COUNTY OF FRANKLIN
INDUSTRIAL DEVELOPMENT AGENCY

355 West Main Street, Suite 428
Malone, New York 12953
(518) 483-9472
www.franklinida.org
admin@franklinida.org

APPLICATION

Legal Name: Bionique Testing Laboratories LLC

Street Address: 156 Fay Brook Drive

City: Saranac Lake State: NY Zip Code: 12983

Phone #: 518-891-2356 Email: gzamparo@bionique.com

If Applicant is represented by an Attorney, complete the following:

Name of Firm: Stafford & Owens

Name of Attorney: William Owens

Street Address: 1 Cumberland Ave

City: Plattsburgh State: NY Zip Code: 12901

Phone #: 518-561-4400 Email: wowens@staffordowens.com>

Name of Person(s) authorized to speak for Applicant with respect to this application:

Gladis Zamparo

IMPORTANT NOTICE: The answers to the questions contained in this application are necessary to determine your Company's eligibility for financing and other assistance from the County of Franklin Industrial Development Agency. These answers will also be used in the preparation of papers in this transaction. Accordingly, all questions should be answered accurately and completely by an officer or other employee of your Company who is thoroughly familiar with the business and affairs of your Company and who is also thoroughly familiar with the proposed project. This application is subject to acceptance by the Agency.

NOTE: PLEASE READ THE INSTRUCTIONS ON PAGE 2 BEFORE FILLING OUT THIS FORM.

INSTRUCTIONS

1. The Agency will not approve any application unless, in the judgment of the Agency, said application and the summary contains sufficient information upon which to base a decision whether to approve or tentatively approve an action.

2. Fill in all blanks, using "none" or "not applicable" or "N/A" where the question is not appropriate to the project which is the subject of this application (the "Project").

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 one (1) copy of this application to the Agency at the address indicated on the first page of this application, and one (1) electronic copy to admin@franklinida.org.

6. The Agency will not give final approval to this application until the Agency receives a completed environmental assessment form concerning the Project which is the subject of this application, or in the alternative, receives evidence satisfactory to the Agency and its counsel that the requirements of Article 8 of the Environmental Conservation Law, Chapter 43-B of the Consolidated Laws of New York, as amended and the regulations adopted pursuant thereto by the Department of Environmental Conservation of the State of New York relating to the Project have been complied with.

7. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the Agency (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 or information, the nature of which is such that if disclosed to the public or otherwise widely disseminated would cause substantial injury to the Applicant's competitive position, the Applicant may identify such elements in writing and request that such elements be kept confidential in accordance with Article 6 of the Public Officers Law.

8. The Applicant will be required to pay all actual costs incurred in connection with this application and the Project contemplated herein to the Agency (to the extent such expenses are not paid out of the proceeds of the Agency's bonds issued to finance the project). The Applicant will also be expected to pay all costs incurred by local counsel and/or bond/special counsel to the Agency. The costs incurred by the Agency, including the Agency's local counsel and/or bond/special counsel, may be considered as a part of the project and included as a part of the resultant bond issue.

9. The Agency has established a non-refundable application fee of $2,500.00 and a $500 processing fee payable to the Agency at the time the application is submitted. The $2,500.00 fee will be credited towards the total fee at closing. THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS ACCOMPANIED BY THE FEES.

10. The Agency has established a project fee for each project in which the Agency participates. UNLESS THE AGENCY AGREES IN WRITING TO THE CONTRARY, THIS PROJECT FEE IS REQUIRED TO BE PAID BY THE APPLICANT AT OR PRIOR TO THE GRANTING OF ANY FINANCIAL ASSISTANCE BY THE AGENCY.

AGENCY FEE SCHEDULE INFORMATION

Application Fee:

The Agency has established a non-refundable application fee of $2,500.00 and a $500 processing fee payable to the Agency at the time the application is submitted. The $2,500.00 fee will be credited towards the total fee at closing.

Agency Fees:

1) Bond Transactions: 1% of bond amount
2) Sale Leaseback Transactions: 1% of Total Project Cost
3) Refinance of existing IDA bonds: .50%
4) Sales Tax and/or Mortgage Tax Exemption: 10% of Benefit

Agency Local Counsel, and/or Bond/Special Counsel Fees:

In connection with the Project there will be fees of the Agency's Local Counsel, and/or Bond/Special Counsel. The amount of such fees is based on, among other things, the structure and size of the financing. An estimate of such fees will be provided shortly after the Applicant delivers the Application to the Agency. Please note that legal fees will be due and payable even if the project does not close.

SUMMARY OF PROJECT

Applicant: Bionique Testing Laboratories LLC

Contact Person: Gladis Zamparo

Phone Number: 518 891 2356 Email: gzamparo@bionique.com

Occupant: NA

Project Location: 156 Fay Brook Drive, Saranac Lake, NY 12983

Approximate Size of Project Site: 5 acre lot

Description of Project: Bionique Testing Laboratories is looking to expand its current footprint in the Harrietstown Business Park, in Franklin County by adding a new wing of approx. 35,000 SQF to its current building (approx. 10,000 SQF).
With the recent acquisition from Asahi Kasei, a Japanese listed conglomerate, Bionique has entered a phase of aggressive growth. To develop the services our growing customer base asks, Bionique needs new staff and new laboratories. It is expected that the new expansion in services and laboratories

Type of Project:
- ☐ Manufacturing
- ☐ Warehouse/Distribution
- ☐ Commercial
- ☐ Not-For-Profit
- ☑ Other-Specify: Services

Employment Impact:
- ☑ Existing Jobs: 47
- ☑ New Jobs: 5

Project Cost: $16,800,000

Type of Financing: ☐ Tax-Exempt ☐ Taxable ☑ PILOT/Straight Lease

Amount of Bonds Requested: $_____

Estimated Value of Tax-Exemptions:

N.Y.S. Sales and Compensating Use Tax:	$425,000
Mortgage Recording Taxes:	$NA
Real Property Tax Exemptions:	$_____
Other (please specify):	$_____

Provide estimates for the following:

Number of Full Time Employees at the Project Site before IDA Status:	40
Estimate of Jobs to be Created:	5
Estimate of Jobs to be Retained:	40
Average Estimated Annual Salary of Jobs to be Created:	$50,000
Annualized Salary Range of Jobs to be Created:	$50,000
Estimated Average Annual Salary of Jobs to be Retained:	$71,000

INFORMATION CONCERNING THE PROPOSED OCCUPANT OF THE PROJECT (HEREINAFTER, THE "COMPANY")

Legal Company Name: Bionique Testing Laboratories LLC Year Formed: 1990

Physical Address: 156 Fay Brook Drive, Saranac Lake, NY

Mailing Address: same as above

Federal Tax ID: 14-1734833 SIC Code: 541380 (NAICS code)

☐ Corporation
Country Incorporated: _____
State Incorporated: _____
Type: _____
Authorized to do business in NY? ☐ Yes ☐ No

☐ Partnership
Type: _____
General Partners: _____
Limited Partners: _____

☑ Limited Liability Company
Date Created: 10/05/2021

☐ Sole Proprietorship

If the Company differs from the Applicant, give details of relationship: NA

Is the Company a subsidiary or direct or indirect affiliate of any other organization(s)? If so, indicate name of related organization(s) and relationship: Yes, affiliate of Asahi Kasei Bioprocess Holdings, In

Management of Company: List all owners, officers, members, directors and partners (complete all columns for each person):

Name	Business Address	Office Held	Other Principal Business
Andrew Bailey	Austria, Vienna, ViruSure GmbH	Manager of the	CEO of ViruSure
Gladis Zamparo	156 Fay Brook Drive, Saranac Lake, NY 12983	CEO	NA
Jill A. Mariano, MD	156 Fay Brook Drive, Saranac Lake, NY 12983	CSO	NA

Is the Company or management of the Company now a plaintiff or a defendant in any civil or criminal litigation? ☐ Yes ☑ No

Has any person listed above ever been convicted of a criminal offense (other than a minor traffic violation)? ☐ Yes ☑ No

Has any person listed above or any concern with whom such person has been connected ever been in receivership or been adjudicated a bankrupt? ☐ Yes ☑ No

If the answer to any of these questions is yes, please furnish details in a separate attachment.

