



## CITY OF SYRACUSE INDUSTRIAL DEVELOPMENT AGENCY

### APPLICATION FOR BENEFITS

#### INSTRUCTIONS

1. The person completing this application on behalf of the company/applicant shall be a person who is either the CEO of the company/applicant or a person authorized to bind the company/applicant and each statement contained in this application shall be made by such a person. Fill in all blanks, using "none", "not applicable" or "not available" where the question is not appropriate to the Project, which is the subject of this Application (the "Project"). If you have any questions about the way to respond, please call the City of Syracuse Industrial Development Agency ("SIDA" or the "Agency") at (315) 448-8100.
2. In accordance with Section 224-a(8)(d) of Article 8 of the New York Labor Law, the Agency has identified that any "financial assistance" (within the meaning of Section 858 of the General Municipal Law) granted by the Agency to the Applicant consisting of sales and use tax exemption benefits, mortgage recording tax exemption benefits and real property tax exemption benefits, constitutes "public funds" within the meaning of Section 224-a(2)(b) of Article 8 of the New York Labor Law and such funds are not excluded under Section 224-a(3) of Article 8 of the New York Labor Law. The Agency hereby notifies the Applicant of the Applicant's obligations under Section 224-a (8)(a) of Article 8 of the New York Labor Law.
3. If an estimate is given as the answer to a question, put "(est.)" after the figure or answer, which is estimated.
4. If more space is needed to answer any specific question, attach a separate sheet.
5. When completed, return this application by mail or fax to the Agency at the address indicated below. A signed application may also be submitted electronically in PDF format to Eric Ennis at [EEnnis@syr.gov](mailto:EEnnis@syr.gov).

All projects approved for benefits by the SIDA Board will close with the Agency within 12-months of the inducement date. If this schedule cannot be met, the applicant will need to submit a closing schedule modification written request to the Executive Director that will be presented to SIDA Board for consideration.

**An application will not be considered by the Agency until the application fee has been received.**

7. The Agency will not give final approval for this Application until the Agency receives a completed NYS Environmental Assessment Form concerning the Project, which is the subject of this Application. The form is available at <http://www.dec.ny.gov/permits/6191.html>
8. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the SIDA (with certain limited exceptions) are open to public inspection and copying. If the Applicant feels that there are elements of the Project which are in the nature of trade secrets which, if disclosed to the public or otherwise widely disseminated, would cause substantial injury to the Applicant's competitive position, this Applicant must identify such elements in writing and request that such elements be kept confidential. In accordance with

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Article 6 of the Public Officers Law, the SIDA may also redact personal, private, and/or proprietary information from publicly disseminated documents.

9. The Applicant will be required to pay the Agency application fee and legal fee deposit upon submission. The Applicant is responsible for all administrative and legal fees as stated in Appendix A.
10. Prior to submission to the Agency for consideration, the application must be complete. A complete application consists of the execution, where applicable, and delivery of following 8 items:
  - This Application
  - Conflict of Interest Statement – Appendix B
  - Environmental Assessment Form – Appendix C
  - Verification – Appendix D
  - A Project description, including a feasibility statement indicating the need for the requested benefits
  - Provide site plans, sketches, and/or maps as necessary (see page 7 for more detail)
  - 10 year pro forma operating budget, including funding sources
  - A check payable to the Agency in the amount of \$1,000
  - A check payable to Bousquet Holstein PLLC in the amount of \$2,500

**It is the policy of the Agency that any Project receiving benefits from the Agency will utilize 100% local contractors and local labor for the construction period of the Project unless a waiver is granted in writing by the Agency.**

**Applicant must agree to comply with all of the Agency's policies, including but not limited to its Project Approval Policy.**

**Return to:**  
**Eric Ennis, Executive Director**  
City of Syracuse Industrial Development Agency  
300 South State Street, Suite 700  
Syracuse, NY 13202  
Phone: 315-448-8100  
[eennis@syr.gov](mailto:eennis@syr.gov)

## City of Syracuse Industrial Development Agency Application

### SECTION I: APPLICANT INFORMATION

Please answer all questions. Use "None", "Not Applicable" and "See Attached" where necessary.

