



TOWN OF ISLIP

INDUSTRIAL DEVELOPMENT AGENCY

Application for Financial Assistance

Town of Islip IDA
40 Nassau Avenue
Islip, New York 11751
Phone 631.224.5512
Fax 631.224.5532

Updated 6-2014

APPLICANT INSTRUCTIONS

- ♦ In order for a Town of Islip IDA Application to be reviewed in a timely manner, it must be complete. All questions must be answered and all required attachments must be included.
- ♦ Use "None" or "Not Applicable" where necessary.
- ♦ Part VI—Bond Information, need only be completed by applicants for Taxable or Tax Exempt Industrial Development Bonds.
- ♦ All applicants must submit an original and two (2) copies of all documents to the Agency.
- ♦ All applications must be accompanied by a \$1,000 non-refundable fee to the Town of Islip Industrial Development Agency, and a \$500 non-refundable fee to the Town of Islip for the EAF Review required by the State Environmental Quality Review Act (SEQRA). (If the project has already undergone a SEQRA review during the preview process, then applicant can submit the completed EAF for the one attached to the application).

APPLICANT CHECKLIST

- I have completed all sections of the attached application.
- I have signed and notarized the Certification Section (Part VII-A).
- I have signed Part VII-B regarding the Fee Structure for all IDA transactions.
- I have attached all company financial information required by Part VIII-A.
- I have completed and signed the Environmental Assessment Form required by SEQRA. (If the project has already undergone a SEQRA review during a previous process, substitute the completed EAF for the one that was attached to this application).
- I have completed and signed Form RP485-b as required by Real Property Tax Law.
- I have submitted the original and two (2) copies of all application materials to the Agency for review.
- I have submitted an application fee check for \$1,000 payable to the Town of Islip IDA.
- I have submitted a \$500 check payable to the Town of Islip for the SEQRA review. (If the project has already undergone a SEQRA review during a previous process, and the applicant substitutes the completed EAF for the one attached to the application, the \$500 SEQRA fee is waived).

PART I Company (Owner/User) Data

PART II Project Data

PART III Employment/Sales Data

PART IV Construction Schedule

PART V Project Costs/Financing

PART VI Certifications

PART VII Required Attachments
1. Financial Information
2. EAF
3. RP 485-b

I. OWNER & USER DATA

A. Owner Data

1. Company Name Chaika Holdings Corp
Current Address 130 Hoffman Lane, Islandia, NY 11749
2. Company Officer certifying this application
Name Jody Hecht
Mailing Address 130 Hoffman Lane, Islandia, NY 11749
Telephone [REDACTED] Fax
Email
3. Business Type
☐ Sole Proprietorship ☐ General Partnership
☐ Limited Partnership ☐ Limited Liability Company
☐ Not-for-profit Corporation ☒ Privately Held Corporation
☐ Education Corporation ☐ Other
☐ Public Corporation—Listed on _____ Exchange
4. State of Incorporation New York
5. Principal Officers

Name	Title
<u>Jody Hecht</u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>
6. Principal Stockholders

Name	Title
<u>Jody Hecht</u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>
7. Owner's Legal Counsel
Name N/A
Firm Name
Address
Telephone Fax
Email
8. Bank References
N/A
9. Major Trade References
N/A
10. Nature of Business
(i.e. "manufacturer of ___ for ___ industry" or "warehouse distributor of ___" or "real estate holding company")
Real Estate Holding Company
11. NAICS Code [REDACTED]
For help determining your NAICS code, please visit <http://www.naics.com>

I. OWNER & USER DATA

B. User Data

For co-applicants, where a tenant/landlord relationship will exist between the owner and the user, the user must occupy at least 50% of the square footage of the facility

1. Company Name Century Direct, LLC
Current Address 30-30 47th Ave, Long Island City, NY 11101
2. Company Officer certifying this application
Name Michael T. Kellogg
Mailing Address [REDACTED]
Telephone [REDACTED] Fax [REDACTED]
Email [REDACTED]
3. Business Type
☐ Sole Proprietorship ☐ General Partnership
☐ Limited Partnership ☒ Limited Liability Company
☐ Not-for-profit Corporation ☐ Privately Held Corporation
☐ Education Corporation ☐ Other
☐ Public Corporation—Listed on _____ Exchange
4. State of Incorporation New York
5. Principal Officers

