



Project Summary

SEKO Logistics
(Distribution Support Systems, Inc.)
3101-15-06A

The Project: Distribution Support Systems, Inc., is asking the agency to enter into a straight lease transaction for a project consisting of the acquisition of a 105,000 square foot building and improvements to the facility in the Town of Clay. The total project cost is estimated to be \$3,209,000 and includes \$2,517,500 for building acquisition, \$482,500 for building and land improvements, and \$150,000 for machinery.

The Agency benefits requested include exemption from sales and use tax (\$40,000), the mortgage recording tax (\$30,000), and a property tax abatement.

Employment: The project expects to create 5 new jobs and retain its existing employment.

Zoning: Industrial

PILOT Agreement: The project beneficiary is a value added warehousing facility that primarily serves a client base outside the county, therefore the project qualifies for a PILOT agreement.

Environmental Review: The Board may make its SEQR finding at the May Board Meeting

Agency Fee: The Agency fee is calculated at .01 of the project cost. If the project cost is \$3,209,000 the Agency fee will be \$32,000.

Onondaga County Industrial Development Agency Application

I. Applicant Data

A. Contact Information

Company Name:	Distribution Support Systems, Inc.			
Mailing Address:	6454 East Taft Road			
City:	East Syracuse	State:	New York	Zip: 13057
Phone:	3154529593	Fax:	3154521560	
Contact Person:	James W. Duffy			
Email Address:	jamesw.duffy@sekologistics.com			
Industry Sector:	Transportation / Logistics / Supply Chain Management			

B. Will the Applicant be the Project Beneficiary (i.e. project tenant/company)

☒ Yes ☐ No

C. Principal Stakeholders

List principal owners/officers/directors owning 5% or more in equity holdings with percentage ownership. Public companies should list corporate officers.

Name	% Ownership	Business Address	Phone	Email
James W. Duffy	100 %	6454 East Taft Road East Syracuse, NY 13057	3154529593	jamesw.duffy@sekologistics.com

D. Corporate Structure: Attach a schematic if Applicant is a subsidiary or otherwise affiliated with another entity.

☐ Corporation

☒ Private

☐ Public

Date and Location of
Incorporation/Organization

1987 / Syracuse, NY

☐ Partnership

☐ General

☐ Limited

If a foreign corporation, is the
Applicant authorized to do
business in the State of New
York?

☐ Not For Profit

☐ Sole Proprietorship

☐ Limited Liability Company/Partnership

E. Applicant's Counsel

Name:	Gerals Stack		
Firm:	Hiscock & Barclay		
Mailing Address:	One Park Place / 300 South State Street		
City:	Syracuse	State:	New York
		Zip:	13202
Phone:	3154252700	Fax:	3154252701
Email Address:	gstack@hblaw.com		

F. Applicant's Accountant

Name:	Richard Beauchine		
Firm:	Cuddy and Ward, LLP		
Mailing Address:	110 Genesee Street / Suite 230		
City:	Auburn	State:	New York
		Zip:	13021
Phone:	3152538424	Fax:	3152538458
Email Address:	RBeauchine@cuddyandwardcpa.com		

G. Has the Project Beneficiary received assistance from OCIDA, New York State or the Onondaga Civic Development Corporation in the past If yes, please give year, project name, description of benefits, and address of project.

☐ Yes

☒ No

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II. Project Information

A. Location

Address:	4616 Crossroads Park		
City:	Liverpool	Village/Town:	Salina
Zip Code:	13088	School District(s):	Liverpool
Tax Map Parcel ID(s):			
Current Assessed Value:		Square Footage of Existing Building:	Approx. 105,000 sq.ft

B. Type (Check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Purchase of machinery and/or equipment |
| <input checked="" type="checkbox"/> Expansion/Addition to Current Facility | <input type="checkbox"/> Brownfield/Remediated Brownfield |
| <input checked="" type="checkbox"/> Renovation of Existing Facility | <input type="checkbox"/> LEED Certification |
| <input type="checkbox"/> Acquisition of Existing facility/property | <input type="checkbox"/> Other <input type="text"/> |

C. Description of Project: Please explain your project in detail. This description should include an explanation of all activities which will occur due to this project, size of the project in square feet, current use of the site and use of the site upon completion of the project. Attach copies of any site plans, sketches or maps. (Attach additional sheets if necessary):

Exciting changes have been happening at SEKO Logistics' Syracuse Location as we are continuing to bring Business Growth to the area. We are looking to expand our current operations into this larger facility, because we have out-grown our current facility and are at the point of needing to physically expand.

Our current warehouse and transportation terminal are modest with approximately 12,000 square feet with 15 foot high ceilings in our warehouse as well as some office space and a small truck yard. Within the past couple of years, we've hired four full-time professional-level employees, including a full-time Sales Representative. We've doubled our driving workforce and fleet as well.

In Syracuse, our business plan will soon include growing our local warehousing capabilities and our office space must accommodate our growing workforce. The new facility will allow us to occupy a space much more suitable to accomodate both our current and growing customers' needs. Please refer to the attached documents and plans for added detail regarding this description / explanation of the new facility.

D. Is the Project Beneficiary the owner of the property?

- ☒ Yes ☐ No

If not, by what means will the site be acquired? If leasing, when does the lease end?

E. Infrastructure: Please indicate whether the following are onsite, need to be constructed, or need to be renovated/expanded:

Water

Onsite

Electric

Onsite

Sanitary/Storm Sewer

Onsite

Private Roads

Onsite

Gas

Onsite

Telecommunication

Onsite

F. Zoning Classification: Please list current and proposed zoning:

Current Zoning

Industrial

Proposed Zoning

Industrial

G. Are variances needed to complete the project?

☐ Yes

☒ No

If yes, please describe nature of variances and if municipal approvals have been granted:

H. What will be the primary use of the project upon completion?

Warehousing and related office space

I. Will the project generate sales tax for the community?

☐ Yes

☒ No

If yes, what is the company's average annual sales or estimated annual sales?

