



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 APPLICANT owner(s) SPIRIT PHARMACEUTICALS, LLC

2. Mailing address of APPLICANT owner(s) 1919 MIDDLE COUNTRY ROAD

Day No. [REDACTED]

SUITE 206

CENTEREACH, NY 11720

Evening No. () SAME

3. Location of property (see instructions) 2004 ORVILLE DRIVE NORTH Street address RONKONKOMA City/Town

Village (if any)

School district

Property identification (see tax bill or assessment roll) Tax map number or section/block/lot 500-106-1-7.7

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): LEASE OF 54,000 SF SUITE FOR IMPORT, PACKAGING, DISTRIBUTION OF OTC PHARMACEUTICAL PRODUCTS

c. Type of construction:

d. Square footage: 54,000 SF LEASEHOLD

e. Total cost: EXISTING CONSTRUCTION, 4,800,000 FOR BUILDING REHAB, MACHINERY & EQUIPMENT

f. Date construction, alteration, installation or improvement was started: (NOT STARTED)

g. Date completed (attach copy of certificate of occupancy or other documentation of completion):

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. IMPORT, PACKAGING, DISTRIBUTION & WAREHOUSING OF OTC PHARMACEUTICALS

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 X 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

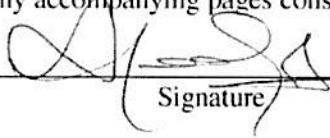
b. If yes, what exemption was received? _____ When? _____

Were payments in lieu of taxes made during the term of that exemption? _____

If so, 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, JAY JADEJA, hereby certify that the information on this application and any accompanying pages constitutes a true statement of facts.


_____ Signature

DECEMBER 2, 2014
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