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
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 $1000 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 $1000 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

   Current Address: 1885 New Highway, Farmingdale

2. Company Officer certifying this application
   Name: 
   Mailing Address: 1885 New Highway, Farmingdale
   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


5. Principal Officers
   Name: Jahirul Islam
   Title: President

6. Principal Stockholders
   Name: Jahirul Islam

7. Owner's Legal Counsel
   Name: Edward Hansen
   Firm Name: Dougherty & Schnelder
   Address: 625 Merrick Rd, Baldwin, NY 11510
   Telephone: [Redacted] Fax: [Redacted]
   Email: [Redacted]

8. Bank References
   Chase Manhattan: [Redacted] Bank of America: [Redacted]

9. Major Trade References
   Generex Labs, Megan Galley (239895231), XXL Impressions, Jeffrey Powlosky (943955731)

10. Nature of Business
    (i.e. “manufacturer of ___ for ___ industry” or “warehouse distributor of ___” or “real estate holding company”)
    Manufacturing of viatime Dietary supplements

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: A B H Nature's Products Inc
   Current Address: 1885 New Highway Farmingdale

2. Company Officer certifying this application
   Name: Jahriul Islam
   Mailing Address: 1885 New Highway Farmingdale
   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: [Redacted] Exchange


5. Principal Officers
   Name: Jahriul Islam
   Title: President

6. Principal Stockholders
   Name: Jahriul Islam

7. User's Legal Counsel
   Name: Edward Hansen
   Firm Name: Dougherty & Schnelder
   Address: 625 Merrick Rd Baldwin, NY 11510
   Telephone: [Redacted] Fax: [Redacted]
   Email: [Redacted]

8. Bank References
   Chase Manhattan // Bank of America

9. Major Trade References
   Generex labs, Megan Galler

10. Nature of Business
    (i.e. "manufacturer of __ for __ industry" or "warehouse distributor of __" or "real estate holding company")
    Manufacturing, packaging, warehousing and distribution of vitilame supplements

11. NAICS Code: [Redacted]
    For help determining your NAICS code, please visit http://www.naics.com
II. PROJECT DATA

A. Location

1. Street Address: 131 Hearland Blvd

2. Tax Map

<table>
<thead>
<tr>
<th>District #</th>
<th>Section #</th>
<th>Block #</th>
<th>Lot #</th>
</tr>
</thead>
<tbody>
<tr>
<td>0500</td>
<td>134</td>
<td>0001</td>
<td></td>
</tr>
</tbody>
</table>

3. Acreage:

4. Municipal Jurisdictions
   - Town: Edgewood
   - Village:
   - School District: Brentwood

B. Description (Check all that apply)

- [ ] New Construction
  - Square Feet
- [ ] Addition to Existing Facility
  - Square Feet
- [X] Acquisition of Existing Facility
  - 35000 Square Feet
- [ ] Acquisition & Renovation of Existing Facility
  - Square Feet
- [ ] Purchase of New Machinery & Equipment
- [ ] Other (specify): Racks, office equipment, mixing machines, packaging equipment

C. Related Facilities

1. Are other facilities or related companies located within the state?  □ Yes  □ No
   - Address:

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:

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:
   - The company has looked in N J for a potential location

E. Present Owner

1. Who is the current legal owner of the site?  FAE HOLDINGS 415629R LLC

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

The company manufactures vitamin supplements, and conducts research in their lab areas for quality control and licensing, the current facility is approx 21,000 sq ft and the company intends to add blending equipment and packaging lines, in addition to their manufacturing areas. Regarding R & D, the company is planning to create and operate a full and complete laboratory facility internally. The new facility will be 35,000 sq ft with the ability to expand the building and will be located within the Heartland Business Center, in Edgewood. The company has recently expanded in to the over seas market, which is rapidly growing and calls for a larger facility. The improvements required will be mainly internal renovations to departmentalize the various manufacturing and packaging locations. The company currently employs 17 full time workers and intends to increase the work force to 35 over the next three to five years.

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

We do not expect any environmental issue to address
III. EMPLOYMENT/SALES DATA

A. Employees

<table>
<thead>
<tr>
<th></th>
<th>Current</th>
<th>First year upon completion</th>
<th>Second year upon completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full time</td>
<td>17</td>
<td>27</td>
<td>35</td>
</tr>
<tr>
<td>Part time</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Seasonal</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>19</td>
<td>31</td>
<td>41</td>
</tr>
</tbody>
</table>

B. Payroll

<table>
<thead>
<tr>
<th></th>
<th>Current</th>
<th>First year upon completion</th>
<th>Second year upon completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>$800,000.00</td>
<td>$1,250,000.00</td>
<td>$1,900,000.00</td>
</tr>
</tbody>
</table>

C. Average Annual Wages

<table>
<thead>
<tr>
<th></th>
<th>Current</th>
<th>First year upon completion</th>
<th>Second year upon completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>$40,000.00</td>
<td>$42,000.00</td>
<td>$45,000.00</td>
</tr>
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</table>

D. Sales

<table>
<thead>
<tr>
<th></th>
<th>Current</th>
<th>First year upon completion</th>
<th>Second year upon completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>$5,500,000.00</td>
<td>$9,000,000.00</td>
<td>$15,000,000.00</td>
</tr>
</tbody>
</table>

IV. PROJECT CONSTRUCTION SCHEDULE

A. Key Dates (proposed)

1. Construction commencement
   
   January 2015

2. Construction completion
   
   May 2015

3. Building Occupancy
   
   June 2015

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

- [ ] Change of Zone
- [ ] Interior Alterations
- [ ] Special Use
- [ ] Building
- [ ] Variance
- [ ] Site plan
V. PROJECT COSTS/FINANCING