J. Has the project beneficiary sought sites or facilities outside Onondaga County for this project?

☒ Yes

☐ No

K. 1. Will any other companies or related facilities within the state close or be subjected to reduced activity as a result of this project? If so please list the town and county of the location(s):

☐ Yes

☒ No

2. Will the completion of the project result in the removal of a plant or facility of the project occupant from one area of the State of New York to another area of the State of New York?

☐ Yes

☒ No

3. Will the completion of the project result in the abandonment of one or more plants or facilities of the project beneficiary located in the State of New York?

☐ Yes

☒ No

i. If any answer to questions 2 or 3 above is yes, is the project reasonably necessary to discourage the project beneficiary from removing such other plant or facility to a location outside the State of New York?

☐ Yes

☐ No

ii. If any answer to questions 2 or 3 above is yes, is the project reasonably necessary to preserve the competitive position of the project applicant in its respective industry?

☐ Yes

☐ No

4. Will the project primarily consist of recreation, medical, or retail facilities?

☐ Yes

☒ No

i. If yes, will the cost of these facilities exceed one-third of the total project cost?

☐ Yes

☐ No

L. For the Agency to consider this project, please provide the following information:

1. Does the project consist of new construction or expansion or substantial renovation of an existing facility?

☒ Yes ☐ No

2. Will the project create new employment opportunities or retain existing jobs that may otherwise be lost?

☒ Yes ☐ No

3. Does the project beneficiary serve a customer base primarily outside of Onondaga County?

☐ Yes ☒ No

4. Please estimate the approximate savings to be realized by Agency participation and the need for such savings:

Mortgage Tax - \$30,000 and Sales Tax on Renovations - \$40,000

5. Please describe the need for Agency participation and the associated savings

The resulting savings will be used to underwrite the project.

6. Please describe any compelling circumstances the Agency should be aware of while reviewing this application:

n/a

M. Environmental Information

1. The Agency must make a determination of environmental significance for the project. Have any environmental issues been identified on the property?

☐ Yes ☒ No

If yes, please explain:

*** Please note a full Environmental Assessment Form (EAF) MUST be completed and submitted along with this application.**

2. Has the Town/Village or any public body issued a SEQR determination for this project?

☐ Yes ☒ No

N. Construction

1. Project Timeline (approximate):

Construction Commencement planned May 2015

Construction Completion planned August 2015

Date of Occupancy planned August 2015

2. Please list any other key project milestones:

Anticipated purchase of facility in May 2015; planned beginning of construction in May 2015.

III. Project Costs and Financing

A. Estimated Project Costs:

Land	\$132,500
Building Construction/Renovation	\$350,000
Site Work	
Engineering	
Financial Charges	\$35,000
Legal Fees	\$24,000
Machinery and Equipment	\$150,000
Other	Building Cost: \$2,517,500
Total Investment	\$3,209,000

B. Total amount of the project being privately financed:

\$649,000 est

C. Estimated mortgage amount:

\$2,560,000 est

D. Company's average yearly purchases or anticipated yearly purchases from vendors within Onondaga County or Central New York:

\$700,000 est

E. Estimated capital investment over the next 5 years, beyond this project, if available:

\$375,000 est

F. Financial Assistance sought (estimated values):

Companies requesting a sales tax exemption from OCIDA must provide the value of the sales tax savings they anticipate receiving. **Please ensure that you provide a realistic estimate. New NYS regulations require OCIDA to recapture any benefit that exceeds the amount listed in a company's application.**

<input checked="" type="checkbox"/>	Real Property Tax Abatement (PILOT)	\$100,000 est
<input checked="" type="checkbox"/>	Mortgage Tax Exemption	\$30,000 est
<input checked="" type="checkbox"/>	Sales and Use Tax Exemption	\$40,000
<input type="checkbox"/>	Tax Exempt Bond Financing	
<input type="checkbox"/>	Taxable Bond Financing	

IV. Employment and Payroll Information

A. Are there people currently employed at the project site?

☐ Yes

☒ No

If yes, provide number of full time equivalent (FTE) jobs at the facility:

If yes, what is the average annual salary range?

B. Estimate the number of full time equivalent (FTE) jobs to be retained as a result of this project:

n/a

C. Estimate the number of full time equivalent (FTE) jobs to be added as a result of this project:

4 est

D. Estimate the number of construction jobs to be created by this project:

5 est

E. Estimate the average length of construction jobs to be created (months):

4 est

F. Planned average hourly wage for new FTE non-management jobs:

\$15.50 est

G. Estimated average salary for new management FTE jobs:

\$31,000 annually
est

H. Current annual payroll at Onondaga County facility:

\$970,358

I. Average annual growth rate of wages:

8% est

J. Please list, if any, benefits that will be available to either full and/or part time employees:

Individual Health Care and 401(k) Retirement

K. Average annual benefit paid by the company (\$ or % salary) per FTE job to be created:

15% est

L. Average growth rate of benefit cost:

3% est

M. Amount or percent of wage employees pay for benefits:

0 est

*** Full Time Equivalent (FTE) is defined as one employee working no less than 35 hours per week or two or more employees together working a total of 35 hours per week.**

V. REPRESENTATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

A. Jobs Listings: In accordance with Section 858-b(2) of the New York General Municipal Law, the Applicant understands and agrees that if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, new employment opportunities created as a result of the Project will be listed with the New York State Department of Labor Community Services Division (the "DOL") and with the administrative entity of the service delivery area created by the Workforce Investment Act of 1998 (the "WIA") in which the Project is located.

