

**NASSAU COUNTY INDUSTRIAL
DEVELOPMENT AGENCY**

APPLICATION FOR FINANCIAL ASSISTANCE

(Straight Lease)

APPLICATION OF:

CMS Real Estate Holdings, 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.

DATE

PART I. APPLICANT

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

Name: CMS Real Estate Holdings, LLC

Address: 266 Merrick Road, Lynbrook, NY 11563

Primary Contact: Jay P. Shapiro

Phone: (516) 791-2600 Fax: (516) 791-5425

E-Mail: JPS Shapiro@HISAssoc.com

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

NAICS Code #: _____

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

Sole Proprietorship General Partnership Limited Partnership

Limited Liability Company Privately Held Corporation

Publicly Held Corporation Exchange listed on _____

Not-for-Profit Corporation

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

State and Year of Incorporation/Organization: New York 2013

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

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

Name: Howard I. Shapiro & Associates Consulting Engineers P.C.

Relationship to Applicant: Tenant

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 X

NO

Howard J. Shapiro & Associates, Consulting Engineers, P.C.

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

Howard J. Shapiro & Associates, Consulting Engineers, P.C.

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

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

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:

Name	Title	Other Business Affiliations
Jay P. Shapiro, P.E.	President	
Lawrence K. Shapiro, P.E.	Vice President	

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

YES

NO

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

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

1. (a) Location: 266 Merrick Road, Suite 300, Lynbrook, NY 11563
- (b) Number of Employees: Full-Time: 45 Part-Time: 4
- (c) Annual Payroll, excluding benefits: \$6.4 Million
- (d) Type of operation (e.g. manufacturing, wholesale, distribution) and products or services: Consulting Engineering
- (e) Size of existing facility real property (i.e., acreage of land): 76 acres

(F) Buildings (number and square footage of each): 1 building, 35,817 sq. ft.

(G) Applicant's interest in the facility:

FEE TITLE (Economic) LEASE OTHER (describe below)
Applicant owns the building.

(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 X

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

YES X NO ___

An office in Queens or Manhattan would shorten/simplify travel to clients in _____

New York City (most of our business)

Q. Does any one supplier or customer account for over 50% of Applicant's annual purchases of 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 ___ NO X

S. Attach a brief history of the Applicant and its business/operations

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:

Applicant needs to upgrade the building infrastructure (HVAC, elevator, etc.) and office space to adequately house the engineering firm and service clients and to attract and keep high quality professional personnel (engineers) in the expected growth of the firm. Upgrades are also required to attract a new tenant for office space that is expected to be vacated within the next year.

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 financial assistance for the Project, the applicant would consider moving to Manhattan or Queens. Impact on the County would be the loss of at least 45 jobs and potential residents.

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

Street Address:

266 Merrick Road

City/Village(s):

Lynbrook

Town(s):

Hempstead

School District(s):

Hempstead

School District(s):

Lynbrook

Section: 38 Block: 089 Lot: 1 220, 221

Census Tract Number:

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

L. Describe the present use of the Project site: (Occupied by the applicant and other tenants listed at Schedule H)

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: \$ _____ Building(s): \$2003 19 00 (not including Village taxes)

(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):

Applicant is project owner.

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.)

Office space for engineering consulting business.

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:

Doctors offices- 4,452 sq. ft., Dentist Office- 999 sq. ft. and emergency notification supplier office- 10,426 sq. ft.

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

Please see Schedule H _____

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

Office furniture, computers, HVAC equipment, elevator equipment and engineering specific equipment

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

YES

NO

1. Describe present zoning/land use: Business/commercial

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: February 15, 2013

(b) Purchase price: \$2,136,000

(c) Balance of existing mortgage, if any: \$2,753,451.00

(d) Name of mortgage holder: SBA

(v) Special conditions: _____

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

- (f) 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 X

- (g) 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 ___

- (h) 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):

Located in the western portion of Nassau County in a middle-class area. There will be no negative impact on the local municipal services.

