



## Servicing and Asset Management Office

[Instructions and Insurance Requirements Document](#)

### Section I: Applicant Background Information

Please answer all questions. Use "None" or "Not Applicable" where necessary. Information in this application may be subject to public review under New York State Law.

#### Applicant Information - Company Receiving Benefit

**Project Name** Arbor 2022 Relocation

**Project Summary** Relocating Arbor Servicing and Asset Management Teams

**Applicant Name** Arbor Multifamily Lending, LLC

**Applicant Address** 3370 Walden Avenue

**Applicant Address 2** Suite 114

**Applicant City** Depew

**Applicant State** New York

**Applicant Zip** 14043

**Phone** (516) 316-3162

**Fax**

**E-mail** jfoote@arbor.com

**Website** arbor.com

**NAICS Code** 525990

#### Business Organization

**Type of Business** Limited Liability Company

**Year Established**

**State in which Organization is established** Delaware

#### Individual Completing Application

**Name** Jeanette Foote

**Title** VP, Operational Compliance

**Address** 333 Earle Ovington Blvd., Suite 900

**Address 2**

**City** Uniondale

**State** New York

**Zip** 11553

**Phone** (516) 316-3162  
**Fax**  
**E-Mail** jfoote@arbor.com

Company Contact (if different from individual completing application).

**Name**  
**Title**  
**Address**  
**Address 2**  
**City**  
**State**  
**Zip**  
**Phone**  
**Fax**  
**E-Mail**

Company Counsel

**Name of Attorney** Greg Marcus  
**Firm Name**  
**Address** 375 Park Avenue  
**Address 2** Suite 3000  
**City** New York  
**State** New York  
**Zip** 10152  
**Phone** (212) 389-6557  
**Fax**  
**E-Mail** gmarcus@arbor.com

Benefits Requested (select all that apply).

<b>Exemption from Sales Tax</b>	Yes
<b>Exemption from Mortgage Tax</b>	No
<b>Exemption from Real Property Tax</b>	No
<b>Tax Exempt Financing*</b>	No

\* (typically for not-for-profits & small qualified manufacturers)

Applicant Business Description

**Describe in detail company background, history, products and customers. Description is critical in determining eligibility. Also list all stockholders, members, or partners with % ownership greater than 20%.**

Arbor Multifamily Lending LLC is a subsidiary of Arbor Realty Trust Inc. Arbor Multifamily Lending, LLC. is an experienced loan servicer rated by S&P and Fitch for commercial and special servicing. Our in-house multifamily servicing and asset management teams extend the financial partnership with our commercial and multi-family clients, assisting through the lifecycle of all loans. Currently based in Depew, NY, our nationwide serviced portfolio includes mezzanine financing, permanent deals, construction/funded-forward products, REIT/securitized transaction loans and HUD-insured projects.

**Estimated % of sales within Erie County**

1 %

**Estimated % of sales outside Erie County but within New York State** 15 %

**Estimated % of sales outside New York State but within the U.S.** 84 %

**Estimated % of sales outside the U.S.** 0 %

(\*Percentage to equal 100%)

**For your operations, company and proposed project what percentage of your total annual supplies, raw materials and vendor services are purchased from firms in Erie County?**

50

**Describe vendors within Erie County for major purchases**

We will try to work with local vendors to purchase the furniture, fixtures and equipment for the project.

## Section II: Eligibility Questionnaire - Project Description & Details

### Project Location

**Address of Proposed Project Facility**

500 Colvin Woods Parkway

**Town/City/Village of Project Site**

Tonawanda

**School District of Project Site**

Ken-Ton Free School District

**Current Address (if different)**

3370 Walden Avenue

**Current Town/City/Village of Project Site (if different)**

Depew

**SBL Number(s) for proposed Project**

53.14-3-1.1/500

**What are the current real estate taxes on the proposed Project Site**

Real Estate taxes are built into the operating expenses of the Lease

**If amount of current taxes is not available, provide assessed value for each.**

Land

\$ 0

Building(s)

\$ 0

If available include a copy of current tax receipt.

**Are Real Property Taxes current at project location?**

Yes

**If no please explain**

\*The ECIDA has an unpaid tax policy and you will be required to certify all taxes and PILOTS are current.