Initial JD

B. First Consideration for Employment: In accordance with Section 858-b (2) of the New York Municipal Law, the Applicant understands and agrees that if the Project receives any Financial Assistance from the Agency, except as otherwise provided by collective bargaining agreements, where practicable, the Applicant will first consider persons eligible to participate in WIA programs who shall be referred by the WIA Entities for new employment opportunities created as a result of the Project.

Initial JD

C. Annual Sales Tax Filings: In accordance with Section 874(8) of the New York General Municipal Law, the Applicant understands and agrees that if the Project receives any sales tax exemptions as part of the Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the New York State Department of Taxation and Finance, the annual form prescribed by the Department of Taxation and Finance, describing the value of all sales tax exemptions claimed by the Applicant and all consultants or subcontractors retained by the Applicant.

Initial JD

D. Annual Employment Reports and Outstanding Bonds: The Applicant understands and agrees that if the Project receives any Financial Assistance from the Agency, the Applicant agrees to file, or cause to be filed, with the Agency on an annual basis, reports regarding the number of FTE at this project site. The Applicant also understands and agrees to provide on an annual basis any information regarding bonds, if any, issued by the Agency for the project that is requested by the Comptroller of the State of New York.

Initial JD

E. Absence of Conflicts of Interest: The Applicant has received from the Agency a list of the members, officers and employees of the Agency. No member, officer or employee of the Agency has an interest, whether direct or indirect in any transaction contemplated by this Application, except as hereinafter described in Appendix B.

Initial JD

F. Local Access Policy: The Applicant understands and agrees that local labor and contractors must be used for the construction of the Project, as stated in the Agency Local Access Policy located in Appendix C.

Initial JD

G. Fees: This application should be submitted with a non-refundable \$1000 application fee to the Onondaga County Industrial Development Agency and a \$2,500 legal deposit made out to Gilberti Stinziano Heintz & Smith, P.C.

Initial JD

The Agency will collect an administrative fee and all remaining legal fees based on the Fee Schedule below:

Agency Fees:

- ♦ Fee for manufacturing projects under \$10 million - .0075 of the project cost
- ♦ Fee for all agency projects except those with PILOT agreements - .01 of the project cost
- ♦ Additional Fee for PILOT Agreement Projects - .0025 of bond amount or project cost
- ♦ Fee for bond refinancing & refunding - .0025 of refinancing or refunding amount.

Legal Fees:

- ♦ Fee for first \$20 million - .0025 of project cost
- ♦ Fee for anything above \$20 million - .00125 of project cost

H. Payment terms:

- Application fee: Payable at the time of application
 - Legal deposit: Payable at the time of application
 - Agency fee for Bond Projects: Payable at Closing
 - Agency and Legal Fees for all other projects: Due and payable at Inducement
- * A sales tax certificate will generally not be issued until the Agency Fee is paid in full

Initial JD

I. Recapture of Tax Abatements/Exemptions:

Recapture of Benefits. It is the policy of the Agency to recapture the value of Payment in lieu of taxes, State and County Sales Tax and Mortgage Recording Tax Exemptions in accordance with the provisions contained herein and the Laws of the State of New York. Before receiving benefits, projects of the Agency must attest in writing to their understanding of and agreement to the Recapture Provisions of the Agency Uniform Tax Exemption Policy. The recapture provision contained herein may be modified from time to time by the Board at its sole discretion.

Recapture of a PILOT, Sales Tax and the Mortgage Recording Tax Exemptions. In the event the facility is sold or closed, or the number of jobs is reduced below 75% of the number employed or projected to be employed at time of application to the Agency and no substantial future economic benefit is likely to accrue to the community, then the value of the Property Tax, Sales tax and the Mortgage Recording Tax benefits extended to the project by the Agency shall be subject to recapture.

Recapture Payment. The Recapture payment paid by the Project to the Agency shall be determined (1) by the difference between any PILOT payments made by the Project and the property taxes that would be paid by the Project, if the property were not in the ownership or control of the Agency, (2) the value of any Mortgage Recording Tax Exemption, if awarded to the Project and (3) the amount of sales tax that would have been paid if an exemption was not granted.

Recapture of the PILOT, Sales Tax or Mortgage Recording Tax: The Recapture Schedule for a Payment in Lieu of Taxes Agreement, Sales Tax or the Mortgage Recording Tax is as follows:

Within two (2) years of Certificate of Occupancy	100%
Within three (3) years:	80%
Within four (4) years:	60%
Within five (5) years:	40%
Within six (6) years:	30%
Within seven (7) years:	20%
Within eight (8) years:	10%
Eight years or more:	0%

Distribution of the Recapture Payment. Any funds recaptured as the result of an Agreement with the Agency shall be distributed to the affected taxing jurisdictions in the same proportion as if the payments were paid or owed by the Project on the date of recapture.

Additional Conditions for the Recapture of Sales and Use Tax. As of April 1, 2013, New York State law requires Industrial Development Agencies to recapture sales tax benefits where:

- ♦ A Project is not entitled to receive the benefits
- ♦ Exemptions received exceed the amount authorized by the Agency
- ♦ Exemptions are claimed by the Project for unauthorized property or services
- ♦ A Project fails to use property in the manner required by its IDA agreements

I have read the foregoing and agree to comply with all the terms and conditions contained therein as well as policies of the Onondaga County Industrial Agency.

Name of Applicant Company

Distribution Support Systems, Inc.

