purposes of owning and developing real estate on the subject property
COMPLETED IDA TRANSACTION FOR HOTEL LOCATED AT 40 WESTBURY AVE.

By signing this Application, the Applicant authorizes the Agency to obtain credit reports and other financial background information and perform other due diligence on the Applicant and/or any other entity or individual related thereto, as the Agency may deem necessary to provide the requested financial assistance.

PART II. PROPOSED PROJECT

A. Description of proposed Project (check all that apply):

- New Construction
- Addition to Existing Facility
- Renovation of Existing Facility
- Acquisition of Facility
- New machinery and equipment
- Other (specify): _____

B. Briefly describe the proposed Project, the reasons why the Project is necessary to the Applicant and why the Agency's financial assistance is necessary, and the effect the Project will have on the Applicant's business or operations:

The proposed project consists of a 4 story, 120 suite hotel to be constructed on a 2.5 acre parcel located in the Town of N. Hempstead. The applicant has been carrying the land without any income derived from it since 2005 when the original obsolete building was demolished. The company has carried the property at great expense and needs to develop the property to generate value. However, this project is only economically feasible with the benefits provided with the financial assistance of the IDA.

C. If the Applicant is unable to obtain financial assistance for the Project, what will be the impact on the Applicant and Nassau County? Would the Applicant proceed with the Project without Agency financial assistance? Describe.

Without the financial assistance of the IDA the property would remain undeveloped and continue to languish as vacant land, draining the resources of the applicant and depriving the county and the surrounding community of needed jobs and revenues. In our discussions with our lenders any financing commitments would be contingent on obtaining IDA benefits. There is a proven demand for hotel rooms in the county and the hotel would serve the local business and residential community.

D. Location of Project (attach map showing the location):

Street Address: 20 Westbury Ave.

City/Village(s): Carle Place

Town(s): North Hempstead

School District(s): Carle Place

Section: 9 Block: 663 Lot: 43

Census Tract Number: _____

Size of proposed facility real property
(i.e., acreage of land): 2.5 Acres

If exact street address is not available, please provide a survey and the most precise description available.

E. Describe the present use of the Project site: Vacant Land .

F. (a) What are the current real estate taxes on the Project site? (If amount of current taxes is not available, provide assessed value for each):

Land: \$ \$175,000 Building(s): \$

(b) Are tax certiorari proceedings currently pending with respect to the Project real property? If YES, attach details including copies of pleadings, decisions, etc.

YES X NO

G. Describe Project ownership structure (*i.e.*, Applicant or other entity):

 AVR Carle Place Two Associates, LLC

H. To what purpose will the building or buildings to be acquired, constructed or renovated be used by the Applicant? (Include description of goods to be sold, products to be manufactured, assembled or processed and services to be rendered.)

 120 Suite Hotel

I. If any space in the Project is to be leased to or occupied by third parties, or is currently leased to or occupied by third parties who will remain as tenants, provide the names and contact information for each such tenant, indicate total square footage of the Project to be leased to each tenant, and describe proposed use by each tenant:

 N/A

J. Provide, to the extent available, the information requested, in Part I, Questions A, B, E and O, with respect to any party described in the preceding response.

 N/A

K. List principal items or categories of equipment to be acquired as part of the Project:

See attached schedule

L. Will Project meet zoning/land use requirements at proposed location?

YES NO

1. Describe present zoning/land use: INDUSTRIAL B -VACANT
 2. Describe required zoning/land use, if different: N/A
 3. If a change in zoning/land use is required, please provide details/status of any request for change of zoning/land use requirements:
-
-

M. Does the Applicant, or any related entity or person, currently hold a lease or license on the Project site? If YES, please provide details and a copy of the lease/license.

YES NO

N. Does the Applicant, or any related entity or person, currently hold fee title to (i.e. own) the Project site?

YES NO

If YES, indicate:

- (a) Date of purchase: 6/7/2004
- (b) Purchase price: \$ PART OF LAND EXCHANGE
- (c) Balance of existing mortgage, if any: \$ N/A
- (d) Name of mortgage holder: N/A
- (e) Special conditions: N/A

If NO, indicate name of present owner of Project site: _____

O. Does the Applicant or any related person or entity have an option or a contract to purchase the Project site and/or any buildings on the Project site?

YES _____

NO X_____

If YES, attach copy of contract or option and indicate:

(a) Date signed: _____

(b) Purchase price: \$ _____

(c) Closing date: _____

Is there a relationship legally or by virtue of common control or ownership between the Applicant (and/or its principals) and the seller of the Project (and/or its principals)?
If YES, describe:

YES _____

NO _____

P. Will customers personally visit the Project site for either of the following economic activities? If YES with respect to either economic activity indicated below, complete the attached Retail Questionnaire (Schedule E).

Retail Sales: YES _____ NO X Services: YES X NO _____

Q. Describe the social and economic conditions in the community where the Project site is or will be located and the impact of the proposed Project on the community (including impact on infrastructure, transportation, fire and police and other government-provided services):

The site is a partly paved lot and currently vacant and unsightly. It is bounded by residential properties to the north, a hotel to the east and retail properties to the west and south. If developed the project will provide for an attractive, landscaped beneficial use to the surrounding community. The drainage infrastructure that will be built will benefit the storm water management of the site. There are no negative impacts to the fire, police, transportation or utility services anticipated for the project.

R. Identify the following Project parties (if applicable):

Architect: James L Browning Architect

Engineer: TBD

Contractors: TBD

S. Will the Project be designed and constructed to comply with Green Building Standards? (if YES, describe the LEED green building rating that will be achieved):

YES _____

NO X_____

T. Is the proposed Project site located on a Brownfield? (if YES, provide description of contamination and proposed remediation)

YES

NO

U. Will the proposed Project produce a unique service or product or provide a service that is not otherwise available in the community in which the proposed Project site is located?

YES

NO

The current hotel market is underserved and this hotel would be beneficial to the community

PART III. PROJECT COSTS

A. Provide an estimate of cost of all items listed below:

	<u>Item</u>	<u>Cost</u>
1.	Land Acquisition	\$ <u>N/A</u>
2.	Building Acquisition	\$ <u>N/A</u>
3.	Construction or Renovation	\$ <u>8,225,000</u>
4.	Site Work	\$ <u>1,000,000</u>
5.	Infrastructure Work	\$ <u>N/A</u>
6.	Engineering Fees	\$ <u>75,000</u>
7.	Architectural Fees	\$ <u>215,000</u>
8.	Applicant's Legal Fees	\$ <u>50,000</u>
9.	Financial Fees (incl. lender legal fees)	\$ <u>425,000</u>
10.	Other Professional Fees	\$ <u>120,000</u>
11.	Furniture, Equipment & Machinery (not included in 3. above)	\$ <u>2,250,000</u>
12.	Other Soft Costs (Insurance, RE Taxes Franchise Fees, Permit Fees.)	\$ <u>1,455,000</u>
13.	Other (Contingency)	\$ <u>500,000</u>
	Total	\$ <u>14,315,000</u>

B. Source of Funds for Project Costs:

a.	Bank Financing:	\$12,000,000
b.	Equity (Not including value of land, owned free and clear)	\$2,315,000
	TOTAL	\$14,315,000

C. Have any of the above costs been paid or incurred (including contracts of sale or purchase orders) as of the date of this application? If YES, describe particulars on a separate sheet. (Architectural, Engineering and Legal Fees)

YES NO

D. Has the Applicant made any arrangement for the provision of third party financing? If YES, indicate with whom (subject to Agency approval) and provide a copy of any term sheet or commitment letter issued with respect to such financing.