Principal Owners of Company: Is Company publicly held? ☑ Yes ☐ No
If yes, list exchanges where stock traded: Japan, Tokyo Stock Exchange

If no, list all stockholders having a 5% or more interest in the Company:

Name	Business Address	Position	Percentage of Ownership
See attached			

Company's Principal Bank(s) of account: Community Bank NA Address: 588 Lake Flower Ave

DATA REGARDING PROPOSED PROJECT

Summary: (Please provide a brief narrative description of the Project.)

The project entails construction of an approx. 35, 000 SQF building over two floors with relevant parking lot and onsite utilities. The project includes mechanical and certain scientific equipment, furniture, IT installation and construction and owner project management oversight.

Location of Proposed Project:

Street Address: 156 Fay Brook Drive
City of: Saranac Lake, NY 12983
Town of: Harrietstown
Village of:
County of: Franklin County

Project Site:

Approximate size (in acres or square feet) of Project site: 5 acre
Is a map, survey, or sketch of the project site attached? ☑ Yes ☐ No
Are there existing buildings on project site? ☑ Yes ☐ No
If yes, indicate number and approximate size (in square feet) of each existing building:
1 x ~ 9,900 SQF
Are existing buildings in operation? ☑ Yes ☐ No
If yes, describe present use:
Analytical Testing Laboratory
Are existing buildings abandoned? ☐ Yes ☑ No
About to be abandoned? ☐ Yes ☑ No
If yes, describe: _____

Attach photograph(s) of existing buildings

Utilities serving project site:

Water-Municipal: No
Other (describe): Wells
Sewer-Municipal: No
Other (describe): Leech field
Electric-Utility: Yes
Other (describe): _____
Heat-Utility: No
Other (describe): _____

Present legal owner of project site: Bionique Testing Laboratories LLC

If the Company owns project site, indicate date of purchase: May 7, 1999
Purchase price: $_____

If Company does not own the Project site, does Company have option signed with owner to purchase the Project site? ❑ Yes ❑ No
If yes, indicate date option signed with owner: _____ Date option expires: _____.

If the Company does not own the project site, is there a relationship legally or by common control between the Company and the present owners of the project site? ❑ Yes ❑ No
If yes, describe: _____

Zoning District in which the project site is located: I1

Are there any variances or special permits affecting the site? ☑ Yes ❑ No
If yes, list below and attach copies of all such variances or special permits:

APA Approval. Site Plan approval and a Building Permit are required. We do not need and are not

Buildings:

Does part of the project consist of a new building(s)? ☑ Yes ❑ No
If yes, indicate number and size of new buildings: 1 x 35,000 SQF

Does part of the project consist of additions and/or renovations to the existing building(s)? ☒ Yes ❑ No
If yes, indicate the building(s) to be expanded or renovated, the size of any expansions and the nature of expansion and/or renovation:
Existing building subject to partial renovation is 9,900 SQF

Describe the principal uses to be made by the Company of the building(s) to be acquired, constructed, or expanded: Expanding analytical testing services.

Description of the Equipment:

Does a part of the Project consist of the acquisition or installation of machinery, equipment or other personal property (the "Equipment")? ☑ Yes ❑ No
If yes, describe the Equipment: Mechanical equipment to support analytical laboratories as well as scienti

With respect to the Equipment to be acquired, will any of the Equipment be Equipment which has previously been used? ❑ Yes ☑ No
If yes, please provide detail: _____

Describe the principal uses to be made by the Company of the Equipment to be acquired or installed:

Project Use:

1) What are the principal products to be produced at the Project? expect limited production of referer

2) What are the principal activities to be conducted at the Project? analytical services

3) Does the Project include facilities or property that are primarily used in making retail sales of goods or services to customers who personally visit such facilities? ☐ Yes ☑ No
If yes, please provide detail: _____

4) If the answer to question 3 is yes, what percentage of the cost of the Project will be expended on such facilities or property primarily used in making retail sales of goods or services to customers who personally visit the Project? _____%

5) If the answer to question 3 is yes, and the answer to question 4 is more than 33.33%, indicate whether any of the following apply to the Project:

   a. Will the Project be operated by a not-for-profit corporation? ☐ Yes ☐ No
   If yes, please explain: _____

   b. Is the Project likely to attract a significant number of visitors from outside the economic development region in which the Project will be located? ☐ Yes ☐ No
   If yes, please explain: _____

   c. Would the Project occupant, but for the contemplated financial assistance from the Agency, locate the related jobs outside the State of New York? ☐ Yes ☐ No
   If yes, please explain: _____

   d. Is the predominant purpose of the Project to make available goods or services which would not, but for the Project, be reasonably accessible to the residents of the city, town or village within which the Project will be located, because of a lack of reasonably accessible retail trade facilities offering such goods or services? ☐ Yes ☐ No
   If yes, please provide detail: _____

   e. Will the Project be located in one of the following: (i) an area designated as an economic development zone pursuant to Article 18-B of the General Municipal Law; or (ii) a census tract or block numbering area (or census tract or block numbering area contiguous thereto) which, according to the most recent census data, has (x) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of households receiving public assistance, and (y) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates? ☐ Yes ☐ No
   If yes, please explain: _____

6) If the answers to any of subdivisions c. through e. of question 5 is yes, will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York? ☐ Yes ☐ No
If yes, please explain: _____

7) Will the completion of the Project result in the removal of a plant or facility of the Company or another proposed occupant of the Project (a "Project Occupant") from one area of the State of New York to another area of the State of New York? ☐ Yes ☑ No
If yes, please explain: _____

8) Will the completion of the Project result in the abandonment of one or more plants or facilities of the Company located in the State of New York? ❑ Yes ☑ No
If yes, please provide detail: _____

9) If the answer to either question 7 or question 8 is yes, indicate whether any of the following apply to the Project:

Is the Project reasonably necessary to preserve the competitive position of the Company or such Project Occupant in its industry? ❑ Yes ❑ No
If yes, please provide detail: _____

Is the Project reasonably necessary to discourage the Company or such Project Occupant from removing such other plant or facility to a location outside the State of New York? ❑ Yes ❑ No
If yes, please provide detail: _____

10) Will the Project be owned by a not-for-profit corporation? ❑ Yes ☑ No
If yes, please provide detail: _____

11) Will the Project be sold or leased to a municipality? ❑ Yes ☑ No
If yes, please provide detail: _____

Other Involved Agencies:

Please indicate all other local agencies, boards, authorities, districts, commissions or governing bodies (including any city, county and other political subdivision of the State of New York and all state departments, agencies, boards, public benefit corporations, public authorities or commissions) involved in approving or funding or directly undertaking action with respect to the Project. For example, do you need a municipal building permit to undertake the Project? Do you need a zoning approval to undertake the Project? If so, you would list the appropriate municipal building department or planning or zoning commission which would give said approvals.