Submittal Date: \_\_\_\_\_

#### A. Contact Information

Company Name:	<b>Syracuse Lodging Associates LLC</b> ("Applicant")			
Mailing Address:	7120 Thorntree Hill Drive			
City:	Fayetteville	State:	NY	Zip: 13066
Phone:	315-729-8459	Fax:		
Contact Person:	<b>David Neuman</b>			
Email Address:	dneuman@sun-companies.com			
Industry Sector:	<b>Hospitality</b>			
NAICS Code:	721110	Federal Employer Identification Number:	99-3847016	

#### B. Will the Applicant be the Project Beneficiary (i.e., Project tenant or owner/operator)

☒ Yes

☐ No If No, who will:

#### 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
See attached org chart				

**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:

☐ Partnership  
☐ General ☐ Limited

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

☐ Other ☐ Sole Proprietorship  
☒ Limited Liability Company/Partnership

**E.** Applicant's Counsel:

Name:	Timothy M. Lynn				
Firm:	Lynn D'Elia Temes & Stanczyk				
Mailing Address:	449 S Salina St, 2nd Fl				
City:	Syracuse	State:	NY	Zip:	13202
Phone:	315-766-2131	Fax:	315-476-1134		
Email Address:	tim@ldts-law.com				

**F.** Applicant's Accountant:

Name:					
Firm:					
Mailing Address:					
City:		State:	NY	Zip:	
Phone:		Fax:			
Email Address:					

**G.** Applicant History: If the answer to any of the following is "Yes", please explain below. If necessary, attach additional information.

Is the Applicant, its management, or its principal owners now a plaintiff or defendant in any civil or criminal litigation? ☐ Yes ☒ No

Has any person listed in Section 1(c) ever been convicted of a criminal offense (other than a minor traffic violation)? ☐ Yes ☒ No

Has any person listed in Section 1 (C) or any concern with whom such person has been connected ever been in receivership or been adjudicated a bankrupt? ☐ Yes ☒ No

**H.** Has the Applicant, or any entity in which the Applicant or any of its members or officers are members or officers, received assistance from SIDA or the Syracuse Local Development Corporation (SLDC) in the past? If yes, please give year, Project name, description of benefits, and address of Project.

☐ Yes ☒ No

## SECTION II: PROJECT AND SITE INFORMATION

**A.** Project Location

Address:	305, 309, 315-21, 325-45 South Warren St		Legal Address (if different)*	
City:	Syracuse			
Zip Code:	13202			
Tax Map Parcel ID(s):	102.-01-15.1, 102.-01-14.1, 102.-01-13.1, 102.-01-12.0			
Current Assessment:	see attached	Square Footage /Acreage of Existing Site*:	see attached	
Square Footage of Existing Building, if any:		Census Tract: (Please See Appendix E for Census Tracts)	32	

\*Please verify that the address and sq. ft. on <https://ocfintax.ongov.net/lmate/search.aspx> matches what you are proposing here or explain discrepancy in box below.

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**B.** Type (Check all that apply):

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> New Construction            | <input type="checkbox"/> Commercial                                      |
| <input type="checkbox"/> Expansion/Addition to Current Facility | <input type="checkbox"/> Brownfield/Remediated Brownfield                |
| <input type="checkbox"/> Manufacturing                          | <input type="checkbox"/> Residential Mixed Use                           |
| <input type="checkbox"/> Warehouse/Distribution                 |  |
| <input type="checkbox"/> Other                                  | <div style="border: 1px solid black; height: 20px; width: 550px;"></div> |

**C.** Description of Project: Please provide a detailed narrative of the proposed Project. Please separately attach the description and any copies of site plans, sketches or maps. This narrative should include, but is not limited to: i) a description of your Company's background, customers, goods and services and the principal products to be produced and/or the principal activities that will occur on the Project site; (ii) the size of the Project in square feet and a breakdown of square footage per each intended use; (iii) the size of the lot upon which the Project sits or is to be constructed; (iv) the current use of the site and the intended use of the site upon completion of the Project; (vi) describe your method for site control (Own, lease, other); and (vii) Company history and any additional circumstances the Agency should be aware of relative to the project or Company.

**D.** Is the Applicant the owner of the property?

- ☐ Yes ☒ No

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

One parcel is under contract. The remainder are subject of a letter of intent between applicant and current owner.