- (i) Identify the following Project parties (if applicable):

Architect: Robert Phillip Ferraro Architect, P.C.
Engineer: Jay P. Shapiro, P.E.
Contractors: Retail Project Management, V & M Contracting

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 X

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 X

PART III. PROJECT COSTS

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

<u>Item</u>	<u>Cost</u>
1. Land Acquisition	\$ _____
2. Building Acquisition	\$ _____
3. Construction or Renovation	\$ <u>620,000.00</u>
4. Site Work	\$ <u>40,000.00</u>
5. Infrastructure Work	\$ <u>418,700.00</u>
6. Engineering Fees	\$ <u>10,000.00</u>
7. Architectural Fees	\$ <u>20,000.00</u>
8. Applicant's Legal Fees	\$ <u>30,000.00</u>
9. Financial Fees (incl. lender legal fees)	\$ _____
10. Other Professional Fees	\$ <u>40,000.00</u>
11. Furniture, Equipment & Machinery (not included in 3. above)	\$ <u>60,000.00</u>
12. Other Soft Costs (describe)	\$ _____

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13. Other (describe) _____ \$ _____
 Total \$1,238,700.00

B. Source of Funds for Project Costs:

a. Bank Financing:	\$ _____
b. Public Financing:	\$ _____
c. Tax Exempt Bonds:	\$ _____
d. Taxable Bonds:	\$ _____
e. Equity:	\$1,238,700.00

TOTAL	\$1,238,700.00

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.

YES _____ NO X

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 X

E. Construction Cost Breakdown:

Total Cost of Construction: \$680,000.00
(sum of 3 and 4 in Question 4 above)
 Cost for materials: \$420,000.00
 % Sourced in County: 50%
 % Sourced in State: 100% (incl. County)
 Cost for labor: \$225,000.00
 % Sourced in County: 50%
 % Sourced in State: 100% (incl. County)
 Cost for "other": \$35,000.00

% Sourced in County: 50%
% Sourced in State: 100% (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.

	Present	First Year	Second Year	Third Year
Full-time:	\$6,360,000.00	\$6,510,000.00	\$6,610,000.00	\$6,660,000.00
Part-time:	50,000.00	-	-	-
Seasonal:	-	-	-	-
Total Annual Payroll:	\$6,410,000.00	\$6,510,000.00	\$6,610,000.00	\$6,660,000.00

What are the average wages of employees (excluding benefits) presently employed by the Applicant in Nassau County? \$136,000

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? \$19,571

What are the estimated average wages of the jobs (excluding benefits) to be created by the Applicant upon completion of the Project? \$75,000

What is the estimated average annual value of employee benefits per job, if any, for jobs to be created upon completion of the Project? \$18,000

Estimate the percentage of jobs to be created by the Applicant upon completion of the Project that will be filled by County residents: 50%

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. (1) Does the Applicant intend to employ new additional employees at the proposed Project site or will Applicant transfer current employees from existing location(s)? If YES, describe, including the number of new employees to be hired during the year (a)

starting with the date of commencement of operations (b) starting with the first anniversary of the commencement of operations and (c) starting with the second anniversary of the commencement of operations. If "NO," please describe the number of current employees to be transferred and the location from where such employees would be transferred:

YES X

NO

5 of 6 new employees within 5 years

(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:

5

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

\$970,000.00

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

0 %

(Describe any other municipal revenues that will result from the Project (excluding the above and any P.I.L.O.T. payments):

Employees buy lunch and frequently shop in Lynbrook bringing sales tax revenue and support jobs to Lynbrook. The expansion will provide us room to host technical conferences and meetings with Clients in the facility that include lunches, guest meals and lodging and use of local taxis that will be sourced in Lynbrook. Some employees have purchased or are renting homes in Lynbrook or neighboring villages.