In addition to APA approval, also Harrietstown Planning Board, NYS DEC, NYS DOH, APA, and FAA are other agencies that we are seeking approval from. Consolidated Funding Application has been submitted to Empire State Development.

Describe the nature of the involvement of the federal, state, or local agencies described above:

Construction Status:

Has construction work on this project begun? ❑ Yes ☑ No
If yes, please discuss in detail the approximate extent of construction and the extent of completion. Indicate in your answer whether such specific steps have been completed as site clearance and preparation; completion of foundations; installation of footings; etc.:

Please indicate amount of funds expended on this Project by the Company in the past three (3) years and the purposes of such expenditures:

Purpose	**Amount**
Design fees	~ $500,000

Please indicate the date the Applicant estimates the Project will be completed: early 2025

Method of Construction After Agency Approval:

1. If the Agency approves the project which is the subject of this application, there are two methods that may be used to construct the project. The Applicant can construct the project privately and sell the project to the Agency upon completion. Alternatively, the Applicant can request to be appointed as "Agent" of the Agency, in which case certain laws applicable to public construction may apply to the project. Does the Applicant wish to be designated as "Agent" of the Agency for purposes of constructing the project? ☑ Yes ☐ No

2. If the answer to question 1 is yes, does the Applicant desire such "Agent" status prior to the closing date of the financing? ☑ Yes ☐ No

INFORMATION CONCERNING LEASES OR SUBLEASES OF THE PROJECT

(Complete the following section if the Company intends to lease or sublease any portion of the project)

Does the Company intend to lease or sublease more than 10% (by area or fair market value) of the Project?
☐ Yes ☑ No
If yes, please complete the following for each existing or proposed tenant or subtenant:

Sublessee name: _____
Present Address: _____
Federal Tax ID: _____ Sublessee is: ☐ Corporation
Relationship to Company: _____ ☐ Limited Liability Corporation
Percentage of Project to be leased/subleased: _____ ☐ Partnership
☐ Sole Proprietorship

Use of Project intended by Sublessee: _____
Date of lease/sublease to Sublessee: _____
Term of lease/sublease to Sublessee: _____
Will any portion of the space leased by this sublessee be primarily used in making retail sales of goods or services to customers who personally visit the Project? ☐ Yes ☐ No
If yes, please provide details on a separate attachment, as well as answers to the following questions:

What percentage of the cost of the Project will be expended on such facilities or property primarily used in making retail sales of goods or services to customers who personally visit the Project? 0 %

If the answer to the above question is more than 33.33%, indicate whether any of the following apply to the Project:

Will the Project be operated by a not-for-profit corporation? ☐ Yes ☐ No
If yes, please explain: _____

Is the Project likely to attract a significant number of visitors from outside the economic development region in which the Project will be located? ❑ Yes ❑ No
If yes, please explain: _____

Would the Project occupant, but for the contemplated financial assistance from the Agency, locate the related jobs outside the State of New York? ❑ Yes ❑ No
If yes, please explain: _____

Is the predominant purpose of the Project to make available goods or services which would not, but for the Project, be reasonably accessible to the residents of the city, town or village within which the Project will be located, because of a lack of reasonably accessible retail trade facilities offering such goods or services? ❑ Yes ❑ No
If yes, please provide detail: _____

Will the Project be located in one of the following: (i) an area designated as an economic development zone pursuant to Article 18-B of the General Municipal Law; or (ii) a census tract or block numbering area (or census tract or block numbering area contiguous thereto) which, according to the most recent census data, has (x) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of households receiving public assistance, and (y) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates?
❑ Yes ❑ No
If yes, please explain: _____

If the answers to any of the three questions above is yes, will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York? ❑ Yes ❑ No
If yes, please explain: _____

What percentage of the space intended to be leased or subleased is now subject to a binding written lease or sublease? _____

EMPLOYMENT IMPACT

Indicate the number of people presently employed at the Project site and the **additional** number that will be employed at the Project site at the end of the first and second years after the Project has been completed, using the tables below for (1) employees of the Applicant, (2) independent contractors, and (3) employees of independent contractors. (Do not include construction workers). Also indicate below the number of workers employed at the Project site representing newly created positions as opposed to positions relocated from other project sites of the Applicant. Such information regarding relocated positions should also indicate whether such positions are relocated from other project sites financed by obligations previously issued by the Agency.

TYPE OF EMPLOYMENT
EMPLOYEES OF APPLICANT

	PROFESSIONAL OR MANAGERIAL	SKILLED	SEMI-SKILLED	UN-SKILLED	TOTALS
PRESENT					
- Full Time	15 (+6 additional jobs i	25 (+1 add			40 (+7 add
- Part Time					
- Seasonal					
FIRST YEAR					
- Full Time	16	26			42
- Part Time					
- Seasonal					
SECOND YEAR					
- Full Time	17	28			45
- Part Time					
- Seasonal					

TYPE OF EMPLOYMENT
INDEPENDENT CONTRACTORS

	PROFESSIONAL OR MANAGERIAL	SKILLED	SEMI-SKILLED	UN-SKILLED	TOTALS
PRESENT					
- Full Time					
- Part Time					
- Seasonal					
FIRST YEAR					
- Full Time					

- Part Time					
- Seasonal					
SECOND YEAR					
- Full Time					
- Part Time					
- Seasonal					

TYPE OF EMPLOYMENT **EMPLOYEES OF INDEPENDENT CONTRACTORS**					
	PROFESSIONAL OR MANAGERIAL	**SKILLED**	**SEMI-SKILLED**	**UN-SKILLED**	**TOTALS**
PRESENT					
- Full Time					
- Part Time					
- Seasonal					
FIRST YEAR					
- Full Time					
- Part Time					
- Seasonal					
SECOND YEAR					
- Full Time					
- Part Time					
- Seasonal					

Indicate below (1) the estimated salary and fringe benefit averages or ranges and (2) the estimated number of employees residing in the North Country Economic Development Region for all the jobs at the Project site, both retained and created, listed in the tables described in subsection A above for each of the categories of positions listed in the chart below.

RELATED EMPLOYMENT INFORMATION				
	PROFESSIONAL OR MANAGERIAL	**SKILLED**	**SEMI-SKILLED**	**UN-SKILLED**
Estimated Salary and Fringe Benefit Averages of Ranges		$50,000 gross salar		
Estimated Number of Employees Residing in the North Country Economic Development Region[1]		45 (+7 additional jobs in other SL location)		

[1]The North Country Economic Development Region consists of the following counties: Clinton, Essex, Franklin, Hamilton, Jefferson, Lewis and St. Lawrence

Please describe the projected timeframe for the creation of any new jobs with respect to the undertaking of the Project:

5 jobs within 5 years from completion.

Please prepare a separate attachment describing in detail the types of employment at the Project site. Such attachment should describe the activities or work performed for each type of employment.