**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	N/A
Gas	Onsite	Telecommunications	Onsite

**F.** Local Approvals (Site Plan and Environmental Review)

**1.** Have site plans been submitted to the appropriate City department?

- ☐ Yes. What is the status? ☒ No. When will the plans be submitted.

2/2025

**2.** Has the project received site plan approval from the Planning Commission?



☐ Yes ☒ No

3. If no, what is the anticipated date? 3/2025

4. If yes, provide the Agency with a copy of the Planning Board's approval resolution.

G. 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?

Approximately \$19,000,000 at stabilization, much of which will also be subject to hotel tax

H. Likelihood of Undertaking Project without Receiving Financial Assistance

Please confirm by checking a box below, whether this Project will move forward without the requested incentives?

☐ Yes ☒ No

If the Project will be undertaken without Financial Assistance provided by the Agency, then provide a statement in the space provided below indicating why the Project should be given economic incentives by the Agency:

I. In accordance with N.Y. GML Sec. 862(1):

Will the Project primarily consist of retail facilities as defined in Section 862(2)(a) of the GML?

☐ Yes ☒ No

If yes, will the cost of these facilities exceed one-third of the total Project cost?

☐ Yes ☐ No

J. Is the project located in a distressed Census Tract?

☒ Yes ☐ No

Please see Appendix E for the map of distressed census tracts in the city of Syracuse.

K. Is the Project site designated as an Empire Zone?

☒ Yes ☐ No

L. Construction

1. Project Timeline (approximate):

Construction Commencement 7/2025

Construction Completion 5/2027

Date of Occupancy 6/2027

2. Please list any other key Project milestones:

3. Has work begun? ☐ Yes ☒ No

If so, indicate the amount of funds expended in the past 3 years?

### SECTION III: PROJECT COSTS & FINANCING

A. Estimated Project Costs

1. State the costs reasonably necessary for the acquisition, construction, and/or renovation of the Project:

Description of Cost Type	Total Budget Amount
Land Acquisition	0
Site Work/Demo	4000000
Building Construction & Renovation	39000000
Furniture, Fixtures & Equipment	32000000
Equipment Subject to NYS Production Sales Tax Exemption (Manufacturing)	0
Engineering/Architects Fees	1640000
Financial Charges	7150000
Legal Fees	100000
Other	510000
Management /Developer Fee	2600000
Total Project Cost (Uses)	87000000



2. State the sources reasonably anticipated for the acquisition, construction, and/or renovation of the Project:

Amount of capital the Applicant has invested to date:	500000
Amount of capital Applicant intends to invest in the Project through completion:	18194649
Total amount of <b>public</b> sector source funds allocated/awarded to the Project:	6000000
Amount of the Project to be financed from <b>private</b> sector sources:	62805351
<b>Total Project Sources*</b> *This \$ should match the total Project Costs (Uses) above.	87000000

3. Public Sector Sources:

Identify each public sector source of funding:	Amount of Public Sector Funding*
Onondaga County O-Chip Funding	750000
Empire State Development Capital Grant	5250000

\*The total amount of public sector funding should equal the public sector amount listed in (A)(ii) above.

- B. Financial Assistance sought (estimated values):

Applicants requesting exemptions and/or abatements from SIDA must provide the estimated value of the savings they anticipate receiving. New York State regulations require SIDA to recapture any benefit that exceeds the amount listed in this application.

1. Is the Applicant expecting that the financing of the Project will be secured by one or more mortgages: ☒ Yes ☐ No

If yes, amount requested and name of lender: 59155351 (in discussions with lenders)

2. Is the Applicant expecting to be appointed agent of the Agency for purposes of abating payments of NYS Sales and Use Tax? ☒ Yes ☐ No

If yes, what is the TOTAL amount of purchases subject to exemption based on taxable Project costs? 38500000

3. Is the Applicant requesting a payment in lieu of tax agreement (PILOT) for the purpose of a real property tax abatement? ☒ Yes ☐ No

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If yes, identify from the Agency's UTEP the category of PILOT requested:

not yet determined

4. Is the Applicant requesting any real property tax abatement that is **inconsistent** with the Agency's UTEP? ☐ Yes ☒ No

If yes, please contact the Executive Director prior to submission of this Application.