Name	Title
Michael T. Kellogg, Chief Executive Officer; Jerome Nassau, President;	
Lawrence Korek, Chief Marketing Officer; Eric Seid, Chief Operating Officer	
6. Principal Stockholders

Name	Title
Century Letter Company, Inc. and Mailhandlers Printing and Mailing, Inc.	
7. User's Legal Counsel
Name Neil Kaufman, Esq.
Firm Name Abrams, Fensterman, Fensterman, Eisman, Formato, Ferrara & Wolf, LLP
Address 1111 Marcus Avenue Suite 107 Lake Success, NY 11042
Telephone [REDACTED] Fax [REDACTED]
Email [REDACTED]
8. Bank References
M+T Bank 303 South Broadway, Suite 130 Tarrytown, NY 10591
[REDACTED]
9. Major Trade References
Mailtech Mailing Systems, Inc. 625 Acorn Street Deer Park, NY 11729 Main contact: Doug Branch Telephone: 631 586 2174 Email: Doug@mailtechmailingsystems.com
Craig Envelope Corp. 12-01 44th Avenue Long Island City, NY 11101 Main Contact: Craig Aaronson Telephone: (718) 392-9304 Email: caaronson@craigenvelope.com
10. Nature of Business
(i.e. "manufacturer of ___ for ___ industry" or "warehouse distributor of ___" or "real estate holding company")
Commercial printing, mailing, data management and computer services.
11. NAICS Code [REDACTED]
For help determining your NAICS code, please visit <http://www.naics.com>

II. PROJECT DATA

A. Location

1. Street Address 130 Hoffman Lane, Islandia, NY 11749
2. Tax Map

<u>0504</u>	<u>007.00</u>	<u>02.00</u>	<u>006.000</u>
District #	Section #	Block #	Lot #
3. Acreage 1.77
4. Municipal Jurisdictions
Town Islip
Village Islandia
School District Hauppauge

B. Description (Check all that apply)

- ☐ New Construction _____ Square Feet
- ☐ Addition to Existing Facility _____ Square Feet
- ☐ Acquisition of Existing Facility _____ Square Feet
- ☐ Acquisition & Renovation of Existing Facility _____ Square Feet
- ☐ Purchase of New Machinery & Equipment _____
- ☒ Other (specify) Lease of existing 30,000 square foot building

C. Related Facilities

1. Are other facilities or related companies located within the state? ☒ Yes ☐ No
Address 30-30 47th Ave, Long Island City, NY 11101
2. If yes to above (C-1), will any of these facilities close or be subject to reduced activity? ☒ Yes ☐ No
3. If yes to above (C-2), please describe: Manufacturing operations will be moved to the Town of Islip

D. Real Estate Search

1. Has the company actively sought sites in another state or outside the New York metropolitan region? ☒ Yes ☐ No
2. If yes to above (D-1), please list the states/regions considered: Moonachie, Bergen County New Jersey

E. Present Owner

1. Who is the current legal owner of the site? Chaika Holdings Corp
2. Is there a purchase option or other legal or common control in the project? ☐ Yes ☒ No
3. Is there an existing or proposed lease for the project? ☐ Yes ☒ No
4. If yes to either above (E-2 or E-3), please explain (i.e. purchase price, term of lease):

II. PROJECT DATA

F. Project Narrative

1. Describe the project in detail, emphasizing the following:
 - A. Specific operations of the company to be conducted at the project premises
(product manufactured/warehoused, services rendered)
 - B. Proposed product lines and market demands
 - C. Need for the new facility
 - D. Square footage of the old facility
 - E. Square footage of the new facility
 - F. Type of building to be constructed
 - G. Major equipment to be purchased
-

This application is for an additional 30,000 square foot building that is an integral part of Century Direct's project for the retention of Mailmen, Inc, employees in Islandia and facilitate the company's move from Long Island City to the Town of Islip.