PROJECT COST AND FINANCING SOURCES

Anticipated Project Costs. State the costs reasonably necessary for the acquisition of the Project site, the construction of the proposed buildings and the acquisition and installation of any machinery and equipment necessary or convenient in connection therewith, and including any utilities, access roads or appurtenant facilities, using the following categories:

Description of Cost	**Amount**
Land	$ _____
Buildings	$ _____
Machinery and equipment costs	$ _____
Utilities, roads and appurtenant costs	$ _____
Architects and engineering fees	$ _____
Costs of financing	$ _____
Construction loan fees and interest (if applicable)	$ _____
Other (specify)	
_____	$ _____
_____	$ _____
_____	$ _____
TOTAL PROJECT COSTS	$ See attached

Anticipated Project Financing Sources. State the sources reasonably necessary for the financing of the Project site, the construction of the proposed buildings and the acquisition and installation of any machinery and equipment necessary or convenient in connection therewith, and including any utilities, access roads or appurtenant facilities, using the following categories:

Description of Sources	Amount
Private Sector Financing	$ 13,700,000
Public Sector	
Federal Programs	$
State Programs	$ 3,175,000
Local Programs	$ 425,000
Applicant Equity	$
Other (specify, e.g., tax credits)	
	$
	$
	$
TOTAL AMOUNT OF PROJECT FINANCING SOURCES	$ 17,300,000

Have any of the above expenditures already been made by Applicant?

☑ Yes ☐ No

If yes, indicate particulars.

~ $500,000 in design fees

Amount of financing requested: $_____ Maturity requested: _____years

Has a commitment for financing been received as of this application date, and if so, from whom?
☐ Yes ☐ No Institution Name: _____

Provide name, telephone number and email address of the person we may contact.
Name: _____ Phone: _____
Email: _____

The percentage of Project costs to be financed from public sector sources is estimated to equal the following: _____20_____%

The total amount estimated to be borrowed to finance the Project is equal to the following:
$ _____0_____

BENEFITS EXPECTED FROM THE AGENCY

Financing

1) Is the Applicant requesting that the Agency issue bonds to assist in financing the project?
   ❑ Yes ☑ No
   If yes, indicate: Amount of financing requested: $_____
   Maturity requested: _____years

2) If the answer to question 1 is yes, is the interest on such bonds intended to be exempt from federal income taxation? ❑ Yes ❑ No

3) If the answer to question 2 is yes, will any portion of the Project be used for any of the following purposes:

retail food and beverage services:	❑ Yes ❑ No
automobile sales or service:	❑ Yes ❑ No
recreation or entertainment:	❑ Yes ❑ No
golf course:	❑ Yes ❑ No
country club:	❑ Yes ❑ No
massage parlor:	❑ Yes ❑ No
tennis club:	❑ Yes ❑ No
skating facility (including roller skating, skateboard and ice skating):	❑ Yes ❑ No
racquet sports facility (including handball and racquetball court):	❑ Yes ❑ No
hot tub facility:	❑ Yes ❑ No
suntan facility:	❑ Yes ❑ No
racetrack:	❑ Yes ❑ No

4) If the answer to any of the above questions contained in question 3 is yes, please furnish details on a separate attachment.

Tax Benefits

Is the Applicant requesting any real property tax exemption in connection with the Project that would not be available to a project that did not involve the Agency? ☑ Yes ❑ No

If yes, is the real property tax exemption being sought consistent with the Agency's Uniform Tax Exemption Policy? ❑ Yes ❑ No

Is the Applicant expecting that the financing of the Project will be secured by one or more mortgages?
❑ Yes ❑ No

If yes, what is the approximate amount of financing to be secured? $_____

Is the Applicant expecting to be appointed agent of the Agency for purposes of avoiding payment of N.Y.S. Sales Tax or Compensating Use Tax? ☑ Yes ❑ No
If yes, what is the approximate amount of purchases which the Applicant expects to be exempt from the N.Y.S. Sales and Compensating Use Taxes? $5,000,000

What is the estimated value of each type of tax-exemption being sought in connection with the Project? Please detail the type of tax-exemption and value of the exemption.

N.Y.S. Sales and Compensating Use Taxes:	$425,000
Mortgage Recording Taxes:	$_____
Real Property Tax Exemptions:	$_____

Other (please specify):

_____ $_____

_____ $_____

Are any of the tax-exemptions being sought in connection with the Project inconsistent with the Agency's Uniform Tax Exemption Policy? ❑ Yes ☑ No

If yes, please explain: _____

Project Cost/Benefit Information. Complete the attached Cost/Benefit Analysis so that the Agency can perform a cost/benefit analysis of undertaking the Project. Such information should consist of a list and detailed description of the benefits of the Agency undertaking the Project (e.g., number of jobs created, types of jobs created, economic development in the area, etc.). Such information should also consist of a list and detailed description of the costs of the Agency undertaking the Project (e.g., tax revenues lost, buildings abandoned, etc.).

Representations by the Applicant. The Applicant understands and agrees with the Agency as follows:

Job 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 "DOC") and with the administrative entity (collectively with the DOC, the "JTPA Entities") of the service delivery area created by the federal job training partnership act (Public Law 97-300) ("JTPA"), as replaced by the Workforce Investment Act of 1998 (Public Law 105-220), in which the Project is located.

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.

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.

Annual Employment Reports. 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 people employed at the Project site, including (1) the NYS-45 – Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Return – for the quarter ending December 31 (the "NYS-45"), and (2) the US Dept. of Labor BLS 3020 Multiple Worksite report if applicable.

Uniform Agency Project Agreement. The Applicant agrees to enter into a project benefits agreement with the Agency where the Applicant agrees that (1) the amount of Financial Assistance to be received shall be contingent upon, and shall bear a direct relationship to the success or lack of success of such project in delivering certain described public benefits (the "Public Benefits") and (2) the Agency will be entitled to recapture some or all of the Financial Assistance granted to the Applicant if the project is unsuccessful in whole or in part in delivering the promised Public Benefits.

Representation of Financial Information. Neither this Application nor any other agreement, document, certificate, project financials, or written statement furnished to the Agency by or on behalf of the Applicant

in connection with the project contemplated by this Application contains any untrue statement of a material fact or omits to state a material fact necessary in order to make the statements contained herein or therein not misleading. There is no fact within the special knowledge of any of the officers of the Applicant which has not been disclosed herein or in writing by them to the Agency and which materially adversely affects or in the future in their opinion may, insofar as they can now reasonably foresee, materially adversely affect the business, properties, assets or condition, financial or otherwise, of the Applicant.

Agency Financial Assistance Required for Project. The Project would not be undertaken but for the Financial Assistance provided by the Agency or, if the Project could be undertaken without the Financial Assistance provided by the Agency, then the Project should be undertaken by the Agency for the following reasons:

The financial assistance required is $425,000 in Sales tax exemption and $2,000,000 in Real Property Tax exemption over 20 years. If the Agency did not provide assistance, the project return on investment would become non-competitive compared to other out of State locations that provide easy access to city water, sewage and other utilities and the internal return on

Compliance with Article 18-A of the General Municipal Law: The Project, as of the date of this Application, is in substantial compliance with all provisions of article 18-A of the General Municipal Law including, but not limited to, the provisions of Section 859-a and subdivision one of Section 862; and the provisions of subdivision one of Section 862 of the General Municipal Law will not be violated if Financial Assistance is provided for the Project.