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):

	Amount	% Sourced in County	% Sourced in State
Year 1	<u>\$2.9 M</u>	<u>77%</u>	<u>83%</u>
Year 2	<u>\$3.05M</u>	<u>80%</u>	<u>85%</u>
Year 3	<u>\$3.2 M</u>	<u>80%</u>	<u>85%</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:

Building Permit Application fees

F Costs to the County and affected municipalities:

Estimated Value of Sales Tax Exemption: \$35,000.00

Estimated Value of Mortgage Tax Exemption: \$0

Estimated Property Tax Exemption: \$TBD

Existing Property Tax paid on the Land and/or Building: (please provide current tax bills)
\$209,374.00 (without Village)
Plyville Village Tax Bill

Estimated new Real Property Tax Revenue if the Project did not receive Real Property Tax exemption:
\$174,000.00 annually, if taxes are not levied

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

G Describe any other one-time municipal revenues (not including fees payable to the Agency) that the Project will create:
Building permit application fees and Fire Marshal permit application 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 <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	_____ % complete
(b) Environmental Remediation	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	_____ % complete

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(c) Foundation	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % complete
(d) Footings	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % complete
(e) Steel	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % complete
(f) Masonry	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % complete
(g) Interior	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % complete
(h) Other (describe below):	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	<input type="checkbox"/> % 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 2015

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)

The Project will be completed 18-24 months from commencement in Winter/Spring 2015; applicant will occupy a portion of the space during the Project.

PART VI. ENVIRONMENTAL IMPACT

A. What is the expected environmental impact of the Project? (Complete the attached Environmental Assessment Form (Schedule G))
No impact

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

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.

Name of Applicant: CMS Real Estate Holdings LLC

Signature: _____

Name: Jay P. Shapiro

Title: President

Date: January, 2015

FEBRUARY 6

Sworn to before me this 10th
day of January, 2015
February

Maria B. Stajana
Notary Public

MARIA B. STAJANA
Notary Public, State of New York
Registration #01ST6226815
Qualified In Queens County
Commission Expires August 16, 20 18

**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:

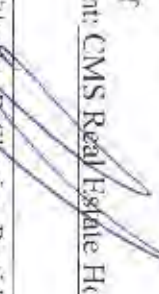
All applicants must disclose whether they have been appointed, elected or employed by New York State, any political division of New York State or any other governmental agency.

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: CMS Real Estate Holdings, LLC

By: 
Name/Title: Jay P. Shapiro, President

**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 by 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, economist, 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 such 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, economist, 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.

- (D) General Counsel Fee – One-tenth (1/10) of one percent (1%) of total project costs, with a minimum fee of \$2,000.
 - (E) 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.
 - (F) Refinancings – The Agency fee shall be determined on a case-by-case basis.
 - (G) Assumptions – The Agency fee shall be determined on a case-by-case basis.
 - (H) 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.

Name: ~~Jay P. Shapiro~~
 Title: ~~President~~

Sworn to before me this 6th
 day of ~~January~~, 2015
February

Maria B. Stajwana
 Notary Public

MARIA B. STAJUANA
 Notary Public, State of New York
 Registration #01ST6226815
 Qualified in Queens County
 Commission Expires August 16, 20 18

TABLE OF SCHEDULES

Schedule	Title	Complete as Indicated Below
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.	Voting-Rating 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: <ol style="list-style-type: none"> 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. 	All applicants
G.	5. Dun & Bradstreet report	All applicants
H.	Environmental Assessment Form (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.

B. 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.

C. 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.

D. 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 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: CMS Real Estate Holdings LLC

Signature: 

Name: Jay P. Spagnolo

Title: President

Date: January 2015

FELIX MONTY

Schedule A

Intentionally omitted

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: CMS Real Estate Holdings, LLC

Address: 266 Merrick Road, Lynbrook, NY 11503

Type of Business: Consulting Engineers

Contact Person: Jay P. Shapiro, P.E. Tel. No.: 516-791-2600

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 by Occupation	Estimated Number of Full Time Equivalent Jobs in the County After Completion of the Project		
		1 Year	2 Years	3 Years
<u>Engineers - 541330</u>	<u>19</u>	<u>19</u>	<u>20</u>	<u>21</u>
<u>Administrative - 561110</u>	<u>17</u>	<u>17</u>	<u>17</u>	<u>17</u>
<u>Drafting - 541340</u>	<u>9</u>	<u>9</u>	<u>9</u>	<u>10</u>
<u>Inspectors - 541350</u>	<u>2</u>	<u>2</u>	<u>3</u>	<u>3</u>

If applicable, please indicate the number of temporary construction jobs anticipated to be created in connection with the renovation of the Project: 10 - 12

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

3 new hires are anticipated on or before August 2015

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

YES NO X

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.