**Does the Applicant or any related entity currently hold fee title or have an option/contract to purchase the Project site?**

No

**If No, indicate name of present owner of the Project Site****Does Applicant or related entity have an option/contract to purchase the Project site?**

No

**Describe the present use of the proposed Project site (vacant land, existing building, etc.)**

Existing Building

**Provide narrative and purpose of the proposed project (new build, renovations) square footage of existing and new construction contemplated and/or equipment purchases. Identify specific uses occurring within the project. Describe any and all tenants and any/all end users: (This information is critical in determining project eligibility)**

Arbor's history in Erie County began in 2000 when it relocated its Loan Servicing Operations from Boston, MA to Limestone Drive in Williamsville and hired five local employees from KeyBank which was moving its Operations out of state. Our continued growth took us through several annexations of space in that location and we moved to Werhle Drive which we outgrew in 2011. The current location at Walden Avenue, a flex building, has served our needs for the ease of transporting paper files from other offices to the secure file room built into this space. It also offered contiguous growth opportunities which we availed ourselves of multiple times until we grew to over 22,000SF to house our staff which now numbers 168. As lease expiration approaches, we evaluated our current location, growth options and quality of space. As we have moved to electronic storage, paper files are no longer kept onsite, and a single floor flex building location is no longer a requirement. Given the competitive labor market for professional talent, the need for onsite and nearby employee amenities, a decision was made to search for a new location for Arbor's Loan Servicing Operations. Options we would consider include splitting the Operations and/or moving out of Erie County to another state. After assessing all space availabilities in the 30,000SF range within a reasonable distance from the current Walden Avenue location, 500 Colvin Woods Parkway in Tonawanda, NY was selected. This location will provide Arbor with the opportunity to create a high-quality Class A office space, with employee amenities within the space, in the building, and nearby. The location is directly off I-290 and affords an opportunity for high visibility outdoor signage on the building which will assist in our efforts to recruit and retain talent. Arbor will occupy the entire second floor of the building with a mostly open floorplan. Arbor plans on purchasing FF&E totaling \$ 2Mill to outfit the new space. The landlord will provide the space turnkey; the entire floor will be gutted and rebuilt. LED lighting will be installed throughout the new space. Electric hand dryers will replace paper towels in restrooms thereby conserving our natural resources and reducing waste. A substantial amount of new furniture and equipment will be purchased as well. The entire building which consists of 60,000SF divided between two floors is currently vacant. Arbor will occupy 30,000SF on the second floor. What is Arbor's "Location Justification" for 500 Colvin Woods Parkway. The location is on the south side of I-290 between Colvin Boulevard and Delaware Avenue. It is easily accessible with a NFTA bus stop at the entrance to the Colvin Woods Business Park. Arbor employees drive to work, many from locations out of the current Walden Avenue area; access to major highways and ample parking is important.

**Municipality or Municipalities of current operations**

Depew, Lancaster NY

**Will the Proposed Project be located within a Municipality identified above?**

No

**Will the completion of the Project 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 located within the state?**

Yes

**If the Proposed Project is located in a different Municipality within New York State than that Municipality in which current operations are being undertaken, is it expected that any of the facilities in any other Municipality will be closed or be subject to reduced activity?**

Yes

(If yes, you will need to complete the Intermunicipal Move Determination section of this application)

**Is the project reasonably necessary to prevent the project occupant from moving out of New York State?**

Yes

**If yes, please explain and identify out-of-state locations investigated, type of assistance offered and provide supporting documentation available**

If Arbor was not able to secure this new location the office could split its operations out of the area.

**Have you contacted or been contacted by other Local, State and/or Federal Economic Development Agencies?**

No

**If yes, please indicate the Agency and nature of inquiry below**

**If the Project could be undertaken without Financial Assistance provided by the Agency, then provide a statement in the space provided below indicating why the Project should be undertaken by the Agency:**

**Describe the reasons why the Agency's financial assistance is necessary, and the effect the Project will have on the Applicant's business or operations. Focus on competitiveness issues, project shortfalls, etc... Your eligibility determination will be based in part on your answer (attach additional pages if necessary)**

Arbor is contemplating purchasing all new office furniture, AV equipment and building a state-of-the-art computer room, as well as providing employee amenities in the form of an upscale breakroom and employee lounge. New computer equipment will enable us to be more efficient and reduce our use of paper. New systems, furniture with frameless glass partitions will add an additional layer of protection while allowing natural light to filter throughout the space. The creation of an attractive work environment would appeal to prospective job applicants and enable Arbor to retain and attract new talent. The current job landscape is very competitive from a recruitment stand point. Arbor has to remain competitive in our industry and this move will achieve our goals. thereby enhancing the growth and economics of the area. The sales tax abatement would be an incentive to move forward with this concept rather than reuse existing furniture, which we would make available for donation.

