# COUNTY OF SULLIVAN INDUSTRIAL DEVELOPMENT AGENCY

### 548 Broadway Monticello, New York 12701 845-428-7575

## **APPLICATION FOR FINANCIAL ASSISTANCE**

I. A. <u>APPL</u>	ICANT INFORMATION:	
Company Name:	International Contractors Corp.	
Address:	ess: P.O. Box 574, Neversink New York 12765	
Phone No.:	(845) 985-2070	
Telefax No.:	(845) 985-2071	
Email Address:	icccontractors@aol.com	
Fed Id. No.:		
Contact Person:	Mary Adriaans	
Principal Owners/Officers/Directors (list owners with 15% or more in equity holdings with percentage ownership):		
Principal Owners (	Shareholders/Members/Owners): Mary Adriaans	
Directors/Manager	'S: Mary Adriaans	
	Mary Adriaans	
Corporate Structure (attach schematic if Applicant is a subsidiary or otherwise affiliated with another entity)		
Form of Entity:		
× Corporation (Sub-s)		
Date of incorporation:  State of incorporation:  April 14, 1994  New York		
——— Partnership General □ or Limited □  Number of general partners		

If applicable, number of limited partners  Date of formation:  Jurisdiction formation:			
Limited Liab	oility Company/Partnership (number of members )		
Date of organization:  State of organization:			
Sole Propri	etorship		
If a foreign organiz York? Yes, <u>□</u>	ration, is the Applicant authorized to do business in the State of New No, $\square$ N/A, $\blacksquare$ (If so, please append Certificate of Authority.)		
B. <u>APPL</u>	ICANT INFORMATION:		
Company Name:	Jam Two, LLC		
Address:	P.O. Box 574, Neversink New York 12765		
Phone No.:	(845) 985-2070		
Telefax No.:	(845) 985-2071		
Email Address:	icccontractors@aol.com		
Fed Id. No.:	47-1952528		
Contact Person:	Mary Adriaans		
Principal Owners/Officers/Directors (list owners with 15% or more in equity holdings with percentage ownership):			
Principal Owners (	Shareholders/Members/Owners): Mary Adriaans		
Directors/Manager Officers:	TS: Mary Adriaans Mary Adriaans		
Corporate Structure (attach schematic if Applicant is a subsidiary or otherwise affiliated with another entity)			

Form of Entity:	
Corporation (Sub-s)	
Date of incorporation:  State of incorporation:	
Partnership General □ or Limited □ Number of general partners	
If applicable, number of limited partners  Date of formation:  Jurisdiction formation:	
x Limited Liability Company/Partnership (number of men	nbers 1 )
Date of organization:  State of organization:  August 27, 2014  New York	
Sole Proprietorship	
If a foreign organization, is the Applicant authorized to do bus York? Yes, □ No,□ N/A,■ (If so, please append Co	
APPLICANT'S COUNSEL	
Name: Jared K. Hart, Esq.	
Address: P.O. Box 192, 10 Horseshoe Lake Road, Kauneonga L	ake NY 12749
Phone No.: (845) 707-6748	
(94E) 44E CEEC	
Telefax No.: (045) 445-0556	
Email Address: jaredkhart@gmail.com	
Email Address: jaredkhart@gmail.com  II. REQUESTED FINANCIAL ASSISTANCE	
	Estimated Value
	\$TBD
II. REQUESTED FINANCIAL ASSISTANCE	A CONTRACTOR OF THE PROPERTY O

D.)	If the answer to either question B or C above is yes, you are required to indicate whether any of the following apply to the Project:			
	<ol> <li>Is the Project reasonable Applicant or such Proje If yes, please explain:</li> </ol>	ly necessary ct Occupant	to preserve the competitive position of the in its industry? Yes, $\Box$ ; No $\Box$	
	Occupant from removir	ng such othe	to discourage the Applicant or such Project r plant or facility to a location outside the 1. If yes, please explain:	
E.)	retail sales of goods or pro	ovide service	perty that will be primarily used in making as to customers who personally visit such tact the Agency for additional information.	
F.) Please provide a narrative of the Project and the purpose of the Project (new build, renovations, and/or all equipment purchases). Identify specific uses occurring within the Project. Describe any and all tenants and any/all end users. Describe the proposed acquisitions, construction or reconstruction and a description of the costs and expenditures expected. Attach additional sheets, if necessary.				
expansi	on and improvement of existing facility	for extrusion of m	etal roof panels and associated office space.	
G.) C	OSTS AND BENEFITS OF 1	THE PROJEC	ст	
	Costs = Finar	ncial Assistar	nce	
Estimated Sales Tax Exemption Estimated Mortgage Tax Exemption Estimated Property Tax Abatement Estimated Interest Savings IRB Issue		xemption atement	\$ 20,800 \$ 3,200 \$ TBD \$ 0	
	Benefits= Eco	onomic Deve	opment	
	Jobs created	1 FTE		
	Jobs retained	6 FTEs		
	Private funds invested	\$ 415,000		
Other Benefits		<b>\$</b> o		