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

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Land</td>
<td>$3,500,000.00</td>
</tr>
<tr>
<td>2. Site Work</td>
<td></td>
</tr>
<tr>
<td>3. Building (new construction)</td>
<td></td>
</tr>
<tr>
<td>4. Building (rehabilitation)</td>
<td>$300,000.00</td>
</tr>
<tr>
<td>5. Engineering &amp; Architectural Fees</td>
<td>$25,000.00</td>
</tr>
<tr>
<td>6. Machinery &amp; Equipment</td>
<td>$400,000.00</td>
</tr>
<tr>
<td>7. Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL PROJECT COST** $4,225,000.00

B. Please provide the amount of sales tax exemptions that your project requires

$50,000.00

B1. If your project has a landlord/tenant arrangement, please provide the breakdown of the number above

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

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Tax Exempt IDB*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Taxable IDB*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Conventional Mortgage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(with IDA sale/leaseback)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Owner/User Self-Financing</td>
<td>$3,800,000.00</td>
<td></td>
</tr>
<tr>
<td>(with IDA sale/leaseback)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. JDA/SBA</td>
<td></td>
<td></td>
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<tr>
<td>6. Other loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Company/Owner Equity contribution</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL AMOUNT FINANCED** $3,800,000.00

D. Please estimate when the above amounts will be required

January 2015

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

Jahirul Islam (name of representative of entity submitting application or name of individual submitting application) deposes and says that s/he (choose and complete one of the following two options) (a) is a/the President (title) of AISH NATURE'S PRODUCTS INC. (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 Jahirul Islam
Title President

NOTARY
Sworn to before me this 3rd day of NOV, 2014

[Notary's Signature]

RIBBYN CHRISTIE
Notary Public - State of New York
NO. 01CH5062216
Qualified in Suffolk County
My Commission Expires 09/01/18
VI. CERTIFICATIONS

B. Fee Structure

1. Application Fee—$1,000
An application for IDA assistance must be accompanied by a non-refundable fee of $1,000 a $500 fee for the Town of Islip review of an 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 a fee of 6/10 of one per cent (60 basis points) 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.
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 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 counsel also prepares all documents related to IDA transactions and coordinates all activities leading up to closing. The Town of Islip IDA has designated 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 Town of Islip Industrial Development Agency Transactions.

Signature: 

[Signature]
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 that 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
**FOR TOWN OF ISLIP IDA OFFICE USE ONLY**

Project Summary

A. General
   Name of Project ________________________________

   Location of Project ______________________________

   Contact Person & Phone Number ________________________

B. Key Dates
   Application Submitted _____________________________
   Projected Inducement ______________________________
   Agenda Closing _________________________________

C. Project Type
   □ Industrial   □ Not-for-profit   □ Commercial
   □ Office       □ Housing         □ Other____________________

D. Project Size
   Acreage _______ New construction _______ Rehabed _________

   Total Project Cost ________________________________

E. Type of Assistance
   □ Sale Leaseback   □ Tax Exempt Bonds   □ Taxable Bonds

F. PILOT
   □ 485-b      □ Double 485-b     □ Affordable Housing
   □ Empire Zone □ Not-for-profit   □ Other____________________

G. Jobs/Payroll
   Retained Jobs _______ New Jobs _______

   Current Payroll _______ New Payroll _______

   Average Annual Wage __________________________

   New Average Annual Wage ______________________

H. Projected Agency Fee __________________________

I. Additional Notes
# SHORT ENVIRONMENTAL ASSESSMENT FORM

## PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. APPLICANT/SPONSOR</td>
<td>2. PROJECT NAME</td>
</tr>
<tr>
<td>A B H Nature's Product</td>
<td>A B H</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>3. PROJECT LOCATION:</td>
<td></td>
</tr>
<tr>
<td>Municipality: Edgewood</td>
<td>County: Suffolk</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)</td>
<td></td>
</tr>
<tr>
<td>131 Heartland Blvd</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>5. PROPOSED ACTION IS:</td>
<td></td>
</tr>
<tr>
<td>☐ New</td>
<td>☑ Expansion</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>6. DESCRIBE PROJECT BRIEFLY:</td>
<td></td>
</tr>
<tr>
<td>Purchase of a 35,000 sq ft building and to renovate</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>7. AMOUNT OF LAND AFFECTED:</td>
<td></td>
</tr>
<tr>
<td>Initially: 3 acres</td>
<td>Ultimately: 3 acres</td>
</tr>
<tr>
<td></td>
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<tr>
<td>8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS?</td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT?</td>
<td></td>
</tr>
<tr>
<td>☐ Residential</td>
<td>☑ Industrial</td>
</tr>
<tr>
<td>Describe:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?</td>
<td></td>
</tr>
<tr>
<td>☑ Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>Interior renovation</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td>11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL?</td>
<td></td>
</tr>
<tr>
<td>☑ Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>Islip Town Building Dept</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION?</td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>☑ No</td>
</tr>
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</tbody>
</table>

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: [Name]  
Signature: [Signature]  
Date: 11/03/14

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment
PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF.
   □ Yes  ☑ No

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency.
   □ Yes  ☑ No

C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)
   C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:
       NO
   C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:
       NO
   C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:
       NO
   C4. A community’s existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:
       No
   C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:
       NO
   C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:
       NO
   C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:
       NO

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)?
   □ Yes  ☑ No  If Yes, explain briefly:

E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
   □ Yes  ☑ No  If Yes, explain briefly:

PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

☐ Check this box if you have identified one or more potentially large or significant adverse impacts which MAY occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.
☑ 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 AND provide, on attachments as necessary, the reasons supporting this determination.

______________________________  ______________________________
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)