**Please confirm by checking the box, below, if there is likelihood that the Project would not be undertaken but for the Financial Assistance provided by the Agency**

Yes

**If the Applicant is unable to obtain Financial Assistance for the Project, what will be the impact on the Applicant and Erie County?**

If Arbor was not able to secure this new location with the help of the ECIDA our options may include splitting our operations out of the area.

**Will project include leasing any equipment?**

No

If yes, please describe equipment and lease terms.

### Site Characteristics

**Is your project located near public transportation?**

Yes

**If yes describe if site is accessible by either metro or bus line (provide route number for bus lines)**

NFTA Bus Stop Routes 11,20 &25

**Has a project related site plan approval application been submitted to the appropriate planning department?**

<BLANK>

**If Yes, include the applicable municipality's and/or planning department's approval resolution, the related State Environmental Quality Review Act ("SEQR") "negative declaration" resolution, if applicable, and the related Environmental Assessment Form (EAF), if applicable.**

**If No, list the ECIDA as an "Involved Agency" on the related EAF that will be submitted to the appropriate municipality and/or planning department for site plan approval.**

**Will the Project meet zoning/land use requirements at the proposed location?**

Yes

**Describe the present zoning/land use**

**Describe required zoning/land use, if different**

**If a change in zoning/land use is required, please provide details/status of any request for change of zoning/land use requirements**

**Is the proposed Project located on a site where the known or potential presence of contaminants is complicating the development/use of the property?**

<BLANK>

**If yes, please explain**

**Has a Phase I Environmental Assessment been prepared, or will one be prepared with respect to the proposed Project Site?**

<BLANK>

If yes, please provide a copy.

**Have any other studies, or assessments been undertaken with respect to the proposed Project Site that indicate the known or suspected presence of contamination that would complicate the site's development?**

<BLANK>

If yes, please provide copies of the study.

**If you are purchasing new machinery and equipment, does it provide demonstrable energy efficiency benefits?**

No

**If yes, describe the efficiencies achieved**

You may also attach additional information about the machinery and equipment at the end of the application.

**Does or will the company or project occupant perform research and development activities on new products/services at the project location?**

No

If yes, include percentage of operating expenses attributed to R&D activities and provide details.

Select Project Type for all end users at project site (you may check more than one).

For purposes of the following, the term "retail sales" means (i) sales by a registered vendor under Article 28 of the Tax Law of the State of New York (the "Tax Law") primarily engaged in the retail sale of tangible personal property (as defined in Section 1101(b)(4)(i) of the Tax Law), or (ii) sales of a service to customers who personally visit the Project.

Will customers personally visit the Project site for either of the following economic activities? If yes with respect to either economic activity indicated below, you will need to complete the Retail section of this application.

**Retail Sales** No **Services** No

Please check any and all end uses as identified below.

- No Acquisition of Existing Facility**    **No Assisted Living**    **Yes Back Office**
- No Civic Facility (not for profit)**    **No Commercial**    **Yes Equipment Purchase**
- No Facility for the Aging**    **No Industrial**    **No Life Care Facility (CCRC)**
- No Market Rate Housing**    **No Mixed Use**    **No Multi-Tenant**
- No Retail**    **No Senior Housing**    **No Manufacturing**
- No Renewable Energy**    **No Other**

For proposed facility please include the square footage for each of the uses outlined below

If applicant is paying for FFE for tenants, include in cost breakdown.

		<b>Cost</b>	<b>% of Total Cost</b>
<b>Manufacturing/Processing</b>	square feet	\$ 0	0%
<b>Warehouse</b>	square feet	\$ 0	0%
<b>Research &amp; Development</b>	square feet	\$ 0	0%
<b>Commercial</b>	square feet	\$ 0	0%
<b>Retail</b>	square feet	\$ 0	0%
<b>Office</b>	30,197 square feet	\$ 2,000,000	100%
<b>Specify Other</b>	square feet	\$ 0	0%

If you are undertaking new construction or renovations, are you seeking LEED certification from the US Green Building Council?