Estimate how many construction result of this Project:	Estimate how many construction/permanent jobs will be created or retained as a result of this Project:			
Construction:	3			
Permanent:	1			
Retained (at current facility):	6			
,	0			
Project Costs (Estimates) Land and Existing Buildings Soft Costs (5%)	\$0			
Other	\$ 15,000			
Total	\$ 400,000			
Total	\$ 415,000			
estimate of the percentage of project of estimate of both the amount to be in borrowed to finance the Project.	sition and building construction or reconstruction, nots to be financed from private sector sources, an costs financed from public sector sources and an invested by the Applicant and the amount to be 2000. If no bank loan, the project will be self-funded. Other than IDA see the project.			
	above, please indicate the following: ne equivalent jobs that would be retained and that for financial assistance is granted.			
2) The projected timeframe for the	creation of new jobs.			
	benefit averages or ranges for categories of the created if the request for financial assistance is			
Roofing and sheet metal fabricators/ installers: 5	retained, 1 created. Average salary \$65,000.			
Administrative/ clerical staff: 1 retained. Average				
We offer health benefits and a 401(k).				

4) An estimate of the number of residents of the economic development region as established pursuant to section two hundred thirty of the Economic Development Law, in which the project is located that would fill such jobs. The labor market area defined by the agency (Mid-Hudson Economic Development Region)

# 1,426,946 (est. population of region age 18-64, per 2020 decennial census)

H.) State whether there is a likelihood that the project would not be undertaken but for the financial assistance provided by the Agency, or, if the project could be undertaken without financial assistance provided by the Agency, a statement indicating why the project should be undertaken by the Agency. IDA assistance is crucial to the

success of this project.

#### IV. REPRESENTATIONS BY THE APPLICANT

The Applicant understands and agrees with the Agency as follows:

- A) <u>Job Listings</u>. 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 (collectively with the DOL, the "JTPA Entities") of the service delivery area created by the federal job training partnership act (Public Law 97-300) ("JTPA") in which the Project is located.
- B) First Consideration for Employment. 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, where practicable, the Applicant will first consider persons eligible to participate in JTPA programs who shall be referred by the JTPA Entities for new employment opportunities created as a result of the Project.
- 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, in accordance with Section 874(8) of the General Municipal Law, 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.
- D) Annual Employment Reports. The Applicant understands and agrees that, if the

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 not misleading.

	APPLICANT:	International Contractors Corp.
	By NAME, TITLE:	Mary Adriaans, President
	Date:	7-1-25
	APPLICANT:	Jam Two, LLC
	By NAME, TITLE:	Mary Adriaans, President
	Date:	7-1-25
STATE OF NEW Y	,	
1. That I am (collectively,	Presedent	orn, deposes and says:  of Amtwall + Internation Control  I that I am duly authorized on behalf of the
That I have r     the best of m	ead the attached Appl	ication, I know the contents thereof, and that to ef, this Application and the contents of this complete.
	NAME:	Mars Janderst
day of July	irmed to me under pen ,20 <u>25</u> ry Public)	alties of perjury this

KAYLEE WAGNER
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01WA6403828
Qualified in Sullivan County
Commission Expires February 03, 2028

#### HOLD HARMLESS AGREEMENT

Applicant hereby releases the COUNTY OF SULLIVAN INDUSTRIAL DEVELOPMENT AGENCY and the members, officers, servants, agents and employees thereof ("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 causes of action and attorneys' fees and any other expenses incurred in defending any suits or actions 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 the 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 processing of the Application, including attorneys' fees, if any.

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APPLICANT:	international Contractors Corp.		
By NAME, TITLE:	Mary Adriaans, President		
Date:	7-1-25		
APPLICANT:	Jam Two, LLC  x Mary Jean Odriaan		
By NAME, TITLE:	Mary Adriaans, President		
Date:	7-1-25		
Sworn to before me this day of			
KAYLEE WAG NOTARY PUBLIC, STATE	NER OF NEW YORK		

Registration No. 01WA6403828
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