5. Upon acceptance of this Application, the Agency staff will create a PILOT schedule and indicate the estimated amount of PILOT benefit based on anticipated tax rates and assessed valuation. . At such time, the Applicant will affirm, in the form attached hereto at **Exhibit "A"** (the "**Benefit Affirmation**"), that it acknowledges and accepts the PILOT benefit and other benefits set forth therein, agrees to incorporate same herein by reference and requests such benefits be granted by the Agency.

**\*\* This Application will not be deemed complete and final nor will benefits be awarded until Exhibit A hereto has been completed and executed\*\***

C. Type of Exemption/**Abatement** Requested: Amount of Exemption/Abatement Requested:

<input checked="" type="checkbox"/>	Real Property Tax Abatement (PILOT)	TBD
<input checked="" type="checkbox"/>	Mortgage Recording Tax Exemption (.75% of amount mortgaged as listed on page 6 (B)(i))	443665
<input checked="" type="checkbox"/>	Sales and Use Tax Exemption (\$4% Local, 4% State of total amount listed on page 6(b)(ii))	3080000
<input checked="" type="checkbox"/>	Tax Exempt Bond Financing (Amount Requested)	59155351
<input type="checkbox"/>	Taxable Bond Financing (Amount Requested)	

D. Company's average yearly purchases or anticipated yearly purchases from vendors within Onondaga County, subject to sales tax:

2500000

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

TBD

## SECTION IV. EMPLOYMENT AND PAYROLL INFORMATION

**\*Full Time Equivalent (FTE) is equivalent to 35 hours of work per week or 1,820 hours per year. To convert part-time jobs into FTEs, divide the total number of hours for all part-time resources by 35 hours per week or 1,820 hours per year.**

**A.** In accordance with N.Y. GML Sec. 862(1):

**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 Applicant from one area of the State 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 Applicant located in the State of New York?

☐ Yes ☒ No

**i.** If any answer to questions 1, 2 or 3 above is yes, is the Project reasonably necessary to discourage the Applicant from removing such other plant or facility to a location outside the State of New York?

☐ Yes ☐ No

**ii.** If any answer to questions 1, 2 or 3 above is yes, is the Project reasonably necessary to preserve the competitive position of the Applicant in its respective industry?

☐ Yes ☐ No

**B.** Are there people currently employed by the Company/end user?

☐ Yes ☒ No

**C.** Of those jobs in (B) above, how many will be retained:

Estimate the number of full time equivalent (FTE) jobs to be retained as a result of this Project:	0
Estimate the number of construction jobs to be created by this Project:	329 annualized FTEs
Estimate the average length of construction jobs to be created (months):	24 month construction period
Current annual payroll of retained jobs:	0
Average annual growth rate of wages for retained jobs:	0
Please list, if any, benefits that are available to either full and/or part time employees retained:	0

Average annual benefit paid by the company (\$ or % salary) per FTE job:	10%
Average growth rate of benefit cost:	unknown
Amount or percent of wage employees pay for benefits:	undetermined
Provide an estimate of the number of residents in the Economic Development Region (Onondaga, Madison, Cayuga, Oneida, Oswego, and Cortland Counties) to fill new permanent FTE jobs as well as those filling retained jobs?	52

**D.** Complete the following chart indicating the number of FTE jobs presently employed by the Company/end user and the number of FTE jobs that will be created at the Project site at the end of the first, second, third, fourth, and fifth years after the Project is completed. Jobs should be listed by title or category (see below), including FTE independent contractors or employees of independent contractors that work at the Project location. **Do not include construction workers.**

Permanent Occupations in Company and/or Tenant of Project	Current Jobs by Occupation (jobs being RETAINED)	Annual Salary range	Annual benefits	Projected NEW FTEs in Years 1-5 by Occupation					Total Job Information	
	No. of FTE Employees			1st Year NET of Current RETAINED Employees	2nd Year NET of Prior Years	3rd Year NET of Prior years	4th Year NET of Prior Years	5th Year NET of Prior Years	Total New Jobs Created in 5 Year Period	Total Jobs Retained in 5 Year Period
Professional/ Managerial/ Technical	0	84000	8400	0	10	0	0	0	10	0
Skilled	0	40000	4000	0	3	0	0	0	3	0
Unskilled/ Semi-skilled	0	28385	2835	0	39	0	0	0	39	0