YES NO

TBD

E. Construction Cost Breakdown:

Total Cost of Construction: \$ 10,475,000 (sum of 3 and 11 in Question A above)

Cost for materials: \$ 4,800,000
% Sourced in County: 35 %
% Sourced in State: 65 % (incl. County)

Cost for labor: \$ 4,250,000
% Sourced in County: 30 %
% Sourced in State: 85 % (incl. County)

Cost for "other": \$ 1,425,000
% Sourced in County: 35 %
% Sourced in County: 90 % (incl. County)

PART IV. COST/BENEFIT ANALYSIS

A. If the Applicant presently operates in Nassau County, provide the current annual payroll, excluding benefits. Estimate payroll, excluding benefits, in First Year, Second Year and Third Year after completion of the Project.

	<u>Present</u>	<u>First Year</u>	<u>Second Year</u>	<u>Third Year</u>
Full-time:	\$ _____	\$ 450,800	\$ 463,500	\$ 477,405
Part-time:	_____	581,000	598,430	616,382
Seasonal:	_____	N/A	N/A	N/A
Total Annual Payroll:	\$ N/A	\$1,031,000	\$1,061,930	\$1,093,787

What are the average wages of employees (excluding benefits) presently employed by the Applicant in Nassau County? \$ N/A

What is the average annual value of employee benefits paid per job, if any, for the employees presently employed by the Applicant in Nassau County? \$ N/A

What are the estimated average wages of the jobs (excluding benefits) to be created by the Applicant upon completion of the Project? \$ 1,031,000 - Annually

What is the estimated average annual value of employee benefits per job, if any, for jobs to be created upon completion of the Project? \$ 195,000

Estimate the percentage of jobs to be created by the Applicant upon completion of the Project that will be filled by County residents: 95 %

Please note that the Agency may utilize the foregoing employment projections and the projections set forth in Schedule C, among other things, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to retain the number of jobs, types of occupations and amount of payroll with respect to the Project set forth in this Application.

B. (i) Will the Applicant transfer current employees from existing location(s)? If YES, describe, please describe the number of current employees to be transferred and the location from which such employees would be transferred:

YES _____ NO X _____

(ii) Describe the number of estimated full time equivalent construction jobs to be created as a result of undertaking the project, to the extent any:

It is expected that up to 200 different people will be working on the project and averaging approximately 60 people per day for the duration of the work.

C. What, if any, is the anticipated increase in the dollar amount of production, sales or services rendered as a result of the Project?

\$5,430,000 in gross revenue per year

What percentage of the foregoing amount is subject to New York sales and use tax?

100 %

Describe any other municipal revenues that will result from the Project (excluding the above and any PILOT payments):

Building Permit Fees

D. What is the estimated aggregate annual amount of goods and services to be purchased by the Applicant for each year after completion of the Project and what portion will be sourced from businesses located in the County and the State (including the County):

	<u>Amount</u>	<u>% Sourced in County</u>	<u>% Sourced in State</u>
Year 1	\$ <u>720,000</u>	<u>52</u>	<u>52</u>
Year 2	\$ <u>741,600</u>	<u>52</u>	<u>52</u>
Year 3	\$ <u>763,848</u>	<u>52</u>	<u>52</u>

E. Describe, if applicable, other benefits to the County anticipated as a result of the Project, including a projected annual estimate of additional sales tax revenue generated, directly and indirectly, as a result of undertaking the project:

All vendors servicing the property, including maintenance contractors, waste removal contractors, etc. _____

F. Costs to the County and affected municipalities:

Estimated Value of Sales Tax Exemption: \$ \$475,000

Estimated Value of Mortgage Tax Exemption: \$ 126,000

Estimated Property Tax Exemption: \$ _____

Existing Property Tax paid on the Land and/or Building: (please provide current tax bills)

\$ 174,110/yr assumes 2013 tax rate on 13/14 assessment

Estimated new Real Property Tax Revenue if the Project did **not** receive Real Property Tax exemption:

\$ 528,000/yr

Estimated new Real Property Tax Revenue if the Project does receive Real Property Tax exemption:

\$ 174,110 in first year

G. Describe any other one-time municipal revenues (not including fees payable to the Agency) that the Project will create:

Building Permit Fees

PART V. PROJECT CONSTRUCTION SCHEDULE

A. Has construction work on the Project begun? If YES, indicate the percentage of completion:

- 1. (a) Site clearance YES ___ NO X 100___% complete
- (b) Environmental Remediation YES ___ NO N/A ___% complete
- (c) Foundation YES ___ NO X ___% complete
- (d) Footings YES ___ NO X ___% complete
- (e) Steel YES ___ NO X ___% complete
- (f) Masonry YES ___ NO X ___% complete
- (g) Interior YES ___ NO X ___% complete
- (h) Other (describe below): YES ___ NO ___ ___% complete

2. If NO to all of the above categories, what is the proposed date of commencement of construction, renovation or acquisition of the Project?

Spring 2014

B. Provide an estimate of time schedule to complete the Project and when the first use of the Project is expected to occur (attach additional sheet if necessary):

12 months of construction and 1 month of pre-opening

PART VI. ENVIRONMENTAL IMPACT

- A. What is the expected environmental impact of the Project? (Complete the attached Environmental Assessment Form (Schedule G)).

- B. Is an environmental impact statement required by Article 8 of the N.Y. Environmental Conservation Law (i.e., the New York State Environmental Quality Review Act)?

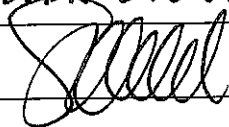
YES ____

NO X__

- C. Please be advised that the Agency may require at the sole cost and expense of the Applicant the preparation and delivery to the Agency of an environmental report in form and scope satisfactory to the Agency, depending on the responses set forth in the Environmental Assessment Form. If an environmental report has been or is being prepared in connection with the Project, please provide a copy.

D. The Applicant authorizes the Agency to make inquiry of the United States Environmental Protection Agency, the New York State Department of Environmental Conservation or any other appropriate federal, state or local governmental agency or authority as to whether the Project site or any property adjacent to or within the immediate vicinity of the Project site is or has been identified as a site at which hazardous substances are being or have been used, stored, treated, generated, transported, processed, handled, produced, released or disposed of. The Applicant will be required to secure the written consent of the owner of the Project site to such inquiries (if the Applicant is not the owner), upon request of the Agency.

