

Industrial Development Bond Cap

1. **Question Ref:** Q_1783
Question Type: Threshold

Is the applicant an authorized state agency, public authority or local issuer (e.g., IDA)?

2. **Question Ref:** Q_1604
Question Type: Basic

If yes, with which agency(s)?

3. **Question Ref:** Q_1605
Question Type: Basic

If funding was received in a prior round of the CFA, indicate the amount of funding received.

4. **Question Ref:** Q_1603
Question Type: Basic

Was this project or a phase of this project awarded funding in CFA Round I ?

5. **Question Ref:** Q_1049
Question Type: Basic

Contact Last Name

6. **Question Ref:** Q_1050
Question Type: Basic

Contact Title

7. **Question Ref:** Q_1051
Question Type: Basic

Additional Contact Title

8. **Question Ref:** Q_1052
Question Type: Basic

Additional Project Contact First Name

9. **Question Ref:** Q_1053
Question Type: Basic

If project review pursuant to the National Environmental Policy Act (NEPA) has been completed has a Finding of No Significant Impact or Record of Decision been issued?

10. **Question Ref:** Q_1054
Question Type: Basic

If National Environmental Policy Act (NEPA) Record of Decision has been issued, please explain (include date of Record of Decision).

11. **Question Ref:** Q_1056
Question Type: Basic

If review of the project is underway pursuant to the State Environmental Quality Review Act (SEQRA), please indicate the lead agency (if applicable).

12. **Question Ref:** Q_190
Question Type: Basic

NY Senate District(s) where the project is located. (please enter a number between 1 and 62 that represents your Senate District)

HELP SECTION

Click [HERE](#) to determine your Senate district.

13. **Optional Question Header:**

Applicant Information

- Question Ref:** Q_546
Question Type: Basic

Legal Name of Applicant

14. **Question Ref:** Q_184
Question Type: Basic

NYS Assembly District(s) where the project is located. (please enter a number between 1 and 150 that represents your Assembly District)

HELP SECTION

Click [HERE](#) to determine your Assembly district.

15. **Question Ref:** Q_547
Question Type: Basic

Contact First Name

16. **Optional Question Header:**

Project Location

- Question Ref:** Q_548
Question Type: Basic

Select your region. If your project spans multiple regions, select all regions that apply.

HELP SECTION

For a list of NYS regions, and the counties included in each region, click here ->
<http://www.esd.ny.gov/RegionalOverviews.html>

17. **Question Ref:** Q_549
Question Type: Basic

Type of Applicant (select all that apply)

18. **Question Ref:** Q_550
Question Type: Basic

If you are a DBA, what is your DBA name?

19. **Question Ref:** Q_551
Question Type: Basic

Applicant Street Address

20. **Question Ref:** Q_552
Question Type: Basic

Applicant City

21. **Question Ref:** Q_553
Question Type: Basic

Applicant State

22. **Question Ref:** Q_554
Question Type: Basic

Applicant Zip Code. (please use Zip+4 if known)

23. **Question Ref:** Q_555
Question Type: Basic

Applicant Email Address

24. **Question Ref:** Q_556
Question Type: Basic

Select an applicant ID type from the list below that you normally use to identify your organization on application forms.

HELP SECTION

Applicants will be required to provide the specified ID number upon request by the funding agencies.

25. **Question Ref:** Q_561
Question Type: Basic

Additional Contact Email Address

26. **Question Ref:** Q_562
Question Type: Basic

Additional Contact Phone Number. (please include area code)

27. **Question Ref:** Q_565
Question Type: Basic

Project City

28. **Question Ref:** Q_568
Question Type: Basic

Project State

29. **Question Ref:** Q_572
Question Type: Basic

Project Latitude

HELP SECTION

[Click HERE to determine Latitude](#)

30. **Question Ref:** Q_573
Question Type: Basic

Project Longitude

HELP SECTION

[Click HERE to determine Longitude](#)

31. **Optional Question Header:**

Project Description

Question Ref: Q_575
Question Type: Basic

Project Description. Concisely describe the project, indicating the location, what will be planned, designed, and/or constructed, the issues/opportunities to be addressed, and expected outcomes and deliverables. Additional details will be collected later in the application process.