For purposes of completing the chart, refer to the following definitions, in lieu of current titles:

- **Professional/Managerial/Technical** - includes jobs which involve skill or competence of extraordinary degree and may include supervisory responsibilities (examples: architect, engineer, accountant, scientist, medical doctor, financial manager, programmer).
- **Skilled** - includes jobs that require specific skill sets, education, training, and experience and are generally characterized by high education or expertise levels (examples: electrician, computer operator, administrative assistant, carpenter, sales representative).
- **Unskilled or Semi-Skilled** - includes jobs that require little or no prior acquired skills and involve the performance of simple duties that require the exercise of little or no independent judgment (examples: general cleaner, truck driver, typist, gardener, parking lot attendant, line operator, messenger, information desk clerk, crop harvester, retail salesperson, security guard, telephone solicitor, file clerk).

E. Are the employees of your company currently covered by a collective bargaining agreement?

☐ Yes ☒ No If yes, provide the name and local:

## SECTION V. ENVIRONMENTAL INFORMATION

**\*An Environmental Assessment Form (EAF) MUST be completed and submitted along with this application. Please visit <https://www.dec.ny.gov/permits/6191.html> for the online EAF Mapper Application and EAF Forms.**

A. Have any environmental issues been identified on the property?

☐ Yes ☒ No

If yes, please explain:

B. Has any public body undertaken a State Environmental Quality Review Act ("SEQRA") review?

☐ Yes ☒ No

Has any public body issued a SEQRA determination for this Project?

☐ Yes ☒ No

If yes to either of the foregoing, please attach to this application all SEQRA forms (e.g. EAF) and any determinations.

## SECTION VI. REPRESENTATIONS & AFFIRMATIONS BY THE APPLICANT

I hereby represent and warrant that I am [the CEO of the company/applicant] or [a person authorized to bind the company/applicant] and make the following representations and/or warranties and understand and agrees with the Agency as follows:

A. **Jobs Listings:** 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 ("WIA") in which the Project is located.



B. **First Consideration for Employment:** In accordance with §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, the Company shall comply with Section 862-b of the GML.



C. **Other NYS Facilities:** In accordance with §862 (1) of the New York General Municipal Law, the Applicant understands and agrees that projects which will result in the removal of an industrial or manufacturing plant of the Project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the Project occupant within the state is ineligible for Agency Financial Assistance,



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unless otherwise approved by the Agency as reasonably necessary to preserve the competitive position of the Project in its respective industry.

**D. City Human Right Law:** The Applicant agrees to endeavor to comply with the provisions of Article XI, Division 2 of the City Code, entitled "The Omnibus Human Rights Law," which prohibits discrimination in employment based upon age, race, sex, creed, color, religion, national origin, sexual orientation, disability or marital status. The Applicant hereby agrees to adhere to this policy or equal opportunity employment in the requirement, hiring, training, promotion, and termination of employees.



**E. City of Syracuse and MWBE:** The applicant understands and agrees that every Project must commit to incorporate vendors that are minority and/or women-owned business enterprises, as certified by the State or the municipality ("MWBE"), equal to a minimum of 10% of all SIDA abatements during the construction phase. MWBE vendors must be located within Onondaga County in accordance with the Agency's Project Approval Policy, a copy of which is attached hereto at **Exhibit "B"** and made a part hereof.



**F. City Resident Hiring.** *To qualify for any exemptions* under the Agency's Uniform Tax-Exempt Policy, every Project must commit to hiring 10% of its construction workforce, on a full-time basis, from residents of the City of Syracuse as set forth in the Agency's Project Approval Policy, a copy of which is attached hereto at **Exhibit "B"** and made a part hereof.



**G. Local Labor Policy:** The applicant understands and agrees that local labor and contractors will be used for the construction, renovation, reconstruction, equipping of the Project unless a written waiver is received from the Agency. Failure to comply may result in the revocation or recapture of benefits awarded to the Project by the Agency. For the purposes of the policy, "Local" is defined as Onondaga, Cayuga, Cortland, Madison, Oneida, and Oswego Counties.