2. For pollution controls, also describe:
 - A. Type of pollution to be abated
 - B. Method of abatement
 - C. Existing orders of environmental agencies
-

N/A

III. EMPLOYMENT/SALES DATA

A. Employees	Current	First year upon completion	Second year upon completion
Full time	The Hoffman Lane location will have 42 employees at the end of year 1 and 48 at the end of year 2.		
Part time	There will be 264 employees working out of the Enter Lane location at the end of year 2 totaling 312 for both locations.		
Seasonal			
Total			

B. Payroll	Current	First year upon completion	Second year upon completion
Total \$	\$8,258,856	\$14,233,856	\$14,400,000

C. Average Annual Wages	Current	First year upon completion	Second year upon completion
Total \$	\$50,475	\$50,475	\$50,475

D. Sales	Current	First year upon completion	Second year upon completion
Total \$	\$18,030,219	\$28,500,000	\$29,100,000

IV. PROJECT CONSTRUCTION SCHEDULE

A. Key Dates (proposed)

	Month & Year
1. Construction commencement	March, 2015
2. Construction completion	April, 2015
3. Building Occupancy	May, 2015

B. Please check if any of the following applications/permits have been filed for the project: (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Change of Zone | <input type="checkbox"/> Interior Alterations |
| <input type="checkbox"/> Special Use | <input type="checkbox"/> Building |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Site plan |

V. PROJECT COSTS/FINANCING

- A. Estimate the costs necessary for the construction, acquisition, rehabilitation, improvement and/or equipping of the project.

Item	Amount
1. Land	\$ _____
2. Site Work	_____
3. Building (new construction)	_____
4. Building (rehabilitation)	\$500,000
5. Engineering & Architectural Fees	\$10,000
6. Machinery & Equipment	\$300,000
7. Other (specify)	\$350,000 (Mfg Equipment, Sales Tax Exempt)
TOTAL PROJECT COST*	\$1,160,000

- B. Please provide the amount of sales tax exemptions that your project requires
\$ 800,000 (See Attachment C)

B1. If your project has a landlord/tenant arrangement, please provide the breakdown of the number above Century Direct will be responsible for paying for the building renovations.

- C. How does the company propose to finance the project?

	Amount	Term
1. Tax Exempt IDB*	_____	_____
2. Taxable IDB*	_____	_____
3. Conventional Mortgage (with IDA sale/leaseback)	_____	_____
4. Owner/User Self-Financing (with IDA sale/leaseback)	_____	_____
5. JDA/SBA	_____	_____
6. Other loans	_____	_____
7. Company/Owner Equity contribution	\$1,160,000	_____
TOTAL AMOUNT FINANCED	\$0	_____

- D. Please estimate when the above amounts will be required

N/A

Month & Year

* The Agency Fee of one-half of a basis point (.006) will be applied against the total project cost or, where applicable, against the amount of the IDB issuance.

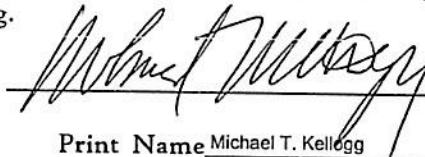
VI. CERTIFICATIONS

A. Applicant Responsibilities

Michael T. Kellogg (name of representative of entity submitting application or name of individual submitting application) deposed and says that s/he (choose and complete one of the following two options) (a) is a/the Chief Executive Officer (title) of Century Direct, LLC. (company name), the entity named in the attached application, or (b) is the individual named in the attached application; that s/he has read the foregoing application and knows the contents thereof; and that the same is true of his/her knowledge.

Deponent further says that s/he is duly authorized to make this certification on behalf of her/himself or on behalf of the entity named in the attached application. The grounds of deponent's belief relative to all matters in said application which are not stated upon his/her own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as, if deponent is not an individual applicant, information acquired by deponent in the course of his/her duties in connection with said entity and from the books and papers of said entity.