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

AVR CARLE PLACE TWO ASSOCIATES
Name of Applicant: STEVEN EICKELBECK
Signature: 
Name: _____
Title: MEMBER
Date: 11/20/13

Sworn to before me this _____
day of _____, 20__

Notary Public

**RULES AND REGULATIONS OF THE NASSAU COUNTY
INDUSTRIAL DEVELOPMENT AGENCY**

The Nassau County Industrial Development Agency (the "Agency"), in order to better secure the integrity of the projects it sponsors, declares that it is in the public interest (i) to ensure the continuity of such projects and the jobs created by such projects, (ii) to prevent the conversion of the use of the premises upon which a sponsored project is to be constructed or renovated and (iii) to limit and prevent unreasonable profiteering or exploitation of a project, and does hereby find, declare and determine as follows:

FIRST:

Upon the approval of a sponsored project, the Agency shall take title to, or acquire a leasehold or other interest in, all premises upon which an Agency sponsored project is to be constructed or renovated, and shall lease, sublease, license, sell or otherwise transfer the premises to the Applicant for a term to be determined by the Agency.

At such time as, among other things, the Applicant fails to retain or create the jobs as represented in the Application or changes the use of the project or ownership of the project or the Applicant during the life of the project in a manner inconsistent with the Application, and such employment default or change of use or ownership does not meet with the prior written approval of the Agency, a recapture of benefits may be required to be paid by the Applicant to the Agency. The amount and sufficiency (with respect to a particular applicant) of the applicable recapture of benefits payment shall be determined by the Agency and shall be set forth in the straight lease documents.

SECOND:

At such time as a proposed Project is reviewed, the members of the Agency must disclose any blood, marital or business relationships they or members of their families have or have had with the Applicant (or its affiliates). The Applicant represents that no member, manager, principal, officer or director of the Applicant has any such relationship with any member of the Agency (or any member of the family of any member of the Agency).

THIRD:

All applicants must disclose whether they have been appointed, elected or employed by New York State, any political division of New York State or any other governmental agency.

FOURTH:

All proposed lenders, title companies and their respective attorneys must be satisfactory to and approved in writing by the Agency.

Understood and Agreed to:

Name of Applicant: IVL CARLE PLACE TWO ASSOCIATES, LLC

By: STEVEN EICKENBECK - MEMBER

Name/Title: 

**CERTIFICATION AND AGREEMENT
WITH RESPECT TO FEES AND COSTS**

The undersigned deposes and says: that I am an authorized representative of the Applicant named in the attached application for financial assistance ("Application") and that I hold the office specified below my signature at the end of this Certification and Agreement, that I am authorized and empowered to deliver this Certification and Agreement and the Application for and on behalf of the Applicant, that I am familiar with the contents of said Application (including all schedules and attachments thereto), and that said contents are true, correct and complete to my knowledge. Capitalized terms used but not otherwise defined in this Certification and Agreement shall have the meanings assigned to such terms in the Application.

The grounds of my belief relative to all matters in the Application that are not based upon my own personal knowledge are based upon investigations I have made or have caused to be made concerning the subject matter of this Application, as well as upon information acquired in the course of my duties and from the books and records of the Applicant.

As an authorized representative of the Applicant, I acknowledge and agree on behalf of the Applicant that the Applicant hereby releases the Nassau County Industrial Development Agency, its members, officers, servants, attorneys, agents and employees (collectively, the "Agency") from, agrees that the Agency shall not be liable for and agrees to indemnify, defend (with counsel selected by the Agency) and hold the Agency harmless from and against any and all liability, damages, causes of actions, losses, costs or expenses incurred by the Agency in connection with: (A) examination and processing of, and action pursuant to or upon, the Application, regardless of whether or not the Application or the financial assistance requested therein are favorably acted upon by the Agency, (B) the acquisition, construction and/or installation of the Project by the Agency, and (C) any further action taken by the Agency with respect to the Project; including, without limiting the generality of the foregoing, (i) all fees and expenses of the Agency's general counsel, transaction counsel, economic development consultant, real property tax valuation consultant and other experts and consultants (if deemed necessary or advisable by the Agency), and (ii) all other expenses incurred by the Agency in defending any suits, actions or proceedings that may arise as a result of any of the foregoing. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails within a reasonable or specified period of time to take reasonable, proper or requested action or withdraws, abandons, cancels, or neglects the Application or is unable to secure third party financing or otherwise fails to conclude the Project, then upon presentation of an invoice by the Agency, its agents, attorneys or assigns, the Applicant shall pay to the Agency, its agents, attorneys or assigns, as the case may be, all fees and expenses reflected in any such invoice.

As an authorized representative of the Applicant, I acknowledge and agree on behalf of the Applicant that each of the Agency's general counsel, transaction counsel, economic development consultant, real property tax valuation consultant and other experts and consultants is an intended third-party beneficiary of this Certification and Agreement, and that each of them may (but shall not be obligated to) enforce the provisions of the immediately preceding paragraph, whether by lawsuit or otherwise, to collect the fees and expenses of such party or person incurred by the Agency (whether or not first paid by the Agency) with respect to the Application.

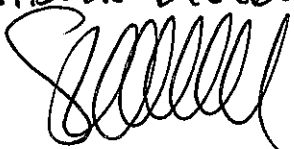
Upon successful closing of the "straight lease" transaction, the Applicant shall pay to the Agency an administrative fee set by the Agency (which amount is payable at closing) in accordance with the following schedule:

- (A) Six-tenths (6/10) of one percent (1%) for the first twenty million dollars (\$20,000,000) of total project costs and, if applicable, two-tenths (2/10) of one percent (1%) for any additional amounts in excess of twenty million dollars (\$20,000,000) of total project costs.

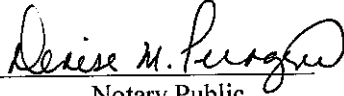
- (B) General Counsel Fee – One-tenth (1/10) of one percent (1%) of total project costs, with a minimum fee of \$2,000.
- (C) Two Thousand Five Hundred Dollars (\$2,500) closing compliance fee payable at closing and One Thousand Dollars (\$1,000) per year (or part thereof) administrative fee, payable in advance, at the closing for the first year (or part thereof) and on January 1st of each year for the term of the financing. The annual service fee is subject to periodic review and may be adjusted from time to time in the discretion of the Agency.
- (D) Refinancings – The Agency fee shall be determined on a case-by-case basis.
- (E) Assumptions – The Agency fee shall be determined on a case-by-case basis.
- (F) Modifications – The Agency fee shall be determined on a case-by-case basis.

Transaction counsel fees and expenses are payable at closing and are based on the work performed in connection with the Project.

Upon the termination of the Project, Applicant agrees to pay all costs in connection with any conveyance by the Agency to the Applicant of the Agency's interest in the Project and the termination of all related Project documents, including the fees and expenses of the Agency's general counsel, transaction counsel, and all applicable recording, filing or other related fees, taxes and charges.