Compliance with Federal, State, and Local Laws. The Applicant is in substantial compliance with applicable local, state, and federal tax, worker protection, and environmental laws, rules, and regulations.

False or Misleading Information. The Applicant understands that the submission of any knowingly false or knowingly misleading information may lead to the immediate termination of 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.

Absence of Conflicts of Interest. The Applicant acknowledges that the members, officers and employees of the Agency are listed on the Agency's website. 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:

Additional Information. Additional information regarding the requirements noted in this Application and other requirements of the Agency are included in the Agency's Policies which can be accessed at http://www.franklinida.org/.

I affirm under penalty of perjury that all statements made on this application are true, accurate and complete to the best of my knowledge.

Applicant: BIONIQUE TESTING LABORATORIES

Signed By: [signature]

Print Name &Title: GLADIS ZAMPARO / CEO

NOTE: APPLICANT MUST ALSO COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 20 THROUGH 23 HEREOF BEFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 24.

FOR AGENCY USE ONLY

1. Project Number	
2. Date application Received by Agency	
3. Date application referred to attorney for review	
4. Date copy of application mailed to members	
5. Date notice of Agency meeting on application posted	
6. Date notice of Agency meeting on application mailed	
7. Date of Agency meeting on application	
8. Date Agency conditionally approved application	
9. Date scheduled for public hearing	
10. Date of final approval of application	

VERIFICATION - CORPORATION

STATE OF _____)
) SS.:
COUNTY OF _____)

_____deposes and says that (s)he is the _____
(Name of chief executive of Applicant) ***(Title)***

of _____,
(Company Name)

the corporation named in the attached application; that (s)he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of her/his knowledge. Deponent further says that the reason this verification is made by the deponent and not by said Company is because the said Company is a corporation. The grounds of deponent's belief relative to all matters in the said application which are not stated upon her/his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of her/his duties as an officer of and from the books and papers of said corporation.

_____
(Officer of Applicant)

Sworn to before me this

_____day of _____, 20____

_____
(Notary Public)

VERIFICATION – SOLE PROPRIETOR

STATE OF _____)
) SS.:
COUNTY OF _____)

_____, deposes and says
(Name of Individual)

that (s)he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of her/his knowledge. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application.

_____

Sworn to before me this

_____day of _____, 20____

_____
(Notary Public)

VERIFICATION – PARTNERSHIP

STATE OF _____)
) SS.:
COUNTY OF _____)

_____, deposes and says
(Name of Individual)

that (s)he is one of the members of the firm of _____,
(Partnership Name)

the partnership named in the attached application; that (s)he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of her/his knowledge. The grounds of deponent's belief relative to all matters in the said application which are not stated upon her/his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of her/his duties as a member of and from the books and papers of said partnership.

_____

Sworn to before me this
_____day of _____, 20____

_____
(Notary Public)

VERIFICATION – LIMITED LIABILITY COMPANY

STATE OF Vienna – AUSTRIA)

) SS.:

COUNTY OF Vienna – AUSTRIA

Andrew Bailey, deposes and says
(Name of Individual)

that (s)he is one of the members of the firm of Bionique Testing Laboratories LLC,
(Limited Liability Company)

the limited liability Company named in the attached application; that (s)he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of her/his knowledge. The grounds of deponent's belief relative to all matters in the said application which are not stated upon her/his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of her/his duties as a member of and from the books and papers of said limited liability Company.

Sworn to before me this
27 day of OCTOBER, 2023

(Notary Public)

NOTE: THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 24 IS SIGNED BY THE APPLICANT.

B.R.Z.: 1616/2023

Die Echtheit der persönlichen Unterschrift von----------
Herrn Andrew Colin BAILEY, geboren am 17.06.1960----------
(siebzehnten Juni neunzehnhundertsechzig), A-1220 Wien,---
Kalmusweg 39/3,----------
wird hiemit beglaubigt.----------

Weiters bestätige ich, dass die Partei erklärt hat, den Inhalt der Urkunde zu kennen und deren Unterfertigung frei von Zwang erfolgt ist.----------

Wien, am 27.10.2023 (siebenundzwanzigsten Oktober zweitausenddreiundzwanzig)----------

Certification Register Number: 1616/2023

The signature of **Mr. Andrew Colin BAILEY**, born on---------
17.06.1960 (seventeenth day of June nineteen hundred and sixty), residing at A-1220 Vienna, Kalmusweg 39/3,--------
is genuine and authentic. ----------

Furthermore, I certify that the party has verified to have knowledge of the content of the document and to sign it free from compulsion. ----------

Given at Vienna this 27.10.2023 (twenty-seventh day of October two thousand and twenty-three)----------

Legalisierungsgebühr von € 14,30 entrichtet
öff. Notar Dr. Rainer Dürr
Wien-Donaustadt V

Dr. Rainer DÜRR ÖFFENTLICHER NOTAR Wien-Donaustadt, Wien 3 REPUBLIK ÖSTERREICH

Dr. Christopher Cach
Substitut des öffentl.Notars
Dr. Rainer Dürr
Wien-Donaustadt V

1220 Wien, Donaustadtstraße 1 · Tel.: +43/1/203 35 05 · Fax: DW 14 · E-Mail: office@notare.at · www.notare.at
DER NOTAR
KAINDL, DÜRR, SCHULLER-KÖHLER, ANTENREITER & PARTNER

Dr. Rainer DÜ
ÖFFENTLICHER N
Wien
UBLIK ÖSTE

HOLD HARMLESS AGREEMENT

Applicant hereby releases County of Franklin Industrial Development Agency and the members, officers, servants, agents and employees thereof (hereinafter collectively referred to as 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 (i) 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 tax exemptions and other assistance requested therein are favorably acted upon by the Agency, (ii) the Agency's acquisition, construction and/or installation of the Project described therein; and (iii) 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 respect to the Project, then, and in that event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all actual costs incurred by the Agency in the processing of the Application, including attorneys' fees, if any.

Applicant: BIONIQUE TESTING LABORATORIES

Signed By: [signature]

Print Name & Title: GLADIS ZAMPARO / CEO

Sworn to before me this
5 day of OCTOBER, 2023

[signature]
(Notary Public)

CAL D RODGERS
Notary Public - State of New York
NO. 01RO6429352
Qualified in New York County
My Commission Expires Feb 14, 2026

TO: Project Applicants
FROM: County of Franklin Industrial Development Agency
SUBJECT: **COST/BENEFIT ANALYSIS**

In order for the County of Franklin Industrial Development Agency (the "Agency") to prepare a Cost/Benefit Analysis for a proposed project (the "Project"), the Applicant must answer the questions contained in this Project Questionnaire (the "Questionnaire") and complete the attached Schedules. This Questionnaire and the attached Schedule will provide information regarding various aspects of the Project, and the costs and benefits associated therewith.

This Questionnaire must be completed before we can finalize the Cost/Benefit Analysis, please complete this Questionnaire and forward it to us at your earliest convenience.

