



# 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**

- 1. Company Name INVEGRO, LLC  
Current Address PO BOX 88, BROOKHAVEN, NY 11719
- 2. Company Officer certifying this application  
Name ROBERT GRONENTHAL  
Mailing Address PO BOX 88, BROOKHAVEN NY 11719  
Telep [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*  
ROBERT R. GRONENTHAL, MANAGING MEMBER  
PETER S. VESCOVO, JR. - MANAGING MEMBER
- 6. Principal Stockholders *Name*                                      *Title*  
N/A
- 7. Owner's Legal Counsel  
Name Fredrick J. Richman  
Firm Name Solomon Richman P.C.  
Address 3000 Marcus Avenue, Suite 1E5 - Lake Success, New York 11042  
Telep [Redacted] Fax [Redacted]  
Email [Redacted]
- 8. Bank References  
BANK OF AMERICA - WEST MAIN STREET, PATCHOGUE NY 11772
- 9. Major Trade References  
\_\_\_\_\_  
\_\_\_\_\_
- 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 ISLAND TECH SERVICES, LLC
Current Address 70 HORSEBLOCK RD, UNIT 8 YAPHANK NY 11980

2. Company Officer certifying this application
Name ROBERT GRONENTHAL
Mailing Address PO BOX 88, BROOKHAVEN NY 11719
Telep [redacted] Fax [redacted]
Email [redacted]

3. Business Type
[ ] Sole Proprietorship [ ] General Partnership
[ ] Limited Partnership [x] 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
ROBERT R GRONENTHAL - MANAGING MEMBER
PETER S VESCOVO, JR - MANAGING MEMBER

6. Principal Stockholders Name Title
N/A

7. User's Legal Counsel
Name Fredrick J. Richman
Firm Name Solomon Richman P.C.
Address 3000 Marcus Avenue, Suite 1E5 - Lake Success, New York 11042
Telephone [redacted] Fa [redacted]
Email [redacted]

8. Bank References
BANK OF AMERICA - W MAIN ST, PATCHOGUE NY 11772

9. Major Trade References
GE CAPITAL
SYNNEX CORP - GREENVILLE, SC

10. Nature of Business
(i.e. "manufacturer of \_\_\_ for \_\_\_ industry" or "warehouse distributor of \_\_\_" or "real estate holding company")
COMPUTER NETWORK AND SERVICING COMPANY

11. NAICS Code [redacted]

For help determining your NAICS code, please visit http://www.naics.com

## II. PROJECT DATA

### A. Location

1. Street Address 980 SOUTH 2ND STREET, RONKONKOMA NY 11779
2. Tax Map  

<u>500</u>	<u>105.00</u>	<u>03.00</u>	<u>001.004</u>
District #	Section #	Block #	Lot #
3. Acreage 1.62
4. Municipal Jurisdictions  
Town ISLIP  
Village N/A  
School District \_\_\_\_\_

### 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 10000 Square Feet
- Purchase of New Machinery & Equipment
- Other (specify) \_\_\_\_\_

### 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:

### E. Present Owner

1. Who is the current legal owner of the site? ROCHEM INTERNATIONAL
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

Island Tech Services is a computer network and service company that provides hardware, technical support, help desk services to various municipal and commercial customers throughout the northeast region. Additionally, our mobile data division outfits vehicle with computer terminals, mounting systems and connectivity for towns, law enforcement, fire service, utility and ambulance companies. We currently operate out of Yaphank, NY in a 3300 sq foot facility that we have outgrown and have needs for warehousing and additional office space.

The new facility is currently built and operating with the 5000 square feet of office and 5000 square feet of warehouse space needed to allow for Island Tech Services to continue to grow and add jobs. Our current facility will not allow us to add any new positions. This new facility will also allow our company to work on vehicles inside the building which we currently do not offer as our existing facility is just office space.

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

There will be no environmental impact as we will not be manufacturing any products or disposing of any chemicals.



**III. EMPLOYMENT/SALES DATA**

A. Employees		First year upon completion	Second year upon completion
Current			
Full time	17 (NY)	20 (NY)	25 (NY)
Part time			
Seasonal			
Total	17	20	25
B. Payroll		First year upon completion	Second year upon completion
Current			
Total \$	1,300,000	1,400,000	1,500,000
C. Average Annual Wages		First year upon completion	Second year upon completion
Current			
Total \$	60,000	65,000	70,000
D. Sales		First year upon completion	Second year upon completion
Current			
Total \$	8,200,000	10,100,000	12,000,000

**IV. PROJECT CONSTRUCTION SCHEDULE**

**A. Key Dates (proposed)**

Month & Year

1. Construction commencement \_\_\_\_\_
2. Construction completion \_\_\_\_\_
3. Building Occupancy November 2014

**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	\$ 1,260,000
2. Site Work	_____
3. Building (new construction)	_____
4. Building (rehabilitation)	140,000
5. Engineering & Architectural Fees	50,000
6. Machinery & Equipment	50,000
7. Other (specify)	_____
<hr/>	
<b>TOTAL PROJECT COST</b>	<b>1,500,000.00</b>

**B. 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)	600,000	20 Year Term
4. Owner/User Self-Financing (with IDA sale/leaseback)	150,000	
5. JDA/SBA	750,000	20 Year Term
6. Other loans	_____	
7. Company/Owner Equity contribution	_____	
<b>TOTAL AMOUNT FINANCED</b>	<b>\$ 1,350,000</b>	

**C. Please estimate when the above amounts will be required**

October 2014 \_\_\_\_\_  
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

Robert Gronenthal (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 Managing Member (title) of Invesgro and Island Tech Services, 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.