<BLANK>

If you answered yes to question above, what level of LEED certification do you anticipate receiving? (Check applicable box)

<BLANK>

**Provide estimate of additional construction cost as a result of LEED certification you are seeking**    < BLANK >

**Will project result in significant utility infrastructure cost or uses**    Yes

What is the estimated project timetable (provide dates).

**Start date : acquisition of equipment or construction of facilities**

1/22/2022

**End date : Estimated completion date of project**

7/1/2022

**Project occupancy : estimated starting date of occupancy**

7/1/2022

Capital Project Plan / Budget

**Estimated costs in connection with Project**

**1.) Land and/or Building Acquisition**

\$ 0 square feet acres

**2.) New Building Construction**

\$ 0 square feet

**3.) New Building addition(s)**

\$ 0 square feet

**4.) Reconstruction/Renovation**

\$ 0 square feet

**5.) Manufacturing Equipment**

\$ 0

**6.) Infrastructure Work**

\$ 0

**7.) Non-Manufacturing Equipment: (furniture, fixtures, etc.)**

\$ 2,000,000

**8.) Soft Costs: (Legal, architect, engineering, etc.)**

\$ 100,000

**9.) Other Cost**

\$ 0

**Explain Other Costs**

**Total Cost** \$ 2,100,000

Construction Cost Breakdown:

<b>Total Cost of Construction</b>	\$ 0 (sum of 2, 3, 4 and 6 in Project Information, above)
<b>Cost of materials</b>	\$ 0
<b>% sourced in Erie County</b>	%

Sales and Use Tax:

<b>Gross amount of costs for goods and services that are subject to State and local sales and use tax- said amount to benefit from the Agency's sales and use tax exemption benefit</b>	\$ 2,100,000
<b>Estimated State and local Sales and Use Tax Benefit (product of 8.75% multiplied by the figure, above):</b>	\$ 183,750

\*\* Note that the estimate provided above will be provided to the New York State Department of Taxation and Finance. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to undertake the total amount of investment as proposed within this Application, and that the estimate, above, represents the maximum amount of sales and use tax benefit that the Agency



may authorize with respect to this Application. The Agency may utilize the estimate, above, as well as the proposed total Project Costs as contained within this Application, to determine the Financial Assistance that will be offered.

**Project refinancing estimated amount, if applicable (for refinancing of existing debt only)** \$ 0

**Have any of the above costs been paid or incurred as of the date of this Application?** No

**If Yes, describe particulars:**

Sources of Funds for Project Costs:

**Equity (excluding equity that is attributed to grants/tax credits):** \$

**Bank Financing:** \$ 2,100,000

**Tax Exempt Bond Issuance (if applicable):** \$ 0

**Taxable Bond Issuance (if applicable):** \$ 0

**Public Sources (Include sum total of all state and federal grants and tax credits):** \$ 0

**Identify each state and federal grant/credit: (ie Historic Tax Credit, New Market Tax Credit, Brownfield, Cleanup Program, ESD, other public sources)** 0

**Total Sources of Funds for Project Costs:** \$2,100,000

**Have you secured financing for the project?** No

Mortgage Recording Tax Exemption Benefit:

Amount of mortgage, if any that would be subject to mortgage recording tax:

**Mortgage Amount (include sum total of construction/permanent/bridge financing).**

**Lender Name, if Known**

**Estimated Mortgage Recording Tax Exemption Benefit (product of mortgage amount as indicated above multiplied by 3/4 of 1%):** \$0

Real Property Tax Benefit:

**Identify and describe if the Project will utilize a real property tax exemption benefit other than the Agency's PILOT benefit (485-a, 485-b, other):**

IDA PILOT Benefit: Agency staff will indicate the estimated amount of PILOT Benefit based on estimated Project Costs as contained herein and anticipated tax rates and assessed valuation, including the annual PILOT Benefit abatement amount for each year of the PILOT benefit and the sum total of PILOT Benefit abatement amount for the term of the PILOT as depicted in the PILOT worksheet in the additional document section.

Percentage of Project Costs financed from Public Sector sources: Agency staff will calculate the percentage of Project Costs financed from Public Sector sources based upon the Sources of Funds for Project Costs as depicted above. The percentage of Project Costs financed from public sector sources will be depicted in the PILOT worksheet in the additional document section.

**ECIDA encourages applicants to utilize MBE/WBE contractors for their projects. Describe your company's internal practices that promote MBE/WBE hiring and utilization**

See Attached

**Is project necessary to expand project employment?**

Yes

**Is project necessary to retain existing employment?**

Yes

**Will project include leasing any equipment?**

No

If yes, please describe equipment and lease terms.