PROJECT QUESTIONNAIRE

1. Name of Project Beneficiary ("Company"):	Bionique Testing Laboratories
2. Brief Identification of the Project:	35,000 SQF expansion
3. Estimated Amount of Project Benefits Sought:	
A. Amount of Bonds Sought:	$ $105,000
B. Value of Sales Tax Exemption Sought	$ $425,000
C. Value of Real Property Tax Exemption Sought	$ $2,000,000
D. Value of Mortgage Recording Tax Exemption Sought	$
4. Likelihood of accomplishing the Project in a timely fashion:	95%

PROJECTED PROJECT INVESTMENT

A. **Land-Related Costs**	
1. Land acquisition	$ 0
2. Site preparation	$ 502,370
3. Landscaping	$ NA
4. Utilities and infrastructure development	$ NA
5. Access roads and parking development	$ NA
6. Other land-related costs (describe)	$ 520,600
Includes items 3 to 5 for which breakdown is not available at this time	
B. **Building-Related Costs**	
1. Acquisition of existing structures	$ 0
2. Renovation of existing structures	$ NA
3. New construction costs	$ 7,310,200
4. Electrical systems	$ 924,000
5. Heating, ventilation and air conditioning	$ 2,000,000
6. Plumbing	$ 500,000
7. Other building-related costs (describe)	$ 627,444
Construction contingency	
C. **Machinery and Equipment Costs**	
1. Production and process equipment	$ 1,000,000
2. Packaging equipment	$ NA
3. Warehousing equipment	$ NA
4. Installation costs for various equipment	$ NA
5. Other equipment-related costs (describe)	$ 280,000
Equipment Validation and above items for which breakdown is not a	

D.	**Furniture and Fixture Costs**	
1.	Office furniture	$ 694,000
2.	Office equipment	$ NA
3.	Computers	$ NA
4.	Other furniture-related costs (describe)	$ 580,000
IT/Network/Security and items above for which detailed breakdown is		
E.	**Working Capital Costs**	
1.	Operation costs	$ NA
2.	Production costs	$ NA
3.	Raw materials	$ NA
4.	Debt service	$ NA
5.	Relocation costs	$ NA
6.	Skills training	$ NA
7.	Other working capital-related costs (describe)	$ 140,000
All items above for which detailed breakdown is not available		
F.	**Professional Service Costs**	
1.	Architecture and engineering	$ 1,800,000
2.	Accounting/legal	$ NA
3.	Other service-related costs (describe)	$ 420,000
G.	**Other Costs**	
1.	_____	$ _____
2.	_____	$ _____
H.	**Summary of Expenditures**	
1.	Total Land-Related Costs	$ 1,022,970
2.	Total Building-Related Costs	$ 11,361,644
3.	Total Machinery and Equipment Costs	$ 1,280,000
4.	Total Furniture and Fixture Costs	$ 1,274,000
5.	Total Working Capital Costs	$ 140,000
6.	Total Professional Service Costs	$ 2,220,000
7.	Total Other Costs	$ _____

PROJECTED PROFIT

Please provide projected profit as defined by earnings after income tax but before depreciation and amortization:

Year	Without IDA Benefits	With IDA Benefits
1	$	$ -268,000
2	$	$ -440,000
3	$	$ -100,000
4	$	$ +1,245,000
5	$	$ +1,954,000

PROJECTED CONSTRUCTION EMPLOYMENT IMPACT

Please provide estimates of total construction jobs and the total annual wages and benefits of construction jobs at the Project:

Year	Number of Construction Jobs	Total Annual Wages and Benefits	Estimated Additional NYS Income Tax
Current		$_____	$_____
Year 1		$_____	$_____
Year 2		$_____	$_____
Year 3		$_____	$_____
Year 4		$_____	$_____
Year 5		$_____	$_____

PROJECTED PERMANENT EMPLOYMENT IMPACT

Estimates of the total number of existing permanent jobs to be preserved or retained as a result of the Project are described in the tables on pages 12-13 of the Application.

Estimates of the total new permanent jobs to be created at the Project are described in the tables on pages 12-13 of the Application.

Please provide estimates for the following:

Creation of New Job Skills relating to permanent jobs. Please complete Schedule A.

Provide the projected percentage of employment that would be filled by Franklin County residents: _____80_____%

Provide a brief description of how the project expects to meet this percentage:

We anticipate 80% of new hires resulting from the expansion to be Franklyn county residents and 20% to reside in the remaining North Country counties (Essex, Clinton, St. Lawrence). Bionique has successfully recruited skilled and professional employees from the North Country in the past and is very active in recruiting from local colleges as well as in advertising through local Chamber of Commerce and career fairs.

PROJECTED OPERATING IMPACT

Please provide estimates for the impact of Project operating purchases and sales:

Additional Purchases *(1st year following project completion)*	$
Additional Sales Tax Paid on Additional Purchases	$
Estimated Additional Sales *(1st full year following project completion)*	$
Estimated Additional Sales Tax to be collected on additional sales *(1st full year following project completion)*	$

Please provide estimates for the impact of Project on existing real property taxes and new payments in lieu of taxes ("Pilot Payments"):

Year	**Existing Real Property Taxes** ***(Without IDA involvement)***	**New Pilot Payments** ***(With IDA)***	**Total** ***(Difference)***
Current			
Year 1			
Year 2			
Year 3			
Year 4			
Year 5			
Year 6			
Year 7			
Year 8			
Year 9			
Year 10			

Please provide a detailed description for the impact of other economic benefits and all anticipated community benefits expected to be produced as a result of the Project (attach additional pages as needed for a complete and detailed response):

The benefits that this project will provide to the community far exceed the retention and new job addition because over the last 30 years of operation Bionique has developed strong ties and/or supported directly or indirectly a myriad of businesses and initiatives that are aimed at providing services to Bionique in its line of work, fostering education and knowledge, with a particular focus on the life science industry, and community based institutions or business support groups, including, but not limited to:
- Educational partners: Paul Smith's College, North Country Community College
- Life science/health partners: Adirondack Health, Trudeau Institute
- Charity/community support partners: ADK Unite, local charities
- Logistic/Infrastructure partners: Adirondack Regional Airport, DOT roads cleaning initiatives
- Local Chambers of Commerce and Community Organizers
- Service providers and contractors across the North Country

CERTIFICATION

I certify that I have prepared the responses provided in this Questionnaire and that, to the best of my knowledge; such responses are true, correct, and complete.

I understand that the foregoing information and attached documentation will be relied upon, and constitute inducement for, the Agency in providing financial assistance to the Project. I certify that I am familiar with the Project and am authorized by the Company to provide the foregoing information, and such information is true and complete to the best of my knowledge. I further agree that I will advise the Agency of any changes in such information, and will answer any further questions regarding the Project prior to the closing.

I affirm under penalty of perjury that all statements made on this application are true, accurate and complete to the best of my knowledge.