32. **Question Ref:** Q_580
Question Type: Basic

Status of Permits

33. **Question Ref:** Q_582
Question Type: Basic

Estimated Service Life

HELP SECTION

List the estimated service life/useful life of capital expenditure that is the focus of this request.

34. **Question Ref:** Q_616
Question Type: Basic

For more than one project location, please provide full address(es) for each location. If Not Applicable, indicate "NA".

35. **Question Ref:** Q_651
Question Type: Basic

Applicant Telephone Number, (please include area code)

36. **Question Ref:** Q_928
Question Type: Basic

Project Street Address: if the project does not have a definite street address, please skip to "Project without a Street Address" below.

37. **Question Ref:** Q_929
Question Type: Basic

Current State of Project Development (i.e. planning, preliminary engineering, final design, etc)

38. **Question Ref:** Q_930
Question Type: Basic

Explain what makes your project a regional economic priority - for example creates jobs, economic investment, sustainability and community revitalization, etc.

39. **Question Ref:** Q_969
Question Type: Basic

If you are a business, have you been certified as an Minority or Women-owned Business Enterprise (MWBE)?

40. **Question Ref:** Q_970
Question Type: Basic

Additional Project Contact Last Name

41. **Question Ref:** Q_971
Question Type: Basic

Project Without a Street Address: please enter a description of the project location. Include project starting/ending street addresses, cities & zip codes if applicable.

42. **Question Ref:** Q_972
Question Type: Basic

Project county or counties.

43. **Question Ref:** Q_973
Question Type: Basic

Status of State and/or Federal Environmental Review.

44. **Question Ref:** Q_975
Question Type: Basic

Estimated Project Timeline: including project start/completion dates, estimates for design, permitting and construction or other major steps.

45. **Question Ref:** Q_976
Question Type: Basic

Statement of Need

HELP SECTION

Provide a brief summary of the need for the project in the geographic area proposed, the project's financing needs, including funding gaps and, where applicable, describe the additional short and long term jobs that will be created through the development of the proposed project.

46. **Question Ref:** Q_1034
Question Type: Basic

Project Zip Code. (please use Zip+4 if known)

47. **Question Ref:** Q_1784
Question Type: Standard Question

Which type of tax exempt bond is this under IRC sections 142, 144, or other relevant section (e.g., multi-family resident rental housing, small issue manufacturing)?

48. **Question Ref:** Q_1786
Question Type: Standard Question

Does the applicant expect to close on the project in 2012?

49. **Question Ref:** Q_1788
Question Type: Standard Question

Will the proposed project result in the creation of construction jobs? If so, estimate the number of construction jobs to be created. (Enter zero if not applicable.)

50. **Question Ref:** Q_1787
Question Type: Standard Question

Will the proposed project directly or indirectly result in the creation of permanent jobs? If so, estimate the number of permanent full-time equivalent jobs that will be created. (Enter zero if not applicable)

51. **Question Ref:** Q_1785
Question Type: Standard Question

What amount of bond cap is being requested?

52. **Optional Question Header:**

Funding Sources (Enter dollar amounts below)

- Question Ref:** Q_1782
Question Type: Standard Question

Total Project Cost

53. **Optional Question Header:**

General Certifications

- Question Ref:** Q_1037
Question Type: Certification

By entering your name in the box below, you certify and agree that you are authorized on behalf of the applicant and its governing body to commit the

applicant to comply with the requirements of Article 15-A of the New York State Executive Law: Participation By Minority Group Members and Women With Respect To State Contracts by providing opportunities for MBE/WBE participation. You further certify that the applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the project.

54. **Question Ref:** Q_1038

Question Type: Certification

By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.