Employment Plan (Specific to the proposed project location).

The Labor Market Area consists of the following six counties: Erie, Niagara, Chautauqua, Cattaraugus, Wyoming and Genessee.

By statute, Agency staff must project the number of FTE jobs that would be retained and created if the request for Financial Assistance is granted. Agency staff will project such jobs over the TWO Year time period following Project completion. Agency staff converts PT jobs into FTE jobs by dividing the number of PT jobs by two (2).

	<b>Current # of jobs at proposed project location or to be relocated at project location</b>	<b>If financial assistance is granted – project the number of FT and PT jobs to be retained</b>	<b>If financial assistance is granted – project the number of FT and PT jobs to be created upon 24 months (2 years) after Project completion</b>	<b>Estimate number of residents of the Labor Market Area in which the project is located that will fill the FT and PT jobs to be created upon 24 months (2 years) after project completion **</b>
<b>Full time</b>	168	168	25	25
<b>Part time</b>	0	0	0	0
<b>Total</b>	168	168	25	

Salary and Fringe Benefits for Jobs to be Retained and Created

<b>Category of Jobs to be Retained and/or Created</b>	<b># of Employees Retained and/or Created</b>	<b>Average Salary for Full Time</b>	<b>Average Fringe Benefits for Full Time</b>	<b>Average Salary for Part Time (if applicable)</b>	<b>Average Fringe Benefits for Part Time (if applicable)</b>
<b>Management</b>	10	\$ 140,000	\$ 42,000	\$ 0	\$ 0
<b>Professional</b>	181	\$ 67,000	\$ 20,100	\$ 0	\$ 0
<b>Administrative</b>	2	\$ 45,000	\$ 13,500	\$ 0	\$ 0
<b>Production</b>	0	\$ 0	\$ 0	\$ 0	\$ 0
<b>Independent Contractor</b>	0	\$ 0	\$ 0	\$ 0	\$ 0
<b>Other</b>	0	\$ 0	\$ 0	\$ 0	\$ 0

\*\* Note that the Agency may utilize the foregoing employment projections, among other items, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to retain the number of jobs and create the number of jobs with respect to the Project as set forth in this Application.

No **By checking this box, I certify that the above information concerning the current number of jobs at the proposed project location or to be relocated to the proposed project location is true and correct.**

Employment at other locations in Erie County: (provide address and number of employees at each location):

<b>Address</b>			
<b>Full time</b>	0	0	0
<b>Part time</b>	0	0	0
<b>Total</b>	0	0	0

Payroll Information

**Annual Payroll at Proposed Project Site upon completion**

12,840,000

**Estimated average annual salary of jobs to be retained (Full Time)**

72,000

**Estimated average annual salary of jobs to be retained (Part Time)**

0

**Estimated average annual salary of jobs to be created (Full Time)**

70,000

**Estimated average annual salary of jobs to be created (Part Time)**

0

**Estimated salary range of jobs to be created**

<b>From (Full Time)</b>	70,000	<b>To (Full Time)</b>	82,000
<b>From (Part Time)</b>	0	<b>To (Part Time)</b>	0

## Section III: Environmental Questionnaire

INSTRUCTIONS: Please complete the following questionnaire as completely as possible. If you need additional space to fully answer any question, please attach additional page(s).

### General Background Information

#### **Address of Premises**

#### **Name and Address of Owner of Premises**

**Describe the general features of the Premises (include terrain, location of wetlands, coastlines, rivers, streams, lakes, etc.)**

**Describe the Premises (including the age and date of construction of any improvements) and each of the operations or processes carried out on or intended to be carried on at the Premises**

**Describe all known former uses of the Premises**

**Does any person, firm or corporation other than the owner occupy the Premises or any part of it?**

<BLANK>

**If yes, please identify them and describe their use of the property**

**Have there been any spills, releases or unpermitted discharges of petroleum, hazardous substances, chemicals or hazardous wastes at or near the Premises?**

<BLANK>

**If yes, describe and attach any incident reports and the results of any investigations**

**Has the Premises or any part of it ever been the subject of any enforcement action by any federal, state or local government entity, or does the preparer of this questionnaire have knowledge of: a) any current federal, state or local enforcement actions; b) any areas of non-compliance with any federal, state or local laws, ordinances, rules or regulations associated with operations over the past 12 months?**