Name of Person completing Project Questionnaire on behalf of the Company:

Name: Gladis Zamparo

Title: CEO

Phone Number: 518 891 2356

Address: 156 Fay Brook Drive, Saranac Lake, NY 12983

Signature

10/5/2023
Date Signed

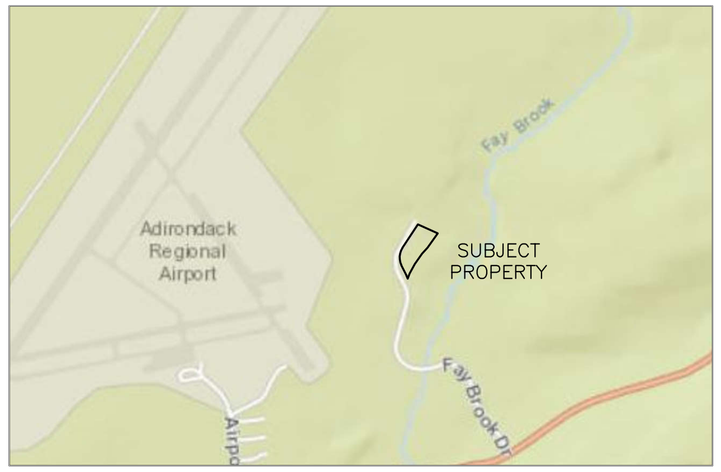
SCHEDULE A

CREATION OF NEW JOB SKILLS

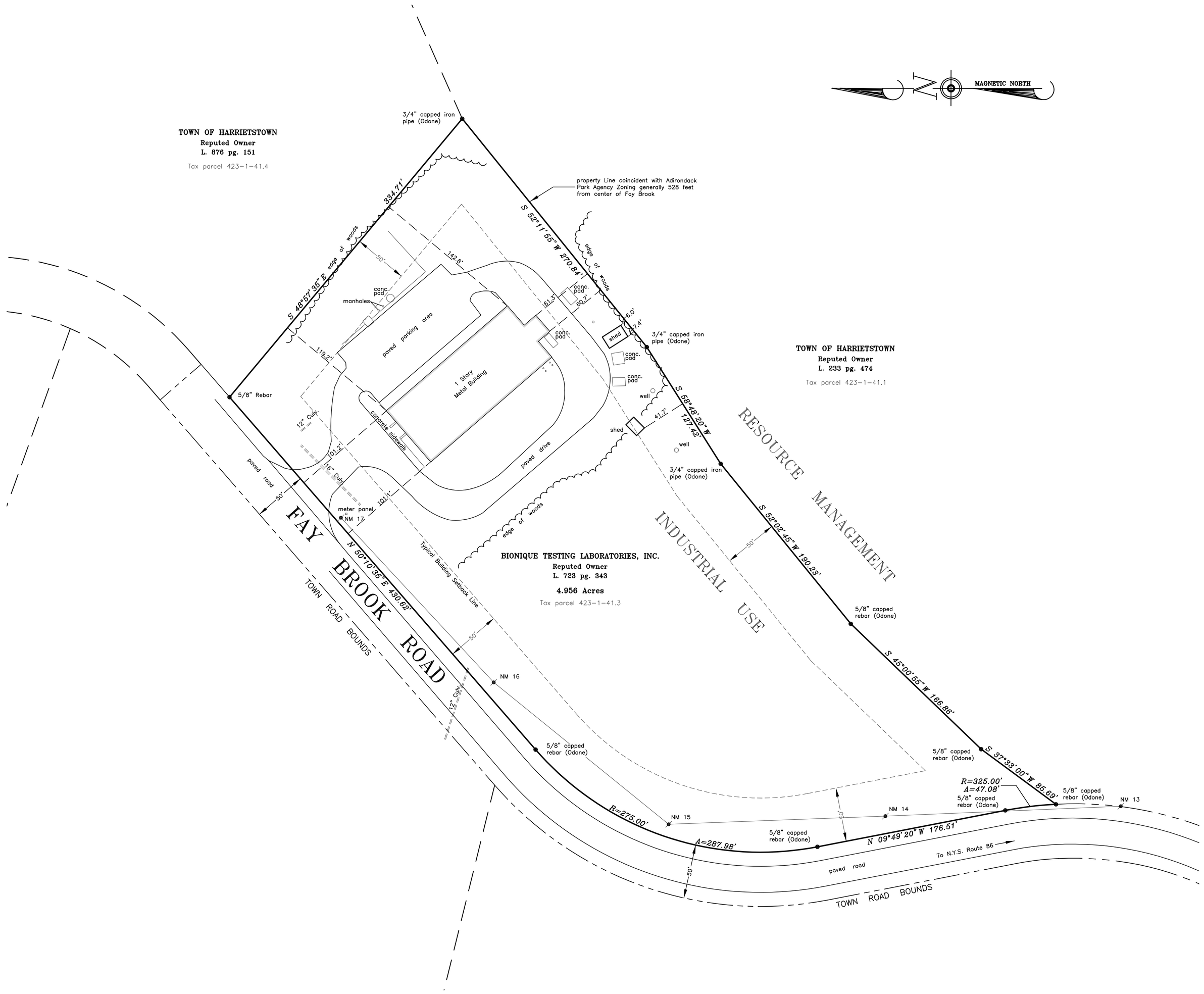
Please list the projected new job skills for the new permanent jobs to be created at the Project as a result of the undertaking of the Project by the Company.

New Job Skills	Number of Positions Created	Range of Salary and Benefits

Should you need additional space, please attach a separate sheet.



LOCATION MAP
NOT TO SCALE



ZONING

TOWN OF HARRIETSTOWN AREA & BULK REGULATIONS
General Industrial (I-1)

Minimum Setback Requirements	
Front setback	50 feet
Side setback	50 feet
Rear setback	50 feet
Other Criteria	
Minimum Lot Area	2 Acres (may be reduced by 30% if public water & sewer are provided)
Max. % plot covered by structure	30
Min. % open space	30
Max. structure height	40 feet
Min. lot width	200 feet

MAP REFERENCES

1. See Map entitled "MAP SHOWING SURVEY AND SUBDIVISION LANDS OF THE TOWN OF HARRIETSTOWN PREPARED FOR ADIRONDACK ECONOMIC DEVELOPMENT CORPORATION" by Glenn D. Odone, L.S. dated May 22, 1998 and filed in the Franklin County Clerk's office on June 03, 1998 in Plat File A-69 as Map number 1634.

NOTES

1. The Subject Property is located in an I-1 (General Industry) Zoning District and subject to the Rules and Regulations adopted by the Town of Harrietstown.
2. The Subject Property is located in an Industrial Use Land Classification, subject to the Rules and Regulations promulgated by the Adirondack Park Agency and also subject to the terms and conditions of APA Permit and Order #96-38 issued May 03, 1996 and also APA Permit #98-140 issued August 19, 1998.
3. The Fay Brook Road (formerly Industrial Park Road) was dedicated a "Town Road" by Resolution adopted by the Town of Harrietstown Town Board at its' regular meeting on November 07, 1996.
4. Property is subject to an easement for underground utilities, 10 feet in width, conveyed to Niagara Mohawk Power Corporation and New York Telephone Company by Deed recorded in Liber 769 at page 242 of Deeds in the Franklin County Clerk's office.
5. Property is subject to exceptions and reservations in Deed recorded in Liber 233 at page 474 (includes timber rights, mineral rights, and easements).