Signature of Officer or Authorized Representative

Name & Title of Officer or Authorized Representative

James W. Duffy, Owner

Date

April 17, 2015

The Applicant and the individual executing this Application on behalf of the Applicant acknowledge that the Agency will rely on the representations made herein when acting on this Application and hereby represent that the statements made herein do not contain any untrue statement of a material fact and do not omit to state a material fact necessary to make the statements contained herein misleading.

- ☒ I have read paragraph 6 in the instructions and understand that the applicant must identify in writing to OCIDA any information it deems proprietary and requests not be made publicly available.
- ☒ Please check here if you have marked information as confidential/proprietary

Name of Applicant Company

Distribution Support Systems, Inc.

Signature of Officer or Authorized Representative

James W. Duffy

Name & Title of Officer or Authorized Representative

James W. Duffy, Owner

Date

April 17, 2015

VI. Hold Harmless Agreement

Applicant hereby releases Onondaga County Industrial Development Agency and the members, officers, servants, agents and employees thereof (the "Agency") from, agrees that the Agency shall not be liable for, and agrees to indemnify, defend and hold the Agency harmless from and against any and all liability arising from or expense incurred by: (A) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether or not the Application or the Project described therein or the tax-exemptions and other assistance requested therein are favorably acted upon by the Agency, (B) the Agency's acquisition, construction, and/or installation of the Project described therein and (C) any further action taken by the Agency with respect to the Project, including without limiting the generality of the foregoing, all cause of action and attorney's fees and any other expenses incurred in defending any suits or action which may arise as a result of any of the foregoing. If, for any reason, the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable or specified period of time, to take reasonable, proper or requested action, or withdraws, abandons, cancels or neglects the Application, or if the Agency or the Applicant are unable to reach final agreement with respect to the Project, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all costs incurred by the Agency in the process of the Application, including attorney's fees, if any.

Name of Applicant Company

Distribution Support Ssystems, Inc.

Signature of Officer or Authorized Representative

James W. Duffy

Name & Title of Officer or Authorized Representative

James W. Duffy, Owner

Date

April 17, 2015

Onondaga County Industrial Development Agency Application
Appendix A
Employment Plan
Part 1

Company Name:	Distribution Support Systems, Inc.			
Mailing Address:	6454 East Taft Road			
City:	East Syracuse	State:	New York	Zip: 13057
Phone:	3154529593	Fax:	3154521560	
Contact Person:	James W. Duffy			
Email Address:	jamew.duffy@sekologistics.com			
Type of Business:	Transportation / Supply Chain Management			

Please complete the following chart describing your projected employment plan following receipt of financing:

Current and Planned Full Time Occupations in Company	Current Number Full Time Jobs Per Occupation	Estimated Number of Full Time Jobs After Completion of the Project		
		1 Year	2 Year	3 Year
Transportation Manager and Professional Staff	5	6	6	7
Licensed Customs Broker and Professional Staff	5	5	6	6
Warehouse Manager and Hourly Staff	0	4	10	15
Professional Drivers	2	2	3	4
Professional Sales Force	2	2	3	3

Are the employees of your firm currently covered by a collective bargaining agreement?

☐ Yes

☒ No

If yes, Name and Local:

Indicate whether the labor pool in Onondaga County is adequate to fill new jobs:

☒ Yes

☐ No

Under current Industrial Development Agency (IDA) law, an IDA must consider such things as job retention when approving projects.

Name of Applicant Company

Distribution Support Systems, Inc.

Signature of Officer or Authorized Representative



Name & Title of Officer or Authorized Representative

James W. Duffy, Owner

Date

April 17, 2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION
APPENDIX A
EMPLOYMENT PLAN
PART 2

(Enter Company Name in three (3) places below and sign by an authorized company officer)

In consideration of the benefits provided by the Onondaga County Industrial Development Agency, Distribution Support Systems, Inc. project beneficiary, agrees to cause any new employment opportunities created in connection with industrial or commercial projects financed by the proceeds of such obligations to be listed with the New York State Department of Labor Community Services Division (DOL) and with the CNY Works.

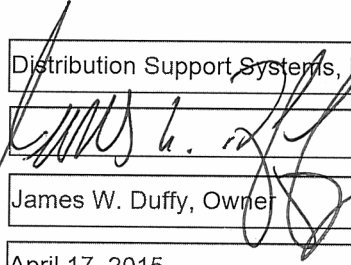
Distribution Support Systems, Inc., project beneficiary, also agrees to report to the Onondaga County Industrial Development Agency on or before March 1 of each year on the status employment opportunities filed with DOL, including the number of new employment opportunities created, the number listed and the number filled for the year ending the prior December 31.

Distribution Support Systems, Inc., project beneficiary, further agrees that, to the extent practical and feasible, and subject to the requirements of any existing collective bargaining agreement, shall fill at least ten percent of new employment opportunities with persons eligible for service under the Workforce Investment Act.

Name of Applicant Company

Distribution Support Systems, Inc.

Signature of Officer or Authorized Representative



Name & Title of Officer or Authorized Representative

James W. Duffy, Owner

Date

April 17, 2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION
APPENDIX B
CONFLICT OF INTEREST STATEMENT

Agency Board Members

1. Dan Queri
2. Steve Morgan
3. Victor Ianno
4. Lisa Dell
5. Patrick Hogan
6. Janice Herzog
7. Jessica Crawford

Agency Officers/Staff

1. Julie Cerio
2. Honora Spillane
3. Chris Cox
4. Karen Doster
5. Steven Coker

Agency Legal Counsel & Auditor

1. Anthony Rivizzigno, Esq., Gilberti Stinziano Heintz & Smith, P.C.
2. The Bonadio Group

The Applicant has received from the Agency a list of members, officers and staff of the Agency. To the best of my knowledge, no member, officer or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this Application, except as hereinafter described:

Signature:

James W. Duffy

Authorized Representative:

Title:

Owner

Date:

April 17, 2015

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION
APPENDIX C

Local Access Policy Agreement

In absence of a waiver permitting otherwise, every project seeking the assistance of the Onondaga County Industrial Development Agency (Agency) must use local general contractors, sub-contractors, and labor for one-hundred percent (100%) of the construction of new, expanded, or renovated facilities. The project's construction or project manager need not be a local company. All projects of the Agency will be subject to monitoring by the Agency. **Noncompliance may result in the revoking and/or recapture of all benefits extended to the project by the Agency. Local Labor is defined as laborers permanently residing in the State of New York counties of Cayuga, Cortland, Herkimer, Jefferson, Madison, Oneida, Onondaga, Oswego, Tompkins and Wayne. Local (General/Sub) Contractor** is defined as a contractor operating a permanent office in the State of New York counties of Cayuga, Cortland, Herkimer, Jefferson, Madison, Oneida, Onondaga, Oswego, Tompkins and Wayne. The Agency may determine on a case-by-case basis to waive the local access policy for a project or for a portion of a project where consideration of warranty issues, necessity of specialized skills, significant cost differentials between local and non-local services or other compelling circumstances exist.

In consideration of the extension of financial assistance by the Agency Distribution Support Systems, Inc.

(the Company) understands the Local Access Policy and agrees to complete Appendix C of the Agency application at the time of the application to the the Agency and as part of a request to extend the valid date of the Agency's tax-

exempt certificate for the Distribution Support Systems, Inc. project. The Company understands an Agency tax-

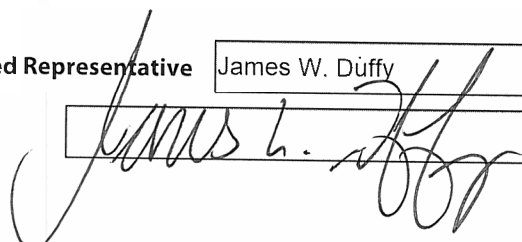
exempt certificate is valid for 90 days effective the date of the project inducement and extended for 90 day periods thereafter upon request by the Company. The Company further understands any request for a waiver to this policy must be submitted in writing and approved by the Agency before a tax-exempt certificate is issued or extended.

I agree to the conditions of this agreement and certify all information provided regarding the construction and employment activities for the project as of April 17, 2015 (date).

Company	pending	General Contractor	pending
Representative for Contract Bids/Awards	pending	Contact	pending
Address			
City:		City:	
State:	NY	State:	NY
Zip:		Zip:	
Phone		Phone	
Fax		Fax	
Email			
Project Address			
City		City	
ST	AL	ST	AL
Zip		Zip	

Authorized Representative James W. Duffy **Title** Owner

Signature



<u>Item</u>	<u>Contract (Sub)</u>	<u>Address</u>	<u>Email</u>	<u>Phone</u>	<u>Amount</u>
Site work/ Demolition	pending				
Foundation & Footings	"				
Building	"				
Masonry	"				
Metals	"				
Wood/Casework	"				
Thermal/ Moisture proof	"				
Doors, windows, glazing	"				
Finishes	"				
Electrical	"				
HVAC	"				
Plumbing	"				
Specialities	"				
Machinery & Equipment	"				
Furniture & Fixtures	"				
Utilities	"				
Paving	"				
Landscaping	"				

ONONDAGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY APPLICATION

Application Attachments Listing

- ♦ Corporate schematic, if a subsidiary
- ♦ Description of project, Site Plans/Sketches, and Map
- ♦ NYS Full Environmental Assessment Form
- ♦ A check payable to the Agency in the amount of \$1000
- ♦ A check payable to Gilberti Stinziano Heintz & Smith, P.C. in the amount of \$2,500

Short Environmental Assessment Form

Part 1 - Project Information

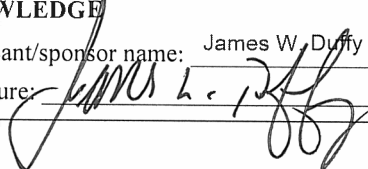
Instructions for Completing

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.