<BLANK>

**If yes, please state the results of the enforcement action (consent order, penalties, no action, etc.) and describe the circumstances**

**Has there been any filing of a notice of citizen suit, or a civil complaint or other administrative or criminal procedure involving the Premises?**

<BLANK>

**If yes, describe in full detail**

### Solid And Hazardous Wastes And Hazardous Substances

**Does any activity conducted or contemplated to be conducted at the premises generate, treat or dispose of any petroleum, petroleum-related products, solid and hazardous wastes or hazardous substances?**

No

**If yes, provide the Premises' applicable EPA (or State) identification number**

**Have any federal, state or local permits been issued to the Premises for the use, generation and/or storage of solid and hazardous wastes?**

No

**If yes, please provide copies of the permits.**

**Identify the transporter of any hazardous and/or solid wastes to or from the Premises**

**Identify the solid and hazardous waste disposal or treatment facilities which have received wastes from the Premises for the past two (2) years**

**Does or is it contemplated that there will occur at the Premises any accumulation or storage of any hazardous wastes on-site for disposal for longer than 90 days?**

No

**If yes, please identify the substance, the quantity and describe how it is stored**

### Discharge Into Waterbodies

**Briefly describe any current or contemplated industrial process discharges (including the approximate volume, source, type and number of discharge points). Please provide copies of all permits for such discharges**

n/a

**Identify all sources of discharges of water, including discharges of waste water, process water, contact or noncontact cooling water, and stormwater. Attach all permits relating to the same. Also identify any septic tanks on site**

n/a

**Is any waste discharged into or near surface water or groundwaters?**

No

**If yes, please describe in detail the discharge including not only the receiving water's classification, but a description of the type and quantity of the waste**

### Air Pollution

**Are there or is it contemplated that there will be any air emission sources that emit contaminants from the Premises?**

No

**If yes, describe each such source, including whether it is a stationary combustion installation, process source, exhaust or ventilation system, incinerator or other source**

**Are any of the air emission sources permitted?**

No

**If yes, attach a copy of each permit.**

### Storage Tanks

**List and describe all above and under ground storage tanks at the Premises used to store petroleum or gasoline products, or other chemicals or wastes, including the contents and capacity of each tank. Please also provide copies of any registrations/permits for the tanks**

n/a

**Have there been any leaks, spills, releases or other discharges (including loss of inventory) associated with any of these tanks?**

No

**If yes, please provide all details regarding the event, including the response taken, all analytical results or reports developed through investigation (whether internal or external), and the agencies which were involved**

### Polychlorinated Biphenyls ("PCB" or "PCBs") And Asbestos

**Provide any records in your possession or known to you to exist concerning any on-site PCBs or PCB equipment, whether used or stored, and whether produced as a byproduct of the manufacturing process or otherwise.**

**Have there been any PCB spills, discharges or other accidents at the Premises?**

No

**If yes, relate all the circumstances**

**Do the Premises have any asbestos containing materials?**

No

**If yes, please identify the materials**

## **Section IV: Facility Type - Single or Multi Tenant**

**Is this a Single Use Facility or a Multi-Tenant Facility?**

Single Use Facility

For Single Use Facility.

**Occupant Name**

**Address**

**Contact Person**

**Phone**

**Fax**

**E-Mail**

**Federal ID #**

**SIC/NAICS Code**

SS

## Section VI: Retail Determination

To ensure compliance with Section 862 of the New York General Municipal Law, the Agency requires additional information if the proposed Project is one where customers personally visit the Project site to undertake either a retail sale transaction or to purchase services.

Please answer the following:

**Will any portion of the project (including that portion of the costs to be financed from equity or other sources) consist of facilities or property that are or will be primarily used in making sales of goods or services to customers who personally visit the project site?**

No

If yes, complete the Retail Questionnaire Supplement below. **If no, proceed to the next section.**



## **Section VII: Adaptive Reuse Projects**

Adaptive Reuse is the process of adapting old structures or sites for new purposes.

**Are you applying for tax incentives under the Adaptive Reuse Program?**

No

## Section VIII: Inter-Municipal Move Determination

The Agency is required by state law to make a determination that, if completion of a Project benefiting from Agency Financial Assistance results 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 located within the state, Agency financial Assistance is required to prevent the project occupant from relocating out of the state, or is reasonably necessary to preserve the project occupant's competitive position in its respective industry.