AVR CARLE PULKE TWO ASSOCIATES
 Name: STEVEN EICKENBEUM LLC
 Title:  MEMBER

Sworn to before me this 20th
 day of November, 2013


 Notary Public

DENISE M. PERAGINE
 Notary Public, State of New York
 No: 01PE6052918
 Qualified in Orange County
 Commission Expires Dec. 26, 2014

TABLE OF SCHEDULES:

<u>Schedule</u>	<u>Title</u>	<u>Complete as Indicated Below</u>
A.	Intentionally omitted	
B.	New York State Financial and Employment Requirements for Industrial Development Agencies	All applicants
C.	Guidelines for Access to Employment Opportunities	All applicants
D.	Anti-Raiding Questionnaire	If Applicant checked "YES" in Part I, Question Q.2. of Application
E.	Retail Questionnaire	If Applicant checked "YES" in Part II, Question P of Application (See Page 11)
F.	Applicant's Financial Attachments, consisting of: 1. Applicant's audited financial statements for the last two fiscal years (unless included in Applicant's annual reports). 2. Applicant's annual reports (or Form 10-K's) for the two most recent fiscal years. 3. Applicant's quarterly reports (Form 10-Q's) and current reports (Form 8-K's) since the most recent Annual Report, if any. 4. In addition, attach the financial information described above in items F1, F2, and F3 of any anticipated Guarantor of the proposed transaction, if different than the Applicant, including the personal financial statement of any anticipated Guarantor that is a natural person. 5. Dun & Bradstreet report.	All applicants
G.	Environmental Assessment Form	All applicants
H.	Other Attachments	As required

Schedule A

Intentionally omitted

**NEW YORK STATE FINANCIAL AND EMPLOYMENT REPORTING
REQUIREMENTS FOR INDUSTRIAL DEVELOPMENT AGENCIES**

- A. Pursuant to applicable law, the Agency requires the completion of an Initial Employment Plan (see Schedule C) and a year-end employment plan status report, both of which shall be filed by the Nassau County Industrial Development Agency (the "Agency") with the New York State Department of Economic Development on January 15. The Project documents will require the Applicant to provide such report to the Agency on or before January 1 of each year, together with such employment verification information as the Agency may require.

Except as otherwise provided by collective bargaining agreements, the Applicant agrees to list any new employment opportunities with the New York Department of Labor Community Services Division and the administrative entity of the service delivery area created by the Federal Job Training Partnership Act (P.L. 97-300), or any successor statute thereto (the "JTPA Entities"). In addition, except as otherwise provided by collective bargaining agreements, the Applicant, where practicable, will first consider persons eligible to participate in JTPA programs who shall be referred by the JTPA Entities for such new employment opportunities.

- B. The Applicant will be required to file annually a statement with the New York State Department of Taxation and Finance and the Agency of the value of all sales or use tax exemptions claimed in connection with the Project by reason of the involvement of the Agency.
- C. Please be advised that the New York State Industrial Development Agency Act imposes additional annual reporting requirements on the Agency, and the Applicant will be required to furnish information in connection with such reporting, as follows:

The following information must be provided for straight-lease transactions entered into or terminated during the year:

Name, address and owner of the project; total amount of tax exemptions granted (broken out by state and local sales tax, property taxes, and mortgage recording tax); payments in lieu of taxes made; total real estate taxes on the Project prior to exemption; number of jobs created and retained, and other economic benefits realized.

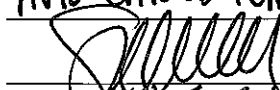
Failure to provide any of the aforesaid information will be constitute a DEFAULT under the Project documents to be entered into by the Agency and the Applicant in connection with the proposed Project.

Please sign below to indicate that the Applicant has read and understood the above and agrees to provide the described information on a timely basis.

Name of Applicant:

MR CARME PLACE TWO ASSOCIATE

Signature:



Name:

STEVEN EISENBEUM

Title:

MEMBER

Date:

11/20/03

GUIDELINES FOR ACCESS TO EMPLOYMENT OPPORTUNITIES

INITIAL EMPLOYMENT PLAN

Prior to the granting of financial assistance, the Applicant shall complete the following employment plan:

Applicant Name: AVE CARME PLAZE TWO ASSOCIATES, LLC
 Address: 1 EXECUTIVE BLDG, YORKERS N.Y. 10701
 Type of Business: HOTEL DEVELOPER AND OWNER
 Contact Person: STEVEN EICKELBECK Tel. No.: 914-965-3990

Please complete the following table describing the Applicant's projected employment plan following receipt of financial assistance:

Current and Planned Occupations (provide NAICS Code for each)	Current Number Full Time Equivalent Jobs Per Occupation		Estimated Number of Full Time Equivalent Jobs in the County After Completion of the Project:		
	County	Statewide	1 year	2 years	3 years
<u>SEE ATTACHED SCHEDULE</u>					

Please indicate the number of temporary construction jobs anticipated to be created in connection with the acquisition, construction and/or renovation of the Project:

Please indicate the estimated hiring dates for the new jobs shown above and any special recruitment or training that will be required:

CONSTRUCTION START DATE IS SPRING 2014. HOTEL OPENING IS 14 MONTHS LATER. HIRING FOR THE HOTEL STARTS 4 MONTHS PRIOR TO OPENING

Are the Applicant's employees currently covered by a collective bargaining agreement?

YES NO


IF YES, Union Name and Local: _____

Please note that the Agency may utilize the foregoing employment projections, among other things, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to retain the above number of jobs, types of occupations and amount of payroll with respect to the proposed project.

Attached hereto is a true, correct and complete copy of the Applicant's most recent Quarterly Combined Withholding, Wage Reporting, and Unemployment Insurance Return (Form NYS-45-MN) (first page only). Upon request of the Agency, the Applicant shall provide such other or additional information or documentation as the Agency may require with respect to the Applicant's current employment levels in the State of New York.

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

Name of Applicant: MVL CARME PLACE TWO ASSOCIATES LLC

Signature: 

Name: STEVEN EICKENBECK

Title: MEMBER

Date: 11/20/13

SCHEDULE C

Springhill Suites at Carle Place

Employment Schedule

120 6.66667

<u>Position</u>	<u>Head Ct</u>	<u>Per Hour</u>	<u>Annual Hrs</u>	<u>Annual \$</u>	<u>Payroll Per Day</u>
Houskeepers	13	\$9.00	27040	\$243,360	\$667
Houskeeping Supervisor	2	\$13.00	4160	\$54,080	\$148
Houseperson	2	\$9.50	4160	\$39,520	\$108
Laundry	2	\$9.50	4160	\$39,520	\$108
GSR	5	\$11.25	10400	\$117,000	\$321
Nt Audit	2	\$13.25	4160	\$55,120	\$151
Comp Services	4	\$10.25	8320	\$85,280	\$234
Ops Mgr	1	\$22.73	2080	\$47,278	\$130
GM	1	\$38.46	2080	\$80,000	\$219
Sales Mgr	1	\$22.25	2080	\$46,280	\$127
Sales Coordinator	1	\$17.00	2080	\$35,360	\$97
DOS	1	\$38.83	2080	\$80,766	\$221
Chief Engineer	1	\$26.04	2080	\$54,163	\$148
Maintenance Engineer	2	\$13.00	4160	\$54,080	\$148
TOTAL	38	\$13.05	79040	\$1,031,808	\$2,827

Payroll Tax (Est at 12% of PR)

\$123,817

Workers Comp (Est 5% of PR)

\$51,590

Total Payroll & Taxes

\$1,207,215

ANTI-RAIDING QUESTIONNAIRE

(To be completed by Applicant if Applicant checked "YES" in Part I, Question O.2 of the Application for Financial Assistance)

A. Will the completion of the Project result in the removal of a plant or facility of Applicant, or of a proposed occupant of the Project, from an area in New York State (but outside of Nassau County) to an area within Nassau County?

YES _____ NO X

If the answer to Question A is YES, please provide the following information:

Address of the to-be-removed plant or facility: _____

Names of all current occupants of the to-be-removed plant or facility: _____

B. Will the completion of the Project result in the abandonment of one or more plants or facilities of the Applicant, or of a proposed occupant of the Project, located in an area of the State of New York other than in Nassau County?

YES _____ NO X

If the answer to Question B is YES, please provide the following information:

Addresses of the to-be-abandoned plants or facilities: _____

Names of all current occupants of the to-be-abandoned plants or facilities:

C. Has the Applicant contacted the local industrial development agency at which its current plants or facilities in New York State are located with respect to the Applicant's intention to move or abandon such plants or facilities?

YES _____ NO X

If the answer to Question C is YES, please provide details in a separate attachment.

IF THE ANSWER TO EITHER QUESTION A OR B IS "YES", ANSWER QUESTIONS D AND E.

D. Is the Project reasonably necessary to preserve the competitive position of the Applicant, or of a proposed occupant of the Project, in its industry?


YES _____ NO _____

E. Is the Project reasonably necessary to discourage the Applicant, or a proposed occupant of the Project, from removing such plant or facility to a location outside of the State of New York?

YES _____ NO _____

IF THE ANSWER TO EITHER QUESTION D OR E IS "YES", PLEASE PROVIDE DETAILS IN A SEPARATE ATTACHMENT.

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

Name of Applicant: MD CARE PLACE TWO ASSOCIATES
Signature: 
Name: STEVEN EICHENBAUM
Title: MEMBER
Date: 11/20/13

RETAIL QUESTIONNAIRE

(To be completed by Applicant if Applicant checked either "YES" in Part II, Question P of the Application for Financial Assistance)

- A. Will any portion of the Project (including that portion of the cost to be financed from equity or other sources) consist of facilities or property that are or will be primarily used in making retail sales to customers who personally visit the Project?

YES _____ NO _____

For purposes of Question A, the term "retail sales" means (i) sales by a registered vendor under Article 28 of Tax Law of the State of New York (the "Tax Law") primarily engaged in the retail sale of tangible personal property (as defined in Section 1101(b)(4)(i) of the Tax Law), or (ii) sales of a service to customers who personally visit the Project.

- B. If the answer to Question A is YES, what percentage of the cost of the Project (including that portion of the cost to be financed from equity or other sources) will be expended on such facilities or property primarily used in making retail sales of goods or services to customers who personally visit the Project?

_____ %

- C. If the answer to Question A is YES, and the amount entered for Question B is greater than 33.33%, indicate whether any of the following apply to the Project:

1. Will the Project be operated by a not-for-profit corporation?

YES _____ NO _____

2. Is the Project likely to attract a significant number of visitors from outside the economic development region (i.e., Long Island) in which the Project is or will be located?

YES _____ NO _____

3. Would the Project occupant, but for the contemplated financial assistance from the Agency, locate the related jobs outside the State of New York?

YES _____ NO _____

4. Is the predominant purpose of the Project to make available goods or services which would not, but for the Project, be reasonably accessible to the residents of the city, town or village within which the Project will be located, because of a lack of reasonably accessible retail trade facilities offering such goods or services?

YES _____ NO _____

5. Will the Project be located in one of the following: (a) an area designed 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) which, according to the most recent census data, has (i) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of the 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 _____

If the answer to any of the subdivisions 1 through 5 of Question C is YES, attach details.

- D. If the answer to any of the subdivisions 3 through 5 of Question C is 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, attach details.

YES _____

NO _____

- E. State percentage of the Applicant's annual gross revenues comprised of each of the following:

Retail Sales: _____%

Services: _____%

- F. State percentage of Project premises utilized for same:

Retail Sales: _____%

Services: _____%

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

Name of Applicant:

INDICAVE PLACE TWO ASSOCIATES

Signature:

[Handwritten Signature]

LLC

Name:

STEVEN ECKENBECK

Title:

MEMBER

Date:

11/20/13

Schedule F

APPLICANT'S FINANCIAL ATTACHMENTS

Schedule G

ENVIRONMENTAL ASSESSMENT FORM

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Sponsor Information.

Name of Action or Project: Springhill Suites Hotel, Carle Place		
Project Location (describe, and attach a general location map): South Side of Westbury Avenue, opposite Park Avenue, Carle Place		
Brief Description of Proposed Action (include purpose or need): Construction of a 4-story, 120-room hotel. Parking for 149 cars. Wastewater generated to be conveyed for off-site treatment in county sewer system. Total building area is 68,898 SF.		
Name of Applicant/Sponsor: AVR Carle Place Two Associates, LLC		Telephone: (914) 965-3990
		E-Mail: steven.eickelbeck@avrrealty.com
Address: 1 Executive Boulevard		
City/PO: Yonkers	State: New York	Zip Code: 10701
Project Contact (if not same as sponsor; give name and title/role): (same)		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor): (same)		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals Funding, or Sponsorship. ("Funding" includes grants, loans, tax relief, and any other forms of financial assistance.)		
Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Council, Town Board, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Planning Board or Commission	Site Plan Approval	Pending
c. City Council, Town or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Village Zoning Board of Appeals		
d. Other local agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Carle Place Water District</i>	Water Supply Approval	Pending
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>NC DPW</i>	Sanitary Connection Approval	Pending
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources.		
i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes,		
ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?		<input type="checkbox"/> Yes <input type="checkbox"/> No
iii. Is the project site within a Coastal Erosion Hazard Area?		<input type="checkbox"/> Yes <input type="checkbox"/> No

C. Planning and Zoning

C.1. Planning and zoning actions.	
Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<ul style="list-style-type: none"> • If Yes, complete sections C, F and G. • If No, proceed to question C.2 and complete all remaining sections and questions in Part 1 	
C.2. Adopted land use plans.	
a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, identify the plan(s):	

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, identify the plan(s):	

C.3. Zoning

- a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No
If Yes, what is the zoning classification(s) including any applicable overlay district?
Industrial-B
- b. Is the use permitted or allowed by a special or conditional use permit? Yes No
- c. Is a zoning change requested as part of the proposed action? Yes No
If Yes,
i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

- a. In what school district is the project site located? Carle Place UFSD
- b. What police or other public protection forces serve the project site?
Nassau County Police Department
- c. Which fire protection and emergency medical services serve the project site?
Carle Place Fire Department
- d. What parks serve the project site?
Wilson Park (to the southwest, on Voice Road)

D. Project Details

D.1. Proposed and Potential Development

- a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? 120 room hotel
- b. a. Total acreage of the site of the proposed action? 2.54 acres
b. Total acreage to be physically disturbed? 2.54 acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 2.54 acres
- c. Is the proposed action an expansion of an existing project or use? Yes No
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____
- d. Is the proposed action a subdivision, or does it include a subdivision? Yes No
If Yes,
i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) _____
ii. Is a cluster/conservation layout proposed? Yes No
iii. Number of lots proposed? _____
iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____
- e. Will proposed action be constructed in multiple phases? Yes No
i. If No, anticipated period of construction: 12 months
ii. If Yes:
• Total number of phases anticipated _____
• Anticipated commencement date of phase 1 (including demolition) _____ month _____ year
• Anticipated completion date of final phase _____ month _____ year
• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? Yes No
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion	_____	_____	_____	_____
of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? Yes No
 If Yes,

i. Total number of structures _____ 1

ii. Dimensions (in feet) of largest proposed structure: _____ 40 height; _____ 56 width; and _____ 210 length

iii. Approximate extent of building space to be heated or cooled: _____ 69,000± square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? Yes No
 If Yes,

i. Purpose of the impoundment: _____

ii. If a water impoundment, the principal source of the water: Ground water Surface water streams Other specify: _____

iii. If other than water, identify the type of impounded/contained liquids and their source. _____

iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres

v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? Yes No
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)
 If Yes:

i. What is the purpose of the excavation or dredging? _____

ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?

- Volume (specify tons or cubic yards): _____
- Over what duration of time? _____

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____

iv. Will there be onsite dewatering or processing of excavated materials? Yes No
 If yes, describe. _____

v. What is the total area to be dredged or excavated? _____ acres

vi. What is the maximum area to be worked at any one time? _____ acres

vii. What would be the maximum depth of excavation or dredging? _____ feet

viii. Will the excavation require blasting? Yes No

ix. Summarize site reclamation goals and plan: _____

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? Yes No
 If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will proposed action cause or result in disturbance to bottom sediments? Yes No
If Yes, describe: _____

iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No
If Yes:

- acres of aquatic vegetation proposed to be removed _____
- expected acreage of aquatic vegetation proposed to be removed _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No
If Yes:

i. Total anticipated water usage/demand per day: _____ 24,000 gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No
If Yes:

- Name of district or service area: Carle Place Water District
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No
If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: Carle Place Water District

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No
If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No
If Yes:

i. Total anticipated liquid waste generation per day: _____ 24,000 gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____
Sanitary wastewater

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No
If Yes:

- Name of wastewater treatment plant to be used: Cedar Creek STP
- Name of district: Nassau County
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

- Do existing sewer lines serve the project site? Yes No
- Will line extension within an existing district be necessary to serve the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____

- iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No

If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- What is the receiving water for the wastewater discharge? _____

- v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge, or describe subsurface disposal plans):

- vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

None planned at the present time

- e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No

If Yes:

- i. How much impervious surface will the project create in relation to total size of project parcel?

_____ Square feet or 2.03 acres (impervious surface)

_____ Square feet or 2.54 acres (parcel size)

- ii. Describe types of new point sources. Stormwater runoff

- iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

On-site stormwater system

- If to surface waters, identify receiving water bodies or wetlands: _____
N/A

- Will stormwater runoff flow to adjacent properties? Yes No

- iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

- f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No

If Yes, identify:

- i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)

N/A

- ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)

Power generators & vehicle emissions

- iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)

Heating system

- g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No

If Yes:

- i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No

- ii. In addition to emissions as calculated in the application, the project will generate:

- _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
- _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
- _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
- _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
- _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
- _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? Yes No

If Yes:
i. Estimate methane generation in tons/year (metric): _____
ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? Yes No

If Yes:
i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend
 Randomly between hours of 6 AM to 6 PM.
ii. For commercial activities only, projected number of semi-trailer truck trips/day: _____ N/A
iii. Parking spaces: Existing 0 Proposed ±149 Net increase/decrease ±149
iv. Does the proposed action include any shared use parking? Yes No
v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: N/A

vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site? Yes No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? Yes No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No

If Yes:
i. Estimate annual electricity demand during operation of the proposed action: _____
Not available at present time
ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other):
Grid/local utility (LIPA)
iii. Will the proposed action require a new, or an upgrade to, an existing substation? Yes No

l. Hours of operation. Answer all items which apply.
i. During Construction:
• Monday - Friday: 7AM-5PM (est.)
• Saturday: 7AM-5PM (est.)
• Sunday: N/A
• Holidays: N/A
ii. During Operations:
• Monday - Friday: all hours
• Saturday: all hours
• Sunday: all hours
• Holidays: all hours

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? Yes No

If yes:

i. Provide details including sources, time of day and duration:

ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen? Yes No

Describe: _____

n. Will the proposed action have outdoor lighting? Yes No

If yes:

i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:
Pole-mounted lights along inner and outer sides of parking areas (20-foot mounting height)

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? Yes No

Describe: No natural barriers present

o. Does the proposed action have the potential to produce odors for more than one hour per day? Yes No

If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products (185 gallons in above ground storage or an amount in underground storage)? Yes No

If Yes:

i. Product(s) to be stored _____

ii. Volume(s) _____ per unit time _____ (e.g., month, year)

iii. Generally describe proposed storage facilities: _____

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? Yes No

If Yes:

i. Describe proposed treatment(s):

ii. Will the proposed action use Integrated Pest Management Practices? Yes No

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? Yes No

If Yes:

i. Describe any solid waste(s) to be generated during construction or operation of the facility:

- Construction: Unknown at present tons per _____ (unit of time)
- Operation: Unknown at present tons per _____ (unit of time)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:

- Construction: Measures to minimize, recycle or reuse materials during construction not known at present time.
- Operation: Measures to minimize, recycle or reuse materials during operation not known at present time.

iii. Proposed disposal methods/facilities for solid waste generated on-site:

- Construction: Anticipate that dumpster(s) will be present for scrap construction materials, debris, etc. Dumpster(s) to be removed by contractor when full, for disposal at approved C+D landfill.
- Operation: Dumpster enclosure at SW corner of site. Will be removed by licensed carter under contract with site owner, for disposal at approved facility.

s. Does the proposed action include construction or modification of a solid waste management facility? Yes No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____

ii. Anticipated rate of disposal/processing:

• _____ Tons/month, if transfer or other non-combustion/thermal treatment, or

• _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

Urban Industrial Commercial Residential (suburban) Rural (non-farm)

Forest Agriculture Aquatic Other (specify): _____

ii. If mix of uses, generally describe: _____

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	2.23	2.03	-0.20
• Forested	0	0	0
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	0	0	0
• Agricultural (includes active orchards, field, greenhouse etc.)	0	0	0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0	0	0
• Wetlands (freshwater or tidal)	0	0	0
• Non-vegetated (bare rock, earth or fill)	0.31	0	-0.31
• Other Describe: landscaping _____	0	0.51	± 0.51

c. Is the project site presently used by members of the community for public recreation? Yes No
i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? Yes No
If Yes,
i. Identify Facilities: _____

e. Does the project site contain an existing dam? Yes No
If Yes:
i. Dimensions of the dam and impoundment:
• Dam height: _____ feet
• Dam length: _____ feet
• Surface area: _____ acres
• Volume impounded: _____ gallons OR acre-feet
ii. Dam's existing hazard classification: _____
iii. Provide date and summarize results of last inspection: _____

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
If Yes:
i. Has the facility been formally closed? Yes No
• If yes, cite sources/documentation: _____
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: _____

iii. Describe any development constraints due to the prior solid waste activities: _____

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes No
 Yes – Spills Incidents database Provide DEC ID number(s): _____
 Yes – Environmental Site Remediation database Provide DEC ID number(s): _____
 Neither database
ii. If site has been subject of RCRA corrective activities, describe control measures: _____

iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
If yes, provide DEC ID number(s): _____
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ 1,000± feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site: Ug (Urban land) _____ 100 %
 _____ %
 _____ %

d. What is the average depth to the water table on the project site? Average: 28 feet

e. Drainage status of project site soils: Well Drained: 100 % of site
 Moderately Well Drained: _____ % of site
 Poorly Drained _____ % of site

f. Approximate proportion of proposed action site with slopes: 0-10%: 100 % of site
 10-15%: _____ % of site
 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes No

ii. Do any wetlands or other waterbodies adjoin the project site? Yes No

If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? Yes No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? Yes No

If yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? Yes No

j. Is the project site in the 100 year Floodplain? Yes No

k. Is the project site in the 500 year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:

i. Name of aquifer: Upper glacial & magothy

m. Identify the predominant wildlife species that occupy or use the project site: _____

 _____ Birds, Small mammals,
typical of developed urban
areas (e.g., squirrels, etc.)

n. Does the project site contain a designated significant natural community? Yes No
 If Yes:
 i. Describe the habitat/community (composition, function, and basis for designation): _____

 ii. Source(s) of description or evaluation: _____
 iii. Extent of community/habitat:
 • Currently: _____ acres
 • Following completion of project as proposed: _____ acres
 • Gain or loss (indicate + or -): _____ acres

o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? Yes No

p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? Yes No

q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? Yes No
 If yes, give a brief description of how the proposed action may affect that use: _____

E.3. Designated Public Resources On or Near Project Site

a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? Yes No
 If Yes, provide county plus district name/number: _____

b. Are agricultural lands consisting of highly productive soils present? Yes No
 i. If Yes: acreage(s) on project site? _____
 ii. Source(s) of soil rating(s): _____

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? Yes No
 If Yes:
 i. Nature of the natural landmark: Biological Community Geological Feature
 ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? Yes No
 If Yes:
 i. CEA name: _____
 ii. Basis for designation: _____
 iii. Designating agency and date: _____

e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District	
<i>ii.</i> Name: _____	
<i>iii.</i> Brief description of attributes on which listing is based: _____	
f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?	
If Yes:	
<i>i.</i> Describe possible resource(s): _____	
<i>ii.</i> Basis for identification: _____	
h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Identify resource: _____	
<i>ii.</i> Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____	
<i>iii.</i> Distance between project and resource: _____ miles.	
i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes:	
<i>i.</i> Identify the name of the river and its designation: _____	
<i>ii.</i> Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

F. Additional Information

Attach any additional information which may be needed to clarify your project.

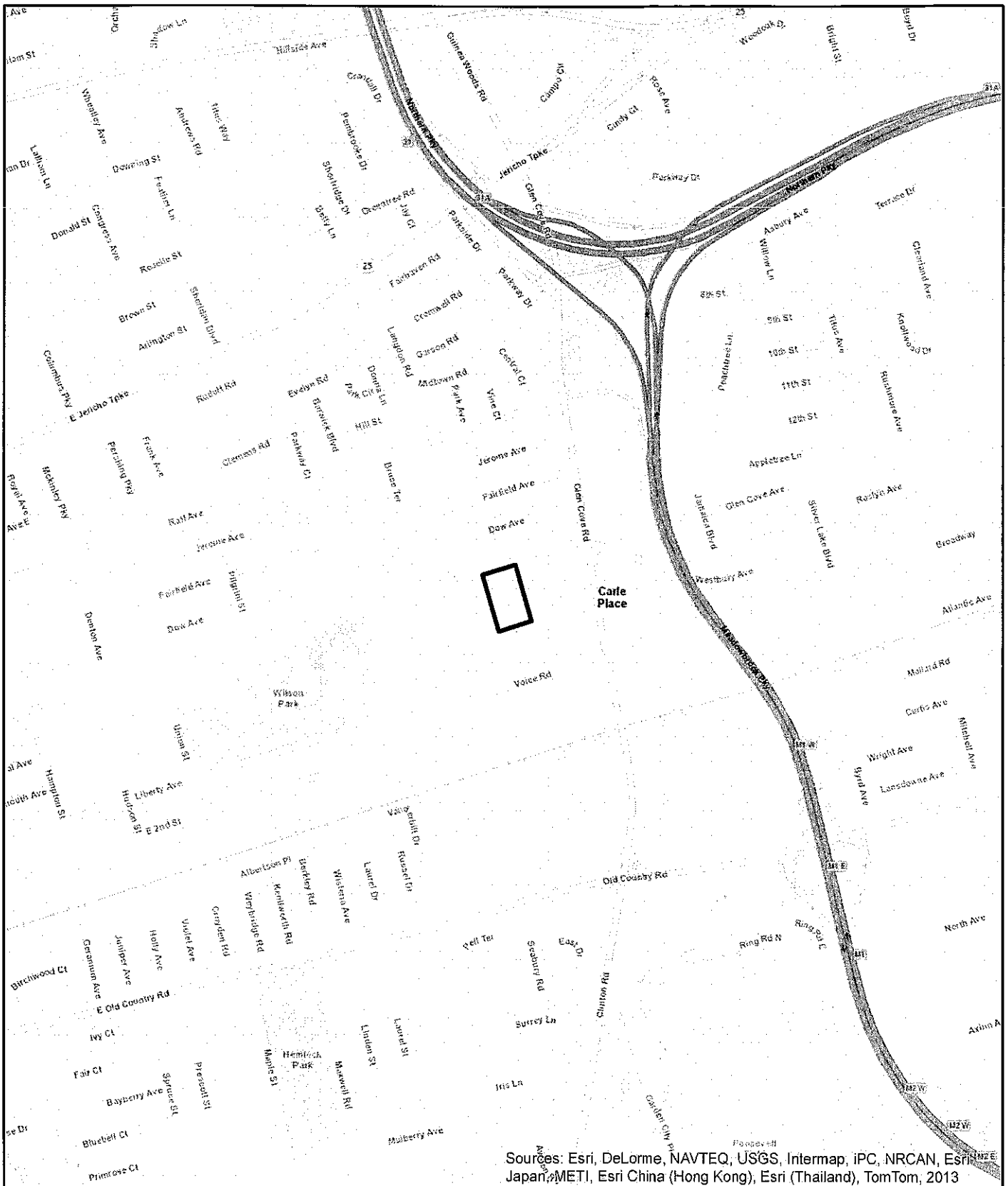
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name NP&V, LLC; Phil Malicki, CEP, AICP, LEED AP Date November 14, 2013

Signature  Title Senior Environmental Planner



Sources: Esri, DeLorme, NAVTEQ, USGS, Intermap, iPC, NRCAN, Esri Japan, METI, Esri China (Hong Kong), Esri (Thailand), TomTom, 2013



FIGURE 1 LOCATION

Source: ESRI Web Mapping Service
Scale: 1 inch = 1,000 feet



**Spring Hill Suites Hotel,
Carle Place**
EAF Part 1

PART 1 - APPLICANT - SECTION F, N

Allan V. Rose - Entity List

New York Entities

**STATEMENT OF TAXES
GENERAL TAX LEVY
2013 TOWN OF NORTH HEMPSTEAD - COUNTY OF NASSAU**

RECEIVED JAN 09 2013
BILL NUMBER:
2 - 070833

	MAKE FUNDS PAYABLE TO Charles Berman, Receiver of Taxes 200 Plandome Road Manhasset, NY 11030	OFFICE HOURS: 9:00 AM - 4:45 PM MON - FRI (516) 869-7800	Fiscal Year: 01-01-2013 thru 12-31-2013 EST. STATE AID - COUNTY: 232,408,316 EST. STATE AID - TOWN: 1,023,565 COUNTY SALES TAX CREDIT: 20,513,900
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PROPERTY DESCRIPTION						BILLING ADDRESS												
S.D. CODE	SECTION	BLOCK	LOT	BLDG.	UNIT													
011	09	663	00430			45016												
LOT GROUP OWNER AVR-CARLE PLACE ASSOCIATES LLC LOCATION WESTBURY AVE CLASS 33014 ROLL SECTION 1 SWIS 282289 SIZE 2.5368 a STATE S.D. CODE 88 Tax Service Code: Tax Payor Code: Account Number:																		
<table border="0"> <tr> <td><u>Description</u></td> <td><u>Code</u></td> <td><u>Rate</u></td> <td><u>Amount</u></td> <td colspan="2"></td> </tr> <tr> <td>TRANSITIONAL</td> <td>GB_T</td> <td></td> <td align="right">321</td> <td colspan="2"></td> </tr> </table>						<u>Description</u>	<u>Code</u>	<u>Rate</u>	<u>Amount</u>			TRANSITIONAL	GB_T		321			**AUTO**MIXED AADC 112 C038 AVR-CARLE PLACE ASSOCIATES LLC 1 EXECUTIVE BLVD YONKERS, NY 10701
<u>Description</u>	<u>Code</u>	<u>Rate</u>	<u>Amount</u>															
TRANSITIONAL	GB_T		321															
ADJUSTED MARKET VALUE (as per 1/2/2011) - 2,774,600 LEVEL OF ASSESSMENT - 1.00 % ASSESSED VALUE - 27,746																		

Levy Description	Exemption Code	Taxable Value	Tax Rate/\$100	Tax Amount
County General Fund		27,425	6.810	1,867.640
County Environmental Bond		27,425	1.109	304.140
County Fire Prevention		27,425	1.497	410.550
County - Nassau Community		27,425	5.055	1,386.330
County Police Headquarter		27,425	30.566	8,382.730
Town General Fund		27,425	10.526	2,886.760
Town Highway		27,425	33.250	9,118.810
Lighting - Town Of North		27,425	3.066	840.850
County Police		27,425	65.452	17,950.210
Sewage Disposal Dist # 3		27,425	16.158	4,431.330
Fire Protect - Carle Plac		27,425	19.354	5,307.830
Garbage - Carle Place		27,425	19.384	5,316.060
Water - Carle Place		27,425	26.646	7,307.670
Library Funding Dist - Ca		27,425	7.015	1,923.860
Sewage - District 3 Ria		27,425	5.210	1,428.840
Sidewalk - Town Of North		27,425	4.612	1,264.840

First Half Tax >>	\$35,064.23	Second Half Tax >>	\$35,064.22	Total Tax >>	\$70,128.45
				PAY DISCOUNTED AMOUNT BELOW IF TOTAL TAX IS PAID ON OR BEFORE: 02-10-2013 \$69777.81	

2013 GENERAL TAXES - SECOND HALF

**GENERAL TAXES - SECOND HALF
DUE JULY 1
SECOND HALF TAX PAYABLE
WITHOUT PENALTY TO AUGUST 10**

TOWN OF NORTH HEMPSTEAD BILL NUMBER: 2 - 070833

S.D. CODE	SECTION	BLOCK	LOT	BLDG.	UNIT
011	09	663	00430		

LOT GROUP
 PAY THIS AMOUNT \$35,064.22 **2**
 PAYOR (other than owner) _____
 Check Cash DO NOT WRITE BELOW THIS LINE
AVR-CARLE PLACE ASSOCIATES LLC

When paying by mail, detach and return this stub with payment of the SECOND half tax. If paying TOTAL TAX, return both first and second half stubs with payment.
 When paying in person, bring in entire bill. Do not detach stubs.



00344665682013200035064220006977781020810135

Oct. 15, 2013 11:12AM

Town of North Hempstead
DEPARTMENT OF TAXES
SCHOOL TAX LEVY

No. 3508 P. 1
(914) 900 7511
BILL NUMBER:
1 - 072378

2013-2014 TOWN OF NORTH HEMPSTEAD - COUNTY OF NASSAU



MAKE FUNDS PAYABLE TO:
Charles Berman, Receiver of Taxes
200 Plandome Road
Manhasset, NY 11030

OFFICE HOURS
9:00 A.M. - 4:45 P.M.
MON. - FRI.
(516) 869-7800

FISCAL YEAR 07-01-2013 THRU 06-30-2014
ESTIMATED STATE AID: 3,750,000
ASSESSED VALUE: 6,459,958
TAXES LEVIED: 38,572,563.79 (+2.04%)

PROPERTY DESCRIPTION

BILLING ADDRESS

S.D. CODE SECTION BLOCK LOT BLDG. UNIT
011 09 663 00430

***** DUPLICATE BILL *****

LOT GROUP
OWNER AVR-CARLE PLACE ASSOCIATES LLC
LOCATION WESTBURY AVE
CLASS 43804 ROLL SECTION 1 SWIS 282289
SIZE 2.5368 a STATE S.D. CODE 88
Tax Service Code: Tax Payor Code: Account Number:

AVR-CARLE PLACE ASSOCIATES LLC
1 EXECUTIVE BLVD
YONKERS, NY 10701

Description Code Rate Amount
ADJUSTED MARKET VALUE (as per 1/2/2012) - 2,096,300
LEVEL OF ASSESSMENT - 1.00 %
ASSESSED VALUE - 20,963

Item Description	Exemption Code	Taxable Value	Tax Rate/\$100	Tax Amount
School - Carle Place Ufad		20,963	575.560	120,654.640

First Half Tax >> \$60,327.32 Second Half Tax >> \$60,327.32 Total Tax >> \$120,654.64

PAY DISCOUNTED AMOUNT BELOW
IF TOTAL TAX IS PAID ON OR BEFORE:

11-10-2013

\$120051.37

2013-2014 SCHOOL TAXES - SECOND HALF

1 - 072378

SCHOOL TAXES - SECOND HALF
DUE APRIL 1
SECOND HALF TAX PAYABLE
WITHOUT PENALTY TO MAY 10

TOWN OF NORTH HEMPSTEAD
S.D. CODE SECTION BLOCK LOT BLDG. UNIT
011 09 663 00430

LOT GROUP

PAY THIS AMOUNT \$60,327.32

When paying by mail, detach and return this stub with payment of the
SECOND half tax. If paying TOTAL TAX, return both first and second
half stubs with payment.

When paying in person, bring in entire bill. Do not detach stubs.

PAYOR
(other than owner)

Check Cash

DO NOT WRITE BELOW THIS LINE

AVR-CARLE PLACE ASSOCIATES LLC

