

# **CITY OF GENEVA INDUSTRIAL DEVELOPMENT AGENCY**

## **APPLICATION FOR FINANCIAL ASSISTANCE**

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**(Applicant Name)**

**David West  
Executive Director**

47 Castle Street  
Geneva, NY 14456  
Phone: 585-381-9250

<https://cityofgenevany.com/295/Industrial-Development-Agency-IDA>

Updated Feb. 2024

# CITY OF GENEVA INDUSTRIAL DEVELOPMENT AGENCY

## APPLICATION FOR FINANCIAL ASSISTANCE

Each applicant seeking assistance must complete this application and provide required supplemental forms/documentation.

Please answer all questions. Use "None" or "Not Applicable" where necessary. Information in this application may be subject to public review under New York State Law, except for information that is considered deniable by the Freedom of Information Law. This form is available at <http://visitgenevany.com/do-business/industrial-development-agency>.

Please send complete application via email to [dwest@geneva.ny.us](mailto:dwest@geneva.ny.us). A **non-refundable** application fee of \$500.00 is required. Please see page 16 for additional information on costs and fees.

### I. APPLICANT

#### A) Applicant Information

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Email: \_\_\_\_\_

Fax No.: \_\_\_\_\_

Fed Id. No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Principal Owners/Officers/Directors (list owners with 15% or more in equity holdings with percentage ownership):

Corporate Structure (*attach schematic if applicant is a subsidiary or otherwise affiliated with another entity*)

Form of Entity

☐ Corporation

Date of Incorporation: \_\_\_\_\_

State of Incorporation: \_\_\_\_\_

☐ Partnership

General \_\_\_\_\_ or Limited \_\_\_\_\_  
Number of general partners \_\_\_\_\_  
If applicable, number of limited partners \_\_\_\_\_

Date of formation \_\_\_\_\_  
Jurisdiction of Formation \_\_\_\_\_

☐ Limited Liability Company/Partnership (number of members \_\_\_\_\_)

Date of organization: \_\_\_\_\_  
State of Organization: \_\_\_\_\_

☐ Sole Proprietorship

If a foreign organization, is the applicant authorized to do business in the State of New York?  
\_\_\_\_\_

If any of the above persons, or a group of them, owns more than a 50% interest in the company, list all other organizations which are related to the company by virtue of such persons having more than a 50% interest in such organizations.  
  
\_\_\_\_\_

Is the company related to any other organization by reason of more than 50% common ownership? If so, indicate name of related organization and relationship.  
  
\_\_\_\_\_

Has the company (or any related corporation or person) made a public offering or private placement of its stock within the last year? If so, please provide offering statement used.  
  
\_\_\_\_\_

**B) Applicant's Counsel**

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Email: \_\_\_\_\_

Fax No.: \_\_\_\_\_

## II. PROJECT INFORMATION

A) Project Address: \_\_\_\_\_

Tax Map Number \_\_\_\_\_  
(Section/Block/Lot)

B) Are utilities on site?

Water \_\_\_\_\_ Electric \_\_\_\_\_  
Gas \_\_\_\_\_ Sanitary/Storm Sewer \_\_\_\_\_

C) Present legal owner of the site \_\_\_\_\_  
If other than from applicant, by what means will the site be acquired for this project? \_\_\_\_\_

D) Zoning of Project Site: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

E) Are any variances needed? \_\_\_\_\_

F) Furnish a copy of any environmental application presently in process of completion concerning this project, providing name and address of the agency, and copy all pending or completed documentation and determinations.

G) Statement describing project (i.e. land acquisition, construction of manufacturing facility, etc.) (please attach additional pages, if needed):

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H) Principal use of project upon completion:

<input type="checkbox"/> manufacturing	<input type="checkbox"/> warehousing	<input type="checkbox"/> research	<input type="checkbox"/> offices
<input type="checkbox"/> industrial	<input type="checkbox"/> recreation	<input type="checkbox"/> retail	<input type="checkbox"/> residential
<input type="checkbox"/> training	<input type="checkbox"/> data process	<input type="checkbox"/> other	

If other, explain: \_\_\_\_\_

I) Inter-Municipal Move Determination

Will the project result in the removal of a plant or facility of the applicant from one area of the State of New York to another?