As (a) the representative of said entity, or (b) the individual applicant (such entity or individual applicant hereinafter referred to as the "Applicant"), deponent acknowledges and agrees that the Applicant shall be and is responsible for all costs incurred by the Town of Islip Industrial Development Agency (hereinafter referred to as the "Agency"), acting on behalf of the Applicant in connection with this application and all matters relating to the provision of financial assistance to which this application and all matters relating to the provision of financial assistance to which this application relates. If, for any reason whatsoever, the Applicant fails to conclude or consummate necessary negotiations or fails to act within a reasonable or specified period of time to take reasonable, proper or requested action or withdraws, abandons, cancels or neglects the application, then upon presentation of an invoice, the Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred with respect to the application up to that date and time, including fees to transaction counsel for the Agency and fees of general counsel for the Agency. Upon the successful conclusion of the transaction contemplated herein, the Applicant shall pay to the Agency an administrative fee set by the Agency, in accordance with its fee schedule in effect on the date of the foregoing application, which amount is payable at closing.

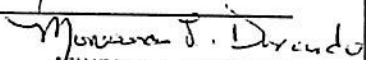


Print Name Michael T. Kellogg

Title Chief Executive Officer

NOTARY

Sworn to before me this 18th day of February, 2015


MINERVA L. DUPANDO
Notary Public, State of New York
No. 01016071484
Qualified in Nassau County
Commission Expires Jan. 13, 2019

VI. CERTIFICATIONS

B. Fee Structure

1. Application Fee—\$1,000.00

An application for IDA assistance must be accompanied by a non-refundable fee of \$1,000 plus a \$500 fee for the Town of Islip review of Environmental Assessment Form as required by the State Environmental Quality Review Act (SEQRA). (The \$500 fee will be waived if the applicant's project has already undergone a SEQRA review during a previous process, i.e. site plan, building permit, change of zone, etc.)

2. Agency Fee—.006

Upon closing of any IDA project, the Agency will assess an administrative fee of one-half of a basis point (.006) against the size of the project. For IDB projects, the .006 will be measured against the final bond amount. For straight-lease transactions, the .006 will be measured against the projected total costs.

3. Agency Counsel—\$250 per hour

The Town of Islip Town Attorney's Office acts as counsel to the Town of Islip IDA and must be reimbursed for time spent on IDA-related transactions. The Agency counsel bills all time spent on IDA matters at \$250 per hour. For IDA closings up to \$5 million, the Agency counsel bills a minimum of \$3,500. For projects greater than \$5 million, the Agency counsel bills a minimum of \$5,000. For all other activities, i.e. terminations, simple consents and waivers, transfer of assets, etc., the Agency counsel will bill at the aforementioned \$250 per hour.

4. Processing Fee—\$500

During the course of IDA ownership/involvement, the Agency may occasionally be required, by the company, to consent to a variety of items, i.e. pre-payment of bonds, second mortgages, additional secured financing, etc. The Agency will charge a \$500 processing fee for each of these requests.

5. Assignments & Assumptions—\$1,500

Occasionally, the IDA is asked to transfer benefits that were assigned to the original company, i.e. PILOT or mortgage recording tax benefits, to a different company, typically upon a sale of the IDA property. The new company often wishes to continue IDA involvement with the property in order to retain the IDA incentives. The Agency will charge a \$1,500 fee for each of these transactions.

6. PILOT Extensions/Modifications—.006

Occasionally, the Agency is asked to extend or modify an existing Payment in Lieu of Taxes Agreement (PILOT). The .006 will be measured against the projected increase of the PILOT benefit.

VI. CERTIFICATIONS

B. Fee Structure

7. Annual Administrative Fee— \$1,000

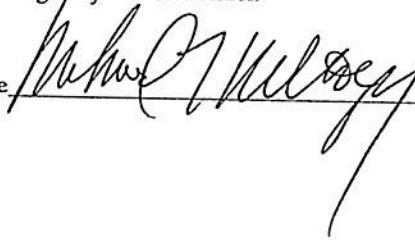
An Annual Administrative Fee of \$1,000 will be charged to all projects to cover the cost of all the reporting and monitoring of the transaction. This fee is subject to periodic review and may be adjusted at the discretion of the Agency.