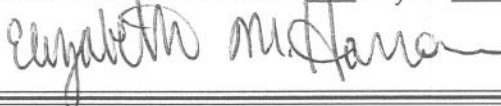
As (a) the representative of said entity, or (b) the individual applicant (such entity or individual applicant hereinafter referred to as the "Applicant"), deponent acknowledges and agrees that the Applicant shall be and is responsible for all costs incurred by the Town of Islip Industrial Development 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 Robert Gronenthal
Title Managing Member

NOTARY

Sworn to before me this 2nd day of July, 2014



ELIZABETH M. HARROW
Notary Public- State of New York
No. 01HA6210370
Qualified in Suffolk County
My Commission Expires August 17, 2017

## 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**

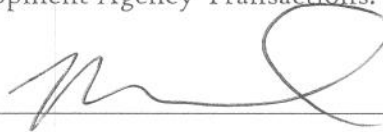
An Annual Administrative Fee of \$1,000 will be charged to all projects to cover the cost of all reporting and monitoring of the transaction. This fee is subject to periodic review and may be adjusted at the discretion of the Agency.

**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 \_\_\_\_\_

A handwritten signature in black ink, consisting of a stylized, cursive 'M' followed by a large loop and a horizontal line extending to the right.

## 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

**\*\*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**



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)
  - Robert Gronenthal
  - Peter S. Vescovo, Jr
  - Day No [REDACTED]
  - Evening No [REDACTED]
  - E-mail address (optional) [REDACTED]
- 2. Mailing address of owner(s)
  - PO Box 88, Brookhaven NY 11719

- 3. Location of property (see instructions)
  - 980 South Second Street
  - Street address
  - Ronkonkoma
  - City/Town
  - Village (if any)
  - Connetquot
  - School district

Property identification (see tax bill or assessment roll)

Tax map number or section/block/lot 500 - 105.00 - 03.00 - 001.004

- 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):
  - c. Type of construction: Masonry Block
  - d. Square footage: 10,668
  - e. Total cost:
  - f. Date construction, alteration, installation or improvement was 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:



5. Use of Property.

- a. Describe the primary use of the property and the type of business to be conducted. computer network service and installation
- b. Describe any other use or uses of the property. \_\_\_\_\_
- 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.

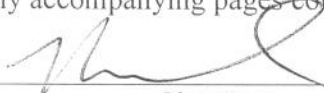
- a. Is the property receiving or has it ever received any other exemption from real property taxation?  Yes  No
- b. If yes, what exemption was received? \_\_\_\_\_ When? \_\_\_\_\_

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, Robert Gronenthal, hereby certify that the information on this application and any accompanying pages constitutes a true statement of facts.



Signature

07/02/2014

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

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.

<b>Part 1 - Project and Sponsor Information</b>			
Island Tech Services, LLC			
Name of Action or Project: Island Tech Services			
Project Location (describe, and attach a location map): 980 South 2nd Street, Ronkonkoma NY 11779			
Brief Description of Proposed Action: Purchase of existing building. No changes to exterior of building or site.			
Name of Applicant or Sponsor: Invesgro, LLC		Telephone	[REDACTED]
		E-Mail	[REDACTED]
Address: PO Box 88			
City/PO: Brookhaven		State: NY	Zip Code: 11719
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.			NO <input checked="" type="checkbox"/> YES <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:			NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		_____ 1.6 acres	
b. Total acreage to be physically disturbed?		_____ .8 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ 1.6 acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" 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	YES	N/A	
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A	
	<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	YES		
	<input type="checkbox"/>	<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	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	b. Are public transportation service(s) available at or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES		
<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	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
10. Will the proposed action connect to an existing public/private water supply?  If No, describe method for providing potable water: _____ _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
11. Will the proposed action connect to existing wastewater utilities?  If No, describe method for providing wastewater treatment: _____ _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	<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? 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: _____ _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	<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 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	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
16. Is the project site located in the 100 year flood plain?	NO	YES		
	<input checked="" type="checkbox"/>	<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  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 _____ _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

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"/>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor name: <u>Robert Gronenthal</u>		Date: <u>7/2/14</u>
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:	<input type="checkbox"/>	<input type="checkbox"/>
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.
_____	_____
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)

**PRINT**