☐ Yes or ☐ No

Will the project result in the removal of a plant or facility of another proposed occupant of the project from one area of the State of New York to another area of the State of New York?

☐ Yes or ☐ No

Will the project result in the abandonment of one or more plants or facilities located in the State of New York?

☐ **Yes** or ☐ **No**

If Yes to any of the questions above, explain how, notwithstanding the aforementioned closing or activity reduction, the Agency's Financial Assistance is required to prevent the Project from relocating out of the State, or is reasonably necessary to preserve the Project occupant's competitive position in its respective industry:

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Project Data

1. Project site (land)

(a) Indicate approximate size (in acres or square feet) of project site.

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(b) Are there buildings now on the project site? ☐ Yes ☐ No

(c) Indicate the present use of the project site.

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(d) Indicate relationship to present user of project.

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2. Does the project involve acquisition of an existing building or buildings? If yes, indicate number, size and approximate age of buildings:

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3. Does the project consist of the construction of a new building or buildings? If yes, indicate number and size of new buildings:

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4. Does the project consist of additions and/or renovations to existing buildings? If yes, indicate nature of expansion and/or renovation:

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5. What will the building or buildings to be acquired, constructed or expanded be used for by the company? (Include description of products to be manufactured, assembled or processed, and services to be rendered. . .

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. . .including the percentage of building(s) to be used for office space and an estimate of the percentage of the functions to be performed at such office not related to the day-to-day operations of the facilities being financed.)

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6. If any space in the project is to be leased to third parties, indicate total square footage of the project amount to be leased to each tenant and proposed use by each tenant.

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7. List principal items or categories of equipment to be acquired as part of the project.

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8. Has construction work on this project begun?

Complete the following

- |                            |                              |                             |                  |
|----------------------------|------------------------------|-----------------------------|------------------|
| (a) site clearance         | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |
| (b) foundation             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |
| (c) footings               | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |
| (d) steel                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |
| (e) masonry work           | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |
| (f) other (describe below) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ % complete |

9. Project Timeline

- (a) Proposed Date of Acquisition: \_\_\_\_\_
- (b) Proposed Commencement Date of Construction: \_\_\_\_\_
- (c) Anticipated Completion Date: \_\_\_\_\_

[Remainder of Page Left Blank Intentionally]

### III. ESTIMATED PROJECT COSTS

- A) Estimate the costs necessary for the construction, acquisition, rehabilitation, improvements and/or equipment of the project by the Applicant.

#### **Building Construction or Renovation**

- |              |             |
|--------------|-------------|
| a. Materials | a. \$ _____ |
| b. Labor     | b. \$ _____ |

#### **Site Work**

- |   |             |
|---|-------------|
| c. Materials                                  | c. \$ _____ |
| d. Labor                                      | d. \$ _____ |
| e. Non-Manufacturing Equipment                | e. \$ _____ |
| f. Manufacturing Equipment                    | f. \$ _____ |
| g. Equipment Furniture and Fixtures           | g. \$ _____ |
| h. Land and/or Building Purchase              | h. \$ _____ |
| i. Soft Costs (Legal, Architect, Engineering) | i. \$ _____ |
- Other (specify):
- |          |             |
|----------|-------------|
| j. _____ | j. \$ _____ |
| k. _____ | k. \$ _____ |
| l. _____ | l. \$ _____ |

**Total Project Costs (must equal Total Sources)** \$ \_\_\_\_\_

Percent of construction labor and materials to be \_\_\_\_\_%  
procured in Ontario County:

#### B) Sources of Funds of Project Costs:

- |                                       |             |
|---------------------------------------|-------------|
| a. Tax-Exempt Industrial Revenue Bond | a. \$ _____ |
| b. Taxable Industrial Revenue Bond    | b. \$ _____ |
| c. Bank Financing                     | c. \$ _____ |
| d. Public Sources                     | d. \$ _____ |

Identify each state and federal grant/credit

- |          |             |
|----------|-------------|
| e. _____ | e. \$ _____ |
| f. _____ | f. \$ _____ |
| g. _____ | g. \$ _____ |
| h. _____ | h. \$ _____ |