### Current Address

3370 Walden Ave

### City/Town

Depew

### State

New York

### Zip Code

14043

**Will the project 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?**

No

**Will the project result in the abandonment of one or more plants or facilities of the Project occupant located within the state?**

No

**If Yes to either question, explain how, notwithstanding the aforementioned closing or activity reduction, the Agency's Financial Assistance is required to prevent the Project from relocating out of the State, or is reasonably necessary to preserve the Project occupant's competitive position in its respective industry:**

**Does this project involve relocation or consolidation of a project occupant from another municipality?**

**Within New York State**

Yes

**Within Erie County**

Yes

**If Yes to either question, please, explain**

Arbor's lease at 3370 Walden will expire in 2022. The building is a flex building. The current landlord cannot offer the increased space to satisfy Arbor's growth plan. Arbor is seeking to upgrade its office space to a higher level to attract and retain talent and has found space at 500 Colvin Woods in Tonawanda, NY.

**Will the project result in a relocation of an existing business operation from the City of Buffalo?**

No

**If yes, please explain the factors which require the project occupant to relocate out of the City of Buffalo (For example, present site is not large enough, or owner will not renew leases etc.)**

**What are some of the key requirements the project occupant is looking for in a new site? (For example, minimum sq. ft., 12 foot ceilings, truck loading docs etc.)**

As Arbor's lease expiration approaches, our team evaluated our current location, growth options and quality of space. New and advanced technology initiatives have allowed Arbor to move to electronic storage, paper files are no longer kept onsite, and a single floor flex building location is no longer a requirement. Given the competitive labor market for professional talent and the need for onsite and nearby employee amenities, a decision was made to search for a new location for Arbor's Loan Servicing Operations. Arbor's options include splitting the Operations and/or moving out of Erie County to another state. After assessing all space availabilities in the 30,000SF range within a reasonable distance from the current Walden Avenue location, 500 Colvin Woods Parkway in Tonawanda, NY was selected. The new location, is directly off a major highway, I-290, which affords an opportunity for high visibility outdoor signage on the building and is within a reasonable distance from airport. It is a safe, secure building with the required generator and an open floor plan with natural light. The space includes an increase in the number of restrooms, fitness center, and proximity to restaurants and shopping. This location will provide Arbor with the opportunity to create a high-quality Class A office space which will assist in our efforts to recruit and retain talent.

**If the project occupant is currently located in Erie County and will be moving to a different municipality within Erie County, has the project occupant attempted to find a suitable location within the municipality in which it is currently located?**

Yes

**What factors have lead the project occupant to consider remaining or locating in Erie County?**

Ability to find upgraded space in Tonawanda with a generator and proximity to amenities to facilitate our future growth.

**If the current facility is to be abandoned, what is going to happen to the current facility that project occupant is located in?**

Our Lease will expire

**Please provide a list of properties considered, and the reason they were not adequate. (Some examples include: site not large enough, layout was not appropriate, did not have adequate utility service, etc.) Please include full address for locations.**

The Arbor team has had many conversations with our current landlord in addition to communicating with the Lancaster IDA on our space requirements. Our current landlord was unable to offer the upgraded space requirements. Although the landlord has brought available space to the table it was late in the process and the layout of the space is not conducive to Arbor's needs. The landlord was unable to match the existing deal. Arbor considered the following locations: 1. 4455 Genesee Street - Cheektowaga, NY location was considered a potential risk. The airport is across the street and in the event of a disaster at the airport the location could be impacted. 2. 2875 Union Road - Cheektowaga, NY has no generator. 3. 251 John James -Amherst, NY has no generator. 4. 61 John Muir -Amherst, NY has no generator. 5. 2410 North Forest - Amherst, NY was Arbor's #1 preferred location. It met all our requirements however the landlord felt our employee population was too dense for their building and did not want to move forward with a lease with Arbor. 6. 300 Corporate Parkway - Amherst, NY space became available very late into Arbor's negotiations at 500 Colvin Woods Parkway. The Landlord was unable to meet or exceed the offer.

## **Section IX: Senior Housing**

IDA tax incentives may be granted to projects under the Agency's Senior Citizen Rental Housing policy when the project consists of a multi-family housing structure where at least 90% of the units are (or are intended to be) rented to and occupied by a person who is 60 years of age or older.

**Are you applying for tax incentives under the Senior Rental Housing policy?**

No