**H. Annual Sales Tax Filings:** In accordance with §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

**I. 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.



**J. 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.



**K. Compliance:** The Applicant understands and agrees that it is in substantial compliance with applicable local, state, and federal tax, worker protection, and environmental laws, rules, and regulations.



**L. False or Misleading Information:** The Applicant understands and agrees that the submission of knowingly false or knowingly misleading information in this Application may lead to the immediate termination of



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any financial assistance and the reimbursement of an amount equal to all or part of any tax exemptions claimed by reason of Agency involvement in the Project.

**M. GML Compliance:** The Applicant certifies that, as of the date of the Application, the proposed project is in substantial compliance with all provisions of NYS General Municipal Law Article 18-A.



**N. SIDA's Policies:** The Applicant is familiar with all of SIDA's policies posted on its website ([http://www.syr.gov.net/Syracuse\\_Industrial\\_Development\\_Agency.aspx](http://www.syr.gov.net/Syracuse_Industrial_Development_Agency.aspx)) and agrees to comply with all applicable policies.



**O. Disclosure:** The Applicant has read paragraph 6 of the instructions contained on the cover of this Application and understands that the Applicant must identify in writing to SIDA any information it deems proprietary and seeks to have redacted.



**P. Reliance:** THE APPLICANT ACKNOWLEDGES THAT ALL ESTIMATES OF PROJECTED FINANCIAL IMPACTS, VALUE OF FINANCIAL ASSISTANCE REQUESTED, AND OTHER INFORMATION CONTAINED IN THIS APPLICATION WILL BE RELIED UPON BY SIDA AND ANY CHANGES IN SUCH INFORMATION MUST BE MADE IN WRITING AND MAY IMPACT THE GRANT OF FINANCIAL ASSISTANCE TO THE PROJECT.



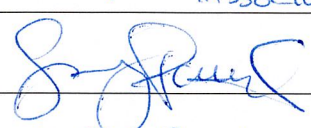
**Q. Legal Fees:** The Applicant acknowledges that all by submitting this application, they are contractually obligated to pay all of SIDA's legal fees associated with this application, the project and the financial assistance sought regardless of whether any benefits are approved or conferred.



**R. Prevailing Wage:** The Applicant understands and agrees that, if the Project receives any financial assistance from the Agency, the Applicant shall determine whether the Project is a "covered project" pursuant to Section 224-a of Article 8 of the New York Labor Law and, if applicable, the Applicant shall comply with Section 224-a of Article 8 of the New York Labor Law; and the Applicant further covenants that the Applicant shall provide such evidence of the foregoing as requested by the Agency.

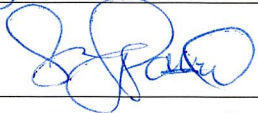


**I am the CEO or a person authorized to bind the company/applicant, and have read the foregoing and agree to comply with all the terms and conditions contained therein as well as the policies of the City of Syracuse Industrial Development Agency.**

Name of Applicant Company	<del>Son-Dan-Dee</del> Syracuse Lodging Associates, LLC
Signature of Officer or Authorized Representative	
Name & Title of Officer or Authorized Representative	Suraj Patel - Managing Member
Date	1/24/25

## SECTION VII. HOLD HARMLESS AGREEMENT

Applicant hereby releases the City of Syracuse Industrial Development Agency and the members, officers, servants, agents and employees thereof (collectively 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, or the inability of the Applicant, for any reason, to proceed with 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 processing of or in connection with the Application, including attorney's fees, if any.

Name of Applicant Company	Syracuse Lodging Associates
Signature of CEO or a person authorized to bind the company/applicant	
Name & Title of Officer or Authorized Representative	Swag Patel - Managing Member
Date	1/24/25

PLEASE NOTE: This exhibit is simply a template and does not need to be completed at the time of initial submission.

## EXHIBIT "A"

### [TEMPLATE] BENEFIT AFFIRMATION

\*\* Note: this page is for reference only and should not filled out during the application phase.

The undersigned, \_\_\_\_\_, being the \_\_\_\_\_ and authorized signatory of \_\_\_\_\_, (the "**Company**" or "**Applicant**"), does hereby *certify and affirm under the penalty of perjury* the following:

On or about \_\_\_\_\_ the Company submitted an application for financial assistance (the "**Application**") to the City of Syracuse Industrial Development Agency (the "**Agency**") requesting the Agency consider undertaking a project (the "**Project**") consisting of:

The Agency is governed by the New York State General Municipal Law which, effective June 15, 2016, requires, pursuant to Section 859-a, among other things, that each project applicant affirm, *under penalty of perjury*, the estimated amount of benefits requested from the Agency.