**Total Sources (must equal Total Project Costs)** \$ \_\_\_\_\_

#### C) Has the applicant made any arrangements for the financing of this project?

☐ Yes or ☐ No

If yes, please specify bank, underwriter, etc

**IV. FINANCIAL ASSISTANCE REQUESTED (Check all that apply)**

**A) Benefits Requested:**

☐ Sales Tax Exemption    ☐ IRB    ☐ MRT Exemption    ☐ Real Property Agreement

**B) Value of Incentives:**

IDA PILOT Benefit: Agency staff will indicate the amount of PILOT Benefit based on estimated Project Costs as contained herein and anticipated tax rates and assessed valuation, including the annual PILOT Benefit abatement amount for each year of the PILOT benefit year and the sum total of PILOT Benefit abatement amount for the term of the PILOT as depicted under the heading "Real Property Tax Benefit (Detailed)" of the Application.

Estimated duration of Property Tax exemption: \_\_\_\_\_

Sales and Use Tax:

Estimated value of Sales Tax exemption: \$\_\_\_\_\_

Estimated duration of Sales Tax exemption: \_\_\_\_\_

Mortgage Recording Tax Exemption Benefit:

Estimated value of Mortgage Recording Tax exemption: \$\_\_\_\_\_

IRB Benefit:

☐ IRB inducement amount, if requested: \$\_\_\_\_\_

Is a purchaser for the Bonds in place?

☐ Yes or ☐ No

Percentage of Project Costs financed from Public Sector sources:

Agency staff will calculate the percentage of Project Costs financed from Public Sector sources based upon Sources of Funds for Project Costs as depicted above under the heading "Estimated Project Costs" (Section II(I)) of the Application.

**C) Likelihood of Undertaking Project without Receiving Financial Assistance**

Please confirm by checking the box, below, if there is likelihood that the Project would not be undertaken but for the Financial Assistance provided by the Agency?

☐ Yes or ☐ No



If the Project could be undertaken without Financial Assistance provided by the Agency, then provide a statement in the space provided below indicating why the Project should be undertaken by the Agency:

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## V. EMPLOYMENT PLAN

Job Category	Average Salary or Salary Range	Average Fringe Benefits or Range of Fringe Benefits	Current Number of FTE jobs to be Retained	Jobs to be Created as a Result of the Project					
				Year 1		Year 2		Year 3	
				Full time (FTE )	Part time (PTE )	Full time (FTE )	Part time (PTE )	Full time (FTE )	Part time (PTE )
Management									
Professional									
Administrative									
Production									
Independent Contractor									
Other									

What percentage of the total jobs to be created will be filled by residents of the Labor Market Area? \*\* \_\_\_\_\_%

\*\* For purposes of this question, please estimate the number of FTE and PTE jobs that will be filled, as indicated in the third column, by residents of the Labor Market Area, in the fourth column. The Labor Market Area includes [\_\_\_\_\_] (or six other contiguous counties, including Ontario County, chosen at the Agency's discretion).

## VI. REPRESENTATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

- A) Job Listings In accordance with Section 858-b(2) of the New York General Municipal Law, the applicant understands and agrees that, if the proposed project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the

proposed project must be listed with the New York State Department of Labor Community Services Division (the "DOL") and with the administrative entity (collectively with the DOL, the "JPTA Entity") of the service delivery area created by the federal job training partnership act (Public Law 97-300) ("JPTA") in which the project is located.

- B) First Consideration for Employment In accordance with Section 858-b(2) of the General Municipal Law, the applicant understands and agrees that, if the proposed project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, where practicable, the applicant must first consider persons eligible to participate in JPTA programs who shall be referred by the JPTA Entities for new employment opportunities created as a result of the proposed project.
- C) A liability and contract liability policy for a minimum of three million dollars will be furnished by the Applicant insuring the Agency.
- D) Annual Sales Tax Filings In accordance with Section 874(8) of the General Municipal Law, the Applicant understands and agrees that, if the proposed project receives any sales tax exemptions as part of the Financial Assistance from the Agency, in accordance with Section 874(8) of the General Municipal Law, the applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the applicant and all consultants or subcontractors retained by the Applicant.
- E) Annual Employment Reports The applicant understands and agrees that, if the proposed project receives any Financial Assistance from the Agency, the applicant agrees to file, or cause to be filed, with the Agency, on an annual basis, reports regarding the number of people employed at the project site.
- F) Compliance with N.Y. GML Sec. 862(1): Applicant understands and agrees that the provisions of Section 862(1) of the New York General Municipal Law, as provided below, will not be violated if Financial Assistance is provided for the proposed Project:

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

- G) Compliance with Applicable Laws: The Applicant confirms and acknowledges that the owner, occupant, or operator receiving Financial Assistance for the proposed Project is in substantial compliance with applicable local, state and federal tax, worker protection and environmental laws, rules and regulations.
- H) False and Misleading Information: The Applicant confirms and acknowledges that the submission of any knowingly false or knowingly misleading information may lead to the

immediate termination of any Financial Assistance and the reimbursement of an amount equal to all or part of any tax exemption claimed by reason of the Agency's involvement the Project.

- I) Recapture: Should the Applicant not expend or hire as presented, the Agency may view such information/status as failing to meet the established standards of economic performance. In such events, some or all of the benefits taken by the Applicant will be subject to recapture.
- J) Absence of Conflicts of Interest The applicant has received from the Agency a list of the members, officers, and employees of the Agency. No member, officers or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as herein described.

The Applicant and the individual executing this Application on behalf of applicant acknowledge that the Agency and its counsel will rely on the representations made in this Application when acting hereon and hereby represents that the statements made herein do not contain any untrue statement of a material fact and do not omit to state a material fact necessary to make the statements contained herein not misleading.

STATE OF NEW YORK )  
COUNTY OF ONTARIO ) ss.:

\_\_\_\_\_, being first duly sworn, deposes and says:

1. That I am the \_\_\_\_\_ (Corporate Office) of \_\_\_\_\_ (Applicant) and that I am duly authorized on behalf of the Applicant to bind the Applicant.
2. That I have read the attached Application, I know the contents thereof, and that to the best of my knowledge and belief, this Application and the contents of this Application are true, accurate and complete.

\_\_\_\_\_  
(Signature of Officer)

Subscribed and affirmed to me under penalties of perjury  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
(Notary Public)

This Application should be submitted to the City of Geneva Industrial Development Agency,  
c/o Frank Cecere, Chairman, 47 Castle Street, Geneva, NY 14456.

The Agency will collect an administrative fee at the time of closing.

**SEE ATTACHED FEE SCHEDULE**

IDA and Bond Counsel  
RUSSELL GAENZLE, ESQ.  
Harris Beach PLLC  
99 Garnsey Road  
Pittsford, New York 14534  
Tel: (585) 419-8633  
Fax: (585) 419-8817

Attach copies of preliminary plans or sketches of proposed construction or rehabilitation or both.

Attach the following Financial Information of the Company

1. Financial statements for last two fiscal years (unless included in company's Annual Reports).
2. Company's annual reports (or Form 10-K's) for the two most recent fiscal years.
3. Quarterly reports (Form 10Q's) and current reports (Form 8-K's) since the most recent Annual Report, if any.
4. In addition, please attach the financial information described above in items 1, 2 and 3 of any expected Guarantor of the proposed bond issue, if different from the company.

## HOLD HARMLESS AGREEMENT

Applicant hereby releases the CITY OF GENEVA INDUSTRIAL DEVELOPMENT AGENCY and the members, officers, servants, agents and employees thereof (the "Agency") from, agrees that the Agency shall not be liable for and agrees to indemnify, defend and hold the Agency harmless from and against any and all liability arising from or expense incurred by (A) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the Application or the Project described therein or the tax exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project; including without limiting the generality of the foregoing, all causes of action and attorneys' fees and any other expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing. If, for any reason, 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 if the Agency or the Applicant are unable to reach final agreement with respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in processing of the Application, including attorneys' fees, if any.

\_\_\_\_\_  
(Applicant Signature)

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

Sworn to before me this \_\_\_\_\_ day

[stamp]

of \_\_\_\_\_, 20\_\_\_\_\_

**Real Property Tax Benefits (Detailed):**

\*\* This section of this Application will be: (i) completed by IDA Staff based upon information contained within the Application, and (ii) provided to the Applicant for ultimate inclusion as part of this completed Application.