8. Bond/Transaction Counsel—fee negotiated separately

While the Town of Islip IDA is represented locally by the Town of Islip Town Attorney's Office, a separate Bond/Transaction Counsel is also necessary on any IDA project. Bond/Transaction counsels render "third party" opinions that the bond or straight lease transaction is authorized under all federal, state and local statutes. Bond/Transaction counsels also prepare all documents related to IDA transactions and coordinates all activities leading up to closing. The Town of Islip IDA has designed the firm of Nixon Peabody, LLP as its Bond/Transaction counsel and all fees are separately negotiated with them.

I have read and understand the aforementioned explanation of the fees associated with all the Town of Islip Industrial Agency Transaction.

Signature

A handwritten signature in dark ink, appearing to read "Michael J. Mulvey", is written over a horizontal line. The signature is fluid and cursive.

VII. REQUIRED ATTACHMENTS

A. Financial Information

(Attach the following financial information of the owner and user)

1. Financial statements for the last two fiscal years (unless included in the Owner's or User's Annual Report)
2. Owner's or User's Annual Reports (or Form 10-k's) for the two most recent fiscal years
3. Quarterly reports (Form 10-Q's) and current reports (Form 8-k's) since the most recent annual report, if any
4. In addition, if applicable, please attach the financial information described above in items A, B and C, of any expected guarantor of the proposed bond issue other than the Owner or the User
5. Upon request of the Applicant, the Agency will review the information submitted pursuant to this Section VIII and return all copies to the Applicant within two weeks after the inducement date. Please indicate whether you require the information to be returned.
☒ Yes ☐ No

B. Environmental Assessment Form

Please complete the attached EAF as required by the State Environmental Quality Review Act (SEQRA).

C. Form RP 485-b

Please complete the attached Form RP 485-b as required by Section 485-b of the Real Property Tax Law



RP-485-b (1/95)

NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE
OFFICE OF REAL PROPERTY TAX SERVICES

**APPLICATION FOR REAL PROPERTY TAX
EXEMPTION FOR COMMERCIAL, BUSINESS OR INDUSTRIAL PROPERTY**
(Real Property Tax Law, Section 485-b)

(Instructions for completing this form are contained in Form RP-485-b-Ins)

1. Name and telephone no. of owner(s)
Jody Hecht

Chaika Holdings Corp

Day No. _____
Evening No. () _____
E-mail address (optional) _____
2. Mailing address of owner(s)

3. Location of property (see instructions)
- 130 Hoffman Lane

Street address
Islandia / Town of Islip

City/Town
- Islandia

Village (if any)
Hauppauge

School district

Property identification (see tax bill or assessment roll)

Tax map number or section/block/lot 0504 007.00 02.00 006.000

4. Description of property for which exemption is sought:
- a. ☐ New construction ☐ Alteration ☐ Installation ☒ Improvement
- b. General description of property (if necessary, attach plans or specifications): 30,000 square foot manufacturing and distribution facility that will be leased and renovated by Century Direct, LLC from Chaika Holdings Corp
- c. Type of construction: General building renovations
- d. Square footage: 30,000
- e. Total cost: \$150,000
- f. Date construction, alteration, installation or improvement was started: N/A
- g. Date completed (attach copy of certificate of occupancy or other documentation of completion): N/A
- h. Describe any real property replaced or removed in connection with the new construction, alteration, installation or improvement: N/A

5. Use of Property.

- a. Describe the primary use of the property and the type of business to be conducted. Manufacturing, distribution, computer services and office
- b. Describe any other use or uses of the property. N/A
- c. Is any part of the real property used for a purpose other than buying, selling, storing or developing goods or services; the manufacture or assembly of goods or the processing of raw materials; or hotel or motel purposes? ☐ Yes ☒ No
- d. If yes, describe in detail the other use or uses of the property and state the extent to which the property is so used (e.g., 30% of floor space, 25% of income, etc.).

6. Other exemptions.

- a. Is the property receiving or has it ever received any other exemption from real property taxation?
☐ Yes ☒ No

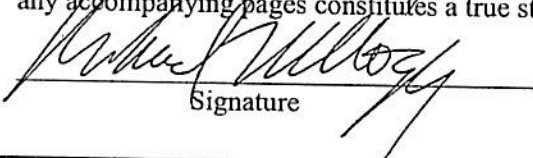
- b. If yes, what exemption was received? _____ When? _____

Were payments in lieu of taxes made during the term of that exemption? ☐ Yes ☒ No

If yes, attach a schedule showing the amounts and dates of such payments, and the purposes for which such payments were made (i.e., school district, general municipal, etc.). Also attach any related documentation, such as a copy of the agreement under which such payments were made.