That the following PILOT benefit schedule reflects the estimated real property tax benefits related to the Project, including an estimated savings valuation totaling \$\_\_\_\_\_ to be realized by the Company over the \_\_\_\_\_ (\_\_\_\_) year term of the payment in lieu of taxes ("**PILOT**") agreement requested by the Company:

PILOT Benefit Schedule	
Comparison	Amount
Estimated ____ year Taxes w/o PILOT benefit	\$
Estimated ____ year PILOT Payments	\$
Estimated ____ year PILOT Savings	\$

In addition, as set forth by the Company within its Application: (i) the purchase of goods and services relating to the Project, and subject to New York State and local sales and use taxes, are estimated to cost an amount up to \$\_\_\_\_\_ and therefore, the value of the State and local sales and use tax exemption benefits sought from the Agency shall not exceed \$\_\_\_\_\_; and (ii) the mortgage recording tax

SIDA Application

exemption shall be approximately \$ \_\_\_\_\_ based upon the Company's estimation in its Application that the principal amount of the mortgage on the Project will be \$ \_\_\_\_\_.

The undersigned, deposes and says that: (i) (s)he has the authority to bind the Company; (ii) (s)he has read the foregoing affirmation outlining the financial assistance sought by the Company from the Agency for the Project; and (iii) acknowledges same to be true, accurate and complete, as subscribed and affirmed hereby under the penalty of perjury.

[INSERT COMPANY NAME]

By: \_\_\_\_\_

Title: \_\_\_\_\_

Sworn to before me this \_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

**EXHIBIT "B"**

**PROJECT APPROVAL POLICY**

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**City of Syracuse Industrial Development Agency**

201 E. Washington Street, 6th Floor

Syracuse, New York 13202

Tel (315) 448-8100 Fax (315) 448-8036

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**PROJECT APPROVAL POLICY**

**I. STATEMENT OF PURPOSE**

The City of Syracuse Industrial Development Agency ("**Agency**") has adopted this Project Approval Policy (the "**Policy**") in accordance with Section 859-a (5) of the New York State General Municipal Law. This Policy shall be consistent with and in compliance with the provisions of Chapter 1030 of Laws of 1969 of New York, constituting Title 1 of Article 18-A of the General Municipal Law, Chapter 24 of the Consolidated Laws of New York, as amended (the "**Enabling Act**") and Chapter 641 of the Laws of 1979 of the State of New York, as amended from time to time (said Chapter and the Enabling Act being hereinafter collectively referred to as the "**Act**"), and any other applicable law.

**II. PROJECT APPROVAL**

Eligible projects for consideration hereunder shall comply with the Act

**A. DEFINITIONS:** For purposes of this Policy, the following definitions shall apply:

"**Distressed Census Tract**" shall have the meaning ascribed thereto by the applicable federal, state or local tax credit program applicable to the Qualified Project.

"**FTE**" means one employee working no less than 40 hours per week or two or more employees together working a total of 40 hours per week.

"**NRSA**" means the Neighborhood Revitalization Strategy Areas as defined by the City of Syracuse Department of Neighborhood and Business Development Syracuse Consolidated Plan found at the following link:  
[http://www.syrqov.net/uploadedFiles/Departments/Neighborhood and Business Development/Content/Consolidated%20Plan%202015-19%20Final%20-%2001-06-2016.pdf](http://www.syrqov.net/uploadedFiles/Departments/Neighborhood%20and%20Business%20Development/Content/Consolidated%20Plan%202015-19%20Final%20-%2001-06-2016.pdf).

**B.** Each of the following must occur **prior** to the adoption of a resolution approving the grant of financial assistance for a project:

**(i) Assessment**

The members shall assess **all** material information included in connection with the application for financial assistance (the "**Application**") submitted by or on behalf of the company seeking such financial assistance (the "**Company**") in order to afford a reasonable basis for the decision by the Agency to provide financial assistance for a proposed project