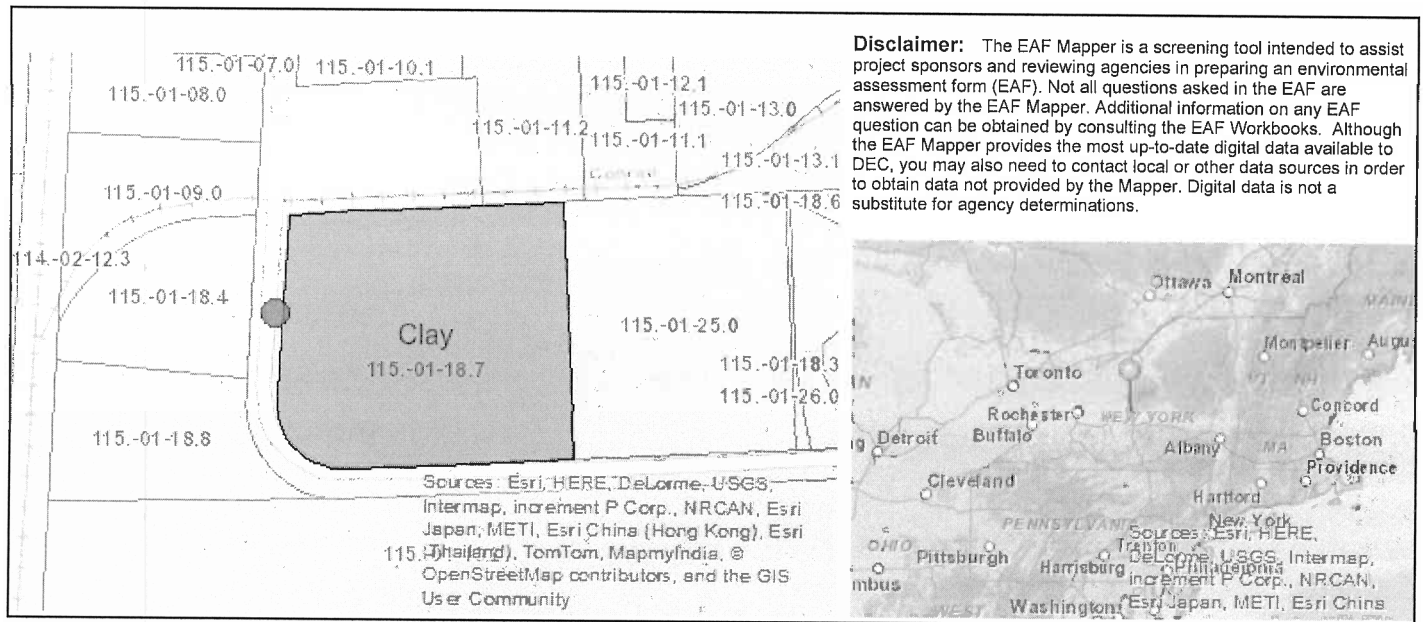
Part 1 - Project and Sponsor Information							
Name of Action or Project: Distribution Support Systems, Inc. Expansion							
Project Location (describe, and attach a location map): 4616 Cross Roads Parkway / Liverpool, NY 13088: description materials attached; existing warehouse							
Brief Description of Proposed Action: In Syracuse, our business plan will soon include growing our local warehousing capabilities and our office space must accommodate our growing workforce. The new facility will allow us to occupy a space much more suitable to accomadate both our current and growing customers' needs. Please refer to the attached documents and plans for added detail regarding this description / explanation of the new facility.							
Name of Applicant or Sponsor: Distribution Support Systems, Inc. / James W. Duffy, Owner		Telephone: 315-452-9593					
		E-Mail: jamesw.duffy@sekologistics.com					
Address: 6454 East Taft Road							
City/PO: East Syracuse		State: NY	Zip Code: 13057				
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%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><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%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><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?		4.58 acres					
b. Total acreage to be physically disturbed?		4.58 acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		4.58 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 checked="" 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 <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	YES <input 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	YES <input checked="" 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 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 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 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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	

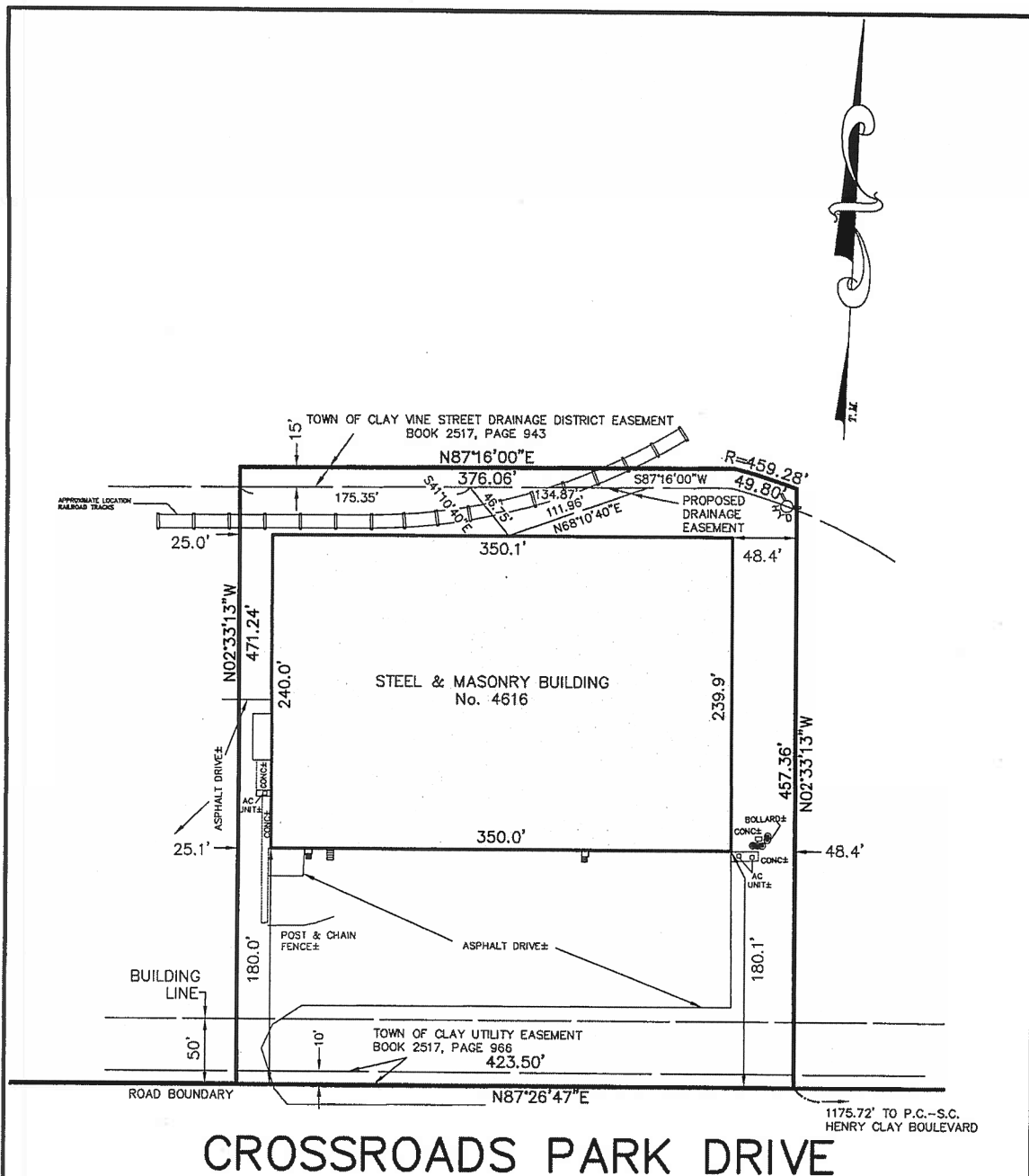
18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site 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 type="checkbox"/>	<input checked="" type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: James W. Duffy Signature:  Date: April 17, 2015		