**PILOT Estimate Table Worksheet**

Dollar Value of New Construction and Renovation Costs	Estimated New Assessed Value of Property Subject to IDA*	County Tax Rate/1000	Local Tax Rate (Town/City/Village)/1000	School Tax Rate/1000

\*Apply equalization rate to value

PILOT Year	% Payment	County PILOT Amount	Local PILOT Amount	School PILOT Amount	Total PILOT	Full Tax Payment w/o PILOT	Net Exemption
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
TOTAL							

\*Estimates provided are based on current property tax rates and assessment values

Cost Benefit Analysis:

To be completed/calculated by AGENCY

	<u>Costs =</u> <u>Financial Assistance</u>	<u>Benefits =</u> <u>Economic Development</u>
*Estimated Sales Tax Exemption	\$_____	New Jobs Created Permanent _____ Temporary _____
		Existing Jobs Retained Permanent _____ Temporary _____
Estimated Mortgage Tax Exemption	\$_____	Expected Yearly Payroll \$_____
Estimated Property Tax Abatement	\$_____	Expected Gross Receipts \$_____
		Additional Revenues to School Districts _____ _____ _____
		Additional Revenues to Municipalities _____ _____ _____
		Other Benefits _____
Estimated Interest Savings IRB Issue	\$_____	Private Funds invested \$_____
		Likelihood of accomplishing proposed project within three (3) years  <input type="checkbox"/> Likely or <input type="checkbox"/> Unlikely

\* Estimated Value of Goods and Services to be exempt from sales and use tax as a result of the Agency’s involvement in the Project. PLEASE NOTE: These amounts will be verified and there is a potential for a recapture of sales tax exemptions (see “Recapture” on page 11).

\$\_\_\_\_\_ (to be used on the NYS ST-60)

**FEE SCHEDULE FOR THE  
CITY OF GENEVA IDA IS AS FOLLOWS:**

**Application Fee:**     **\$500 non-refundable, due at application.**

**Closing Fees/Expenses:**

<b>Transaction Type</b>	<b>Fees</b>
Lease/Leaseback including any/all of the following: 1. PILOT Agreement 2. Sales Tax Exemption* 3. Mortgage Tax Exemption	IDA Administrative Fee: <ul style="list-style-type: none"> <li>• 1% of the total project cost</li> </ul> IDA Transaction Counsel Fee: <ul style="list-style-type: none"> <li>• 1/3 of the IDA fee</li> </ul>
Sales Tax Exemption* and/or Mortgage Recording Tax Exemption	IDA Administrative Fee: <ul style="list-style-type: none"> <li>• 1% of total project costs, with a minimum of \$1,000 and a maximum of 10% of the estimated benefit</li> </ul> IDA Transition Counsel Fee: <ul style="list-style-type: none"> <li>• Sales tax only - \$2,000</li> <li>• Sales tax &amp; Mortgage - \$4,000</li> </ul>
Bond: Taxable or Tax-Exempt with Lease/Leaseback including any/all of the following: 1. PILOT Agreement 2. Sales Tax Exemption* 3. Mortgage Tax Exempt	IDA Administrative Fee: <ul style="list-style-type: none"> <li>• 1% of total project cost</li> </ul> IDA Transition Counsel Fee: <ul style="list-style-type: none"> <li>• 1/3 of the IDA fee.</li> </ul> Designated Bond Counsel fee is based on the complexity and amount of the transaction.
Bond: Taxable or Tax-Exempt Bond Only	IDA Administrative Fee: <ul style="list-style-type: none"> <li>• 1% of principal amount of the bond</li> </ul> IDA Transition Counsel Fee: <ul style="list-style-type: none"> <li>• 1/3 of the IDA fee.</li> </ul> Designated Bond Counsel fee is based on the complexity and amount of the transaction.

\* If the sales tax benefits are required prior to closing, a non-refundable twenty-five percent (25%) of the IDA Administrative Fee and IDA Transaction Counsel Fees are payable at that time. This amount will be applied towards the IDA Administrative Fee and IDA Transaction Counsel Fee.

**NOTE:**     IDA reserves the right to seek additional IDA, Transaction Counsel and Bond Counsel fees for exceptionally complex/large transactions.

**Please make all Checks payable to:**

*City of Geneva Industrial Development Agency*

**Mail to:**  
47 Castle Street  
Geneva, NY 14456