CERTIFICATION

I, Michael T. Kellogg, hereby certify that the information on this application and any accompanying pages constitutes a true statement of facts.


Signature

2/17/15
Date

FOR ASSESSOR'S USE

1. Date application filed: _____ 2. Applicable taxable status date: _____
3. Action on application: ☐ Approved ☐ Disapproved
4. Assessed valuation of parcel in first year of exemption: \$ _____
5. Increase in total assessed valuation in first year of exemption: \$ _____
6. Amount of exemption in first year: _____

	Percent	Amount
County	_____	\$ _____
City/Town	_____	\$ _____
Village	_____	\$ _____
School District	_____	\$ _____

Assessor's signature

Date

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 to supplement any item.

Part 1 - Project and Sponsor Information																		
Century Direct, LLC																		
Name of Action or Project:																		
Project Location (describe, and attach a location map): 130 Hoffman Lane, Islandia, NY 11749																		
Brief Description of Proposed Action: Century Direct proposes to lease an 30,000 square foot facility located at 130 Hoffman Lane in Islandia.																		
Name of Applicant or Sponsor: Michael T. Kellogg		Telephone: [REDACTED]																
		E-Mail: [REDACTED]																
Address: [REDACTED]																		
City/PO: [REDACTED]		State: New York	Zip Code: [REDACTED]															
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 in the municipality and proceed to Part 2. If no, continue to question 2.			<table border="1" style="width: 100%; text-align: center;"><tr><td>NO</td><td>YES</td></tr><tr><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>											
NO	YES																	
<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			<table border="1" style="width: 100%; text-align: center;"><tr><td>NO</td><td>YES</td></tr><tr><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>											
NO	YES																	
<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
3.a. Total acreage of the site of the proposed action?		1.77 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?		1.77 acres																
4. Check all land uses that occur on, adjoining and near the proposed action. <table style="width: 100%;"><tr><td><input type="checkbox"/> Urban</td><td><input type="checkbox"/> Rural (non-agriculture)</td><td><input checked="" type="checkbox"/> Industrial</td><td><input type="checkbox"/> Commercial</td><td><input type="checkbox"/> Residential (suburban)</td></tr><tr><td><input type="checkbox"/> Forest</td><td><input type="checkbox"/> Agriculture</td><td><input type="checkbox"/> Aquatic</td><td colspan="2"><input type="checkbox"/> Other (specify): _____</td></tr><tr><td><input type="checkbox"/> Parkland</td><td colspan="4"></td></tr></table>				<input type="checkbox"/> Urban	<input type="checkbox"/> Rural (non-agriculture)	<input checked="" type="checkbox"/> Industrial	<input type="checkbox"/> Commercial	<input 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				
<input type="checkbox"/> Urban	<input type="checkbox"/> Rural (non-agriculture)	<input checked="" type="checkbox"/> Industrial	<input type="checkbox"/> Commercial	<input 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																		

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<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: _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO <input type="checkbox"/>	YES <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?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<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?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
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 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 checked="" type="checkbox"/> Urban <input type="checkbox"/> Suburban			
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?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO <input checked="" type="checkbox"/>	YES <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 type="checkbox"/> NO <input type="checkbox"/> YES	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ <input type="checkbox"/> NO <input type="checkbox"/> YES			

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: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: Michael T. Kollogg Date: 2/17/15 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:		
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
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, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or 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, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. 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 occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	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.
<input type="checkbox"/>	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.
<div> <div>Name of Lead Agency</div> <div>Date</div> </div>	
<div> <div>Print or Type Name of Responsible Officer in Lead Agency</div> <div>Title of Responsible Officer</div> </div>	
<div> <div>Signature of Responsible Officer in Lead Agency</div> <div>Signature of Preparer (if different from Responsible Officer)</div> </div>	

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