EAF Mapper Summary Report

Thursday, April 16, 2015 4:37 PM



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National Register of Historic Places]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	Yes



CROSSROADS PARK DRIVE

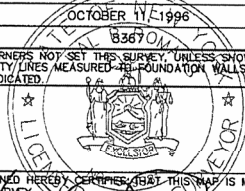
Subject to any statement of facts an accurate and up to date abstract of title will show.

Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-division 2, of the New York State Education Law.

\\Server\Land Projects\CROSSROADS PARK\dwg\LOT 7A.dwg

RECERTIFIED: MARCH 22, 2013; REF. 3515.001

RECERTIFIED: DECEMBER 19, 2003; REF. 581.017

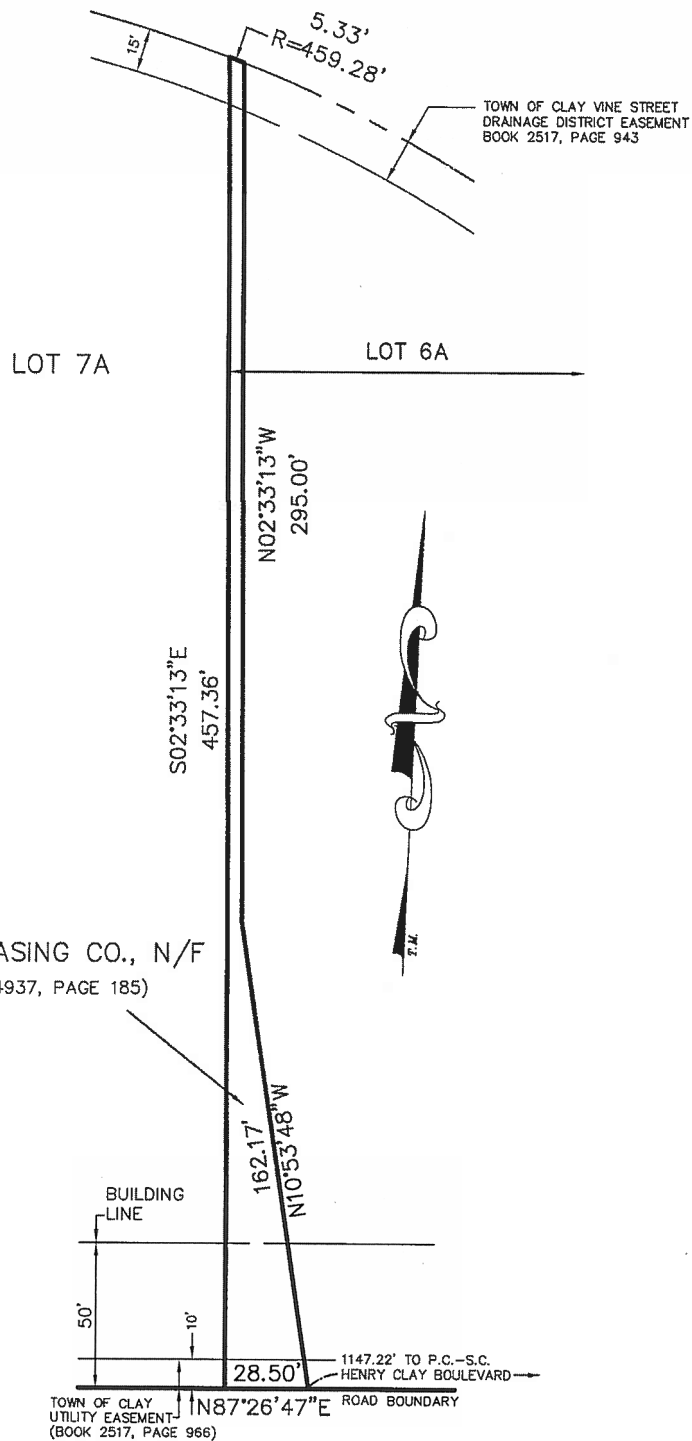
TRACT MAP	
BY:	ALFRED N. IANUZI, JR.
DATE FILED:	OCTOBER 11, 1996
MAP NO.	8367
PROPERTY CORNERS NOT SET THIS SURVEY, UNLESS SHOWN. OFFSETS FROM PROPERTY LINES MEASURED TO FOUNDATION WALLS, UNLESS OTHERWISE INDICATED.	
TO:	
	
THE UNDERSIGNED HEREBY CERTIFIES THAT THIS MAP IS MADE FROM AN ACTUAL SURVEY.	
N.Y.S. LICENSED LAND SURVEYOR	

LOT 7A
CROSSROADS PARK
 SECTION No. 2 - AMENDED
 PART OF LOT No. 88
 TOWN OF CLAY
 ONONDAGA COUNTY, NEW YORK



IANUZI & ROMANS
LAND SURVEYING, P.C.
 5251 WITZ DRIVE, NORTH SYRACUSE, NY. 13212
 PHONE: (315) 457-7200 FAX: (315) 457-9251

DATE: SEPTEMBER 24, 1996
SCALE: 1" = 100'
FILE: 1610.003 FB: 701

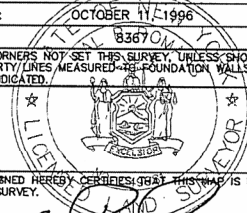



CROSSROADS PARK DRIVE

Subject to any statement of facts on accurate and up to date abstract of title will show.

Unauthorized alteration or addition to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-division 2, of the New York State Education Law.

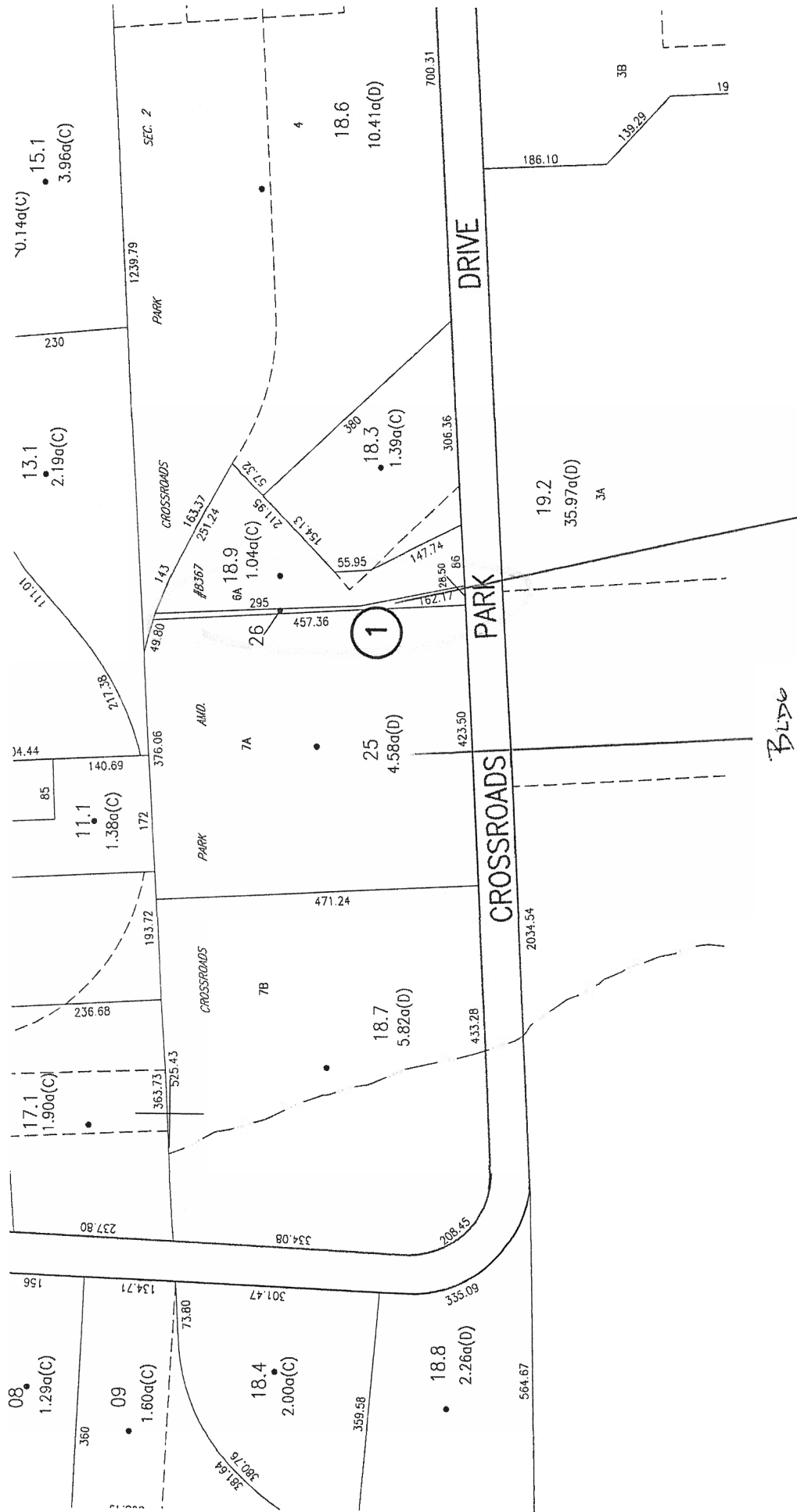
\\Server\Land Projects\CROSSROADS PARK\dwg\LOT 7A.dwg

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TO:	
	
THE UNDERSIGNED HEREBY CERTIFIES THAT THIS MAP IS MADE FROM AN ACTUAL SURVEY.	
	
N.Y.S. LICENSED LAND SURVEYOR	

PART OF LOT 6A
CROSSROADS PARK
 SECTION No. 2 - AMENDED
 PART OF LOT No. 88
 TOWN OF CLAY
 ONONDAGA COUNTY, NEW YORK

IANUZI & ROMANS
 LAND SURVEYING, P.C.
 5251 WITZ DRIVE, NORTH SYRACUSE, NY, 13212
 PHONE: (315) 457-7200 FAX: (315) 457-9251

DATE:	MARCH 22, 2013
SCALE:	1" = 50'
FILE:	3515.001
FB:	



ADDITIONAL PARCEL

Associated Architects of Syracuse 520 Oak Street, Syracuse, NY 13203 (315) 474-6400	Project: 4616 CROSSROADS PARK DRIVE LIVERPOOL, NEW YORK 13088 TOWN OF CLAY	
	Date: MARCH 20, 2015	Scale: 1/8" = 1'-0"
	Project Architect: [Signature]	