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: CMS Real Estate Holdings LLC

Signature: 
Name: Jay P. Shapiro
Title: President
Date: January 1, 2015
FEBRUARY 6

ANTI-RAIDING QUESTIONNAIRE

(To be completed by Applicant if Applicant checked "YES" in Part I, Question Q.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

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

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

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

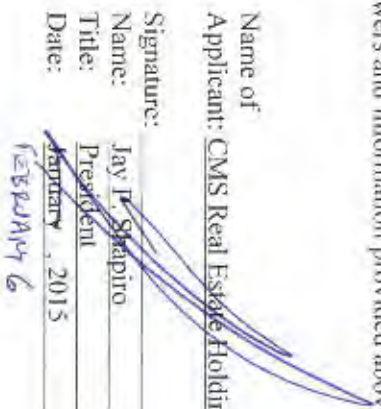
E. Is the Project reasonably necessary to discourage the Applicant, or a proposed occupant of the Project, from removing such plant or facility to a location outside of the State of New York?

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: CMS Real Estate Holdings LLC
Signature: 
Name: Jay L. Shapiro
Title: President
Date: February 6, 2015

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 _____

- H. 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/or in any statement attached hereto are true, correct and complete.

Name of Applicant: CMS Real Estate Holdings LLC

Signature: _____

Name: Jay P. Spadaro

Title: President

Date: January 6, 2015

Jay Spadaro

Schedule F

APPLICANT'S FINANCIAL ATTACHMENTS

ENVIRONMENTAL ASSESSMENT FORM

CMS REAL ESTATE HOLDINGS LLC
Balance Sheet
As of December 31, 2014

CMS REAL ESTATE HOLDINGS LLC
Balance Sheet
As of December 31, 2014

Dec 31, 14

3:59 PM

01/15/15

Cash Basis

CMS REAL ESTATE HOLDINGS LLC

Profit & Loss

January through December 2014

Jan - Dec 14

Make Checks Payable To:
 INC. VILLAGE OF LYNBROOK
 P.O. BOX 2021
 LYNBROOK, NY 11563-7731

TAX MAP NO. 350125 11-8-3-5
 LOCATION 766 MERRICK RD
 DIMENSIONS TOWN 17X.20
 PROPERTY CLASS ASL

Depth: 427.00 sq. ft.
 HOUSE 1

143

12761 ARLESSEDALE
 LYNBROOK, NY 11563-7731

218,880
 2014 VILLAGE TAX

218,880

18.80000

TAX AMOUNT 41,290.77

9141E AND 9141G
 TAX YEAR 2014-2015
 SPECIAL USE 182012014 - 05/31/2015
 WAREHOUSE 261W2014
 BILL NO. 4128 WARD NO. 0001790F
 100000 PER ASSY. HOLD 5119

DMS REAL ESTATE HOLDINGS LLC
 C/O HOWARD SHAPIRO & ASSOC.
 303 MERRICK ROAD
 SUITE 400
 LYNBROOK NY 11563

The Assessor estimated Full Market Value of this Property
 As of 2/1/2014: \$3,134,938
 The Uniform Percentage Vehicle Used in Property Assesment: 7.07%

TAX AMT	TOTAL
181 HALL TAX	5,120.77
218,880	20,640.00
PENALTY 0.25	0.00
TOTAL DUE	25,760.77
DATE DUE	12/01/2014

KEEP THIS STUB FOR YOUR RECORDS

1st half due by July 31st without penalty,
 2nd half due by December 31st without penalty

RETURN THIS PART WITH
 2ND HALF PAYMENT

2ND HALF

350125 11-8-3-5
 766 MERRICK RD

ACCOUNT NO. 0001790F
 BILL NO. 4128
 SALES CODE

AMOUNT DUE: 20,640.36
 PENALTY: 0.00
 DATE DUE: 12/01/2014
 TOTAL AMOUNT: 20,640.36

OWNERS: DMS REAL ESTATE HOLDINGS LLC
 NAME: C/O HOWARD SHAPIRO & ASSOC.
 ADDRESS: 303 MERRICK ROAD
 SUITE 400
 LYNBROOK NY 11563

ENVIRONMENTAL ASSESSMENT FORM

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. 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.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary for supplement any item.

Part 1 – Project and Sponsor Information

Name of Action or Project: 266 Merrick Road		
Project Location (describe, and attach a location map): 266 Merrick Road Lynbrook, NY 11563		
Brief Description of Proposed Action: Interior alterations of existing commercial building required to adequately maintain engineering firm.		
Name of Applicant or Sponsor: CMS Real Estate Holdings LLC	Telephone: 516-791-2400	
Address: 266 Merrick Road	E-Mail: joshapiro@hbsassoc.com	
City/PO: Lynbrook	State: NY	Zip Code: 11563
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected to the municipality and proceed to Part 2. If no, continue to question 2.	NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	
2. Does the proposed action require a permit, approval or landing from any other governmental Agency? If Yes, list agency(ies) name and permit or approval: Building Permit from Village of Lynbrook	NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>	
3a. Total acreage of the site of the proposed action? _____ 76 acres		
b. Total acreage to be physically disturbed? _____ 0 acres		
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 76 acres		
4. Check all land uses that occur on, adjoining and near the proposed action: <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland		

	NO	YES	N/A
5. Is the proposed action: a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built/or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Is the size of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services (a) available in or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply. <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100 year flood plain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ Existing municipal sewer system: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO	YES

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: CMS Real Estate Holdings LLC

Date: 2/10/15

Signature: _____



Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: <ul style="list-style-type: none"> a. public / private water supplies? b. public / private wastewater treatment utilities? 	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, watersheds, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No. of small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should be sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impact. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurrence, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

PRINT

OTHER ATTACHMENTS

The applicant is a LLC formed specifically for the purchase and ownership of the subject property. The related entity, H.I.S. & Assocs, has been operating as an Engineering Consulting Firm since 1989. H.I.S.& Assoc. provides engineering services to clients primarily located in the New York City area. H.I.S. & Assocs, is a world recognized expert in mobile and tower crane and rigging work. In addition to working with clients located in New York, the firm has provided its' professional services to clients in New Jersey, Illinois, Florida, California, Brazil, Mexico and India.

Provide below information to the extent available (lease agreement in your possession etc.)

Name: Lilawach

Address: 766 Merrick Road, Lynbrook, NY 11563

Primary Contact: Paula Oliveri/Evan Sirhin

Phone: 516-599-3620 Fax: _____

E-Mail: _____

NY State Dept. of Labor Reg # _____ Federal Employer ID # _____

NAICS Code #: _____

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

Sole Proprietorship General Partnership Limited Partnership

Limited Liability Company Privately Held Corporation

Publicly Held Corporation Exchange listed on _____

Not-for-Profit Corporation

Income taxed as: Subchapter S Subchapter C
S01(c)(3) Corporation Partnership

State and Year of Incorporation/Organization: _____

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

E. Principal stockholders, members or partners, if any (i.e., owners of 10% or more of equity/voting rights in Applicant):

Name	Percentage owned
_____	_____ %
_____	_____ %
_____	_____ %

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>
_____	_____	_____
_____	_____	_____

Name: Atlantic Dermatologic Association, LLP

Address: 266 Merrick Road, Lynbrook, NY 11563

Primary Contact: Dore Lynn

Phone: 516-599-0829 Fax: 516-599-4449

E-Mail: dlynn@atlantidelerm.com

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

NAICS Code #: _____

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

Sole Proprietorship General Partnership Limited Partnership

Limited Liability Company Privately Held Corporation

Publicly Held Corporation Exchange listed on _____

Not-for-Profit Corporation

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

State and Year of Incorporation/Organization: Cert of Registration NY-1996

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

E. Principal stockholders, members or partners, if any (i.e., owners of 10% or more of equity/voting rights in Applicant):

Name	Percentage owned
_____	_____ %
_____	_____ %
_____	_____ %

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>
_____	_____	_____
_____	_____	_____