CERTIFICATION

I HEREBY CERTIFY TO THE FOLLOWING:

1. COMMUNITY BANK, N.A.
2. BIONIQUE TESTING LABORATORIES, INC.
3. FIRST AMERICAN TITLE INSURANCE COMPANY
4. STAFFORD, OWENS, PILLER, MURNANE, KELLEHER & TROMBLEY PLLC

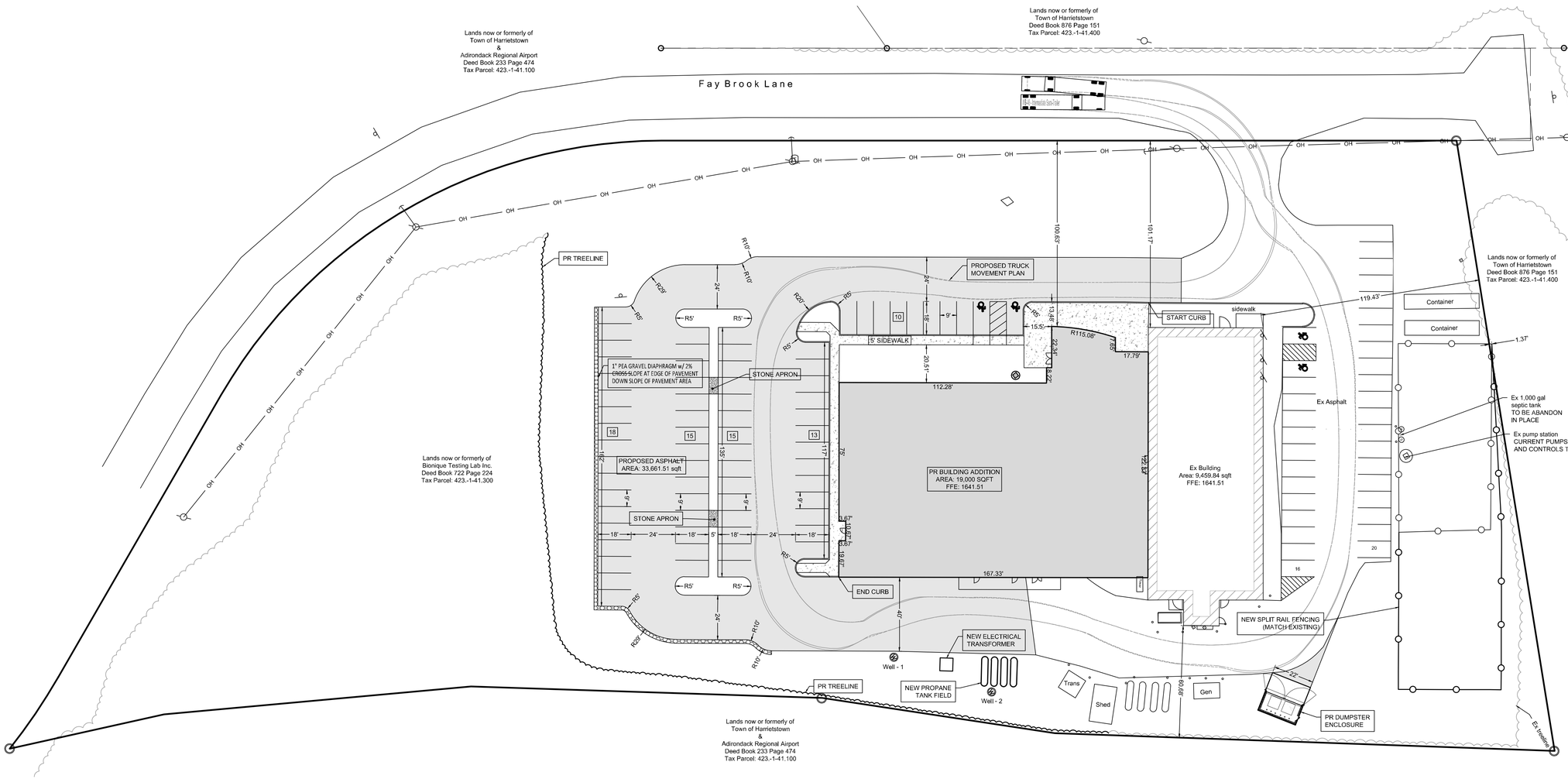
STACEY L. ALLOTT, LS #49670 05/16/19

GEOMATICS
land surveying, pc
STACEY L. ALLOTT, L.S.
P.O. BOX 1277 SARANAC LAKE, NY
geomaticslspc@gmail.com 518-891-6218 Phone
www.geomatics.pro

MAP OF SURVEY
PREPARED FOR
BIONIQUE TESTING LABORATORIES, INC.
SITUATE IN TOWNSHIP 21, GREAT TRACT ONE, MACOMB' PURCHASE,
TOWN OF HARRIETSTOWN COUNTY OF FRANKLIN AND STATE OF NEW YORK.

1. Added certification parties May 20, 2019 SLA

REVISIONS / DATE / BY
COPYRIGHT 2019
CHECKED BY SLA
DRAWN BY NJH
DATE SURVEY 04/24/19 MAP 05/16/19
SCALE IN./FT. 1"=50' RATIO 1:600
TAX MAP NO. 423-1-41.3
MAP NO. 19010



0 1/2 1 2 3 4 INCHES
0 15 30 60 90 120 FEET

Scale: 1 Inch = 30 Feet

GRID NORTH NAD 83 NYS EAST ZONE: 18

Legend:

- Found property evidence (as described)
- Well
- Utility pole
- Sign
- Fence post
- Bollard
- Gas meter
- Electric meter
- W — Waterline
- ST — Storm line
- SA — Sanitary sewer line
- UGE — Underground electric
- UGT — Underground communications
- GAS — Underground gas
- Split rail fence
- Property line
- Adjoiner property line

REVISION SCHEDULE		
#	DESCRIPTION	DATE

PROGRESS PRINT
NOT FOR CONSTRUCTION
06/30/2023

SEAL

ARCHITECT/INTERIOR DESIGN/STRUCTURAL ENGINEER
HYMAN HAYES ASSOCIATES
800 Troy-Schenectady Road, Suite 23
Latham, NY 12110
(518) 785-0325
www.hymanhayes.com

GENERAL CONTRACTOR
MURNANE

CIVIL CONSULTANT
RMS

MEP CONSULTANT
ADELTA

bionique

SHEET TITLE
Proposed Site Improvement Plan

BIONIQUE LAB EXPANSION
156 Fay Brook Ln, Saranac Lake, NY 12983

DATE:	06/28/2023
SCALE:	1" = 30'
DRAWN BY:	LSC
CHECKED BY:	AJO
APPROVED:	
CLIENT APPROVAL	
HHA PROJ. NO.:	22080
CLIENT PROJ NO.:	21234

SHEET NUMBER
C200

New York State
Adirondack
Park Agency

KATHY HOCHUL
Governor

BARBARA RICE
Executive Director

Sent Certified Mail, Return Receipt Requested
Tracking No.: 7022 2410 0001 3283 5448

MAJOR PROJECT PUBLIC NOTICE
APPLICATION COMPLETED
APA PROJECT NO. 2023-0091

Date: September 20, 2023

The Agency determined on **September 19, 2023** that the application referenced below is complete and under formal review for Agency action. The purpose of this Notice is to inform you about the proposed project and to ask for any written comments that you may wish to make about the project. Comments previously submitted are already part of the project file and need not be repeated.

It is not necessary to respond to this notice unless you want to do so. If you wish to provide written comments, they must be received by **October 12, 2023.** The Agency website's page for **Public Comment & Hearing Opportunities** (https://apa.ny.gov/Hearings) includes information on the project, including the most recent maps and plans, and an electronic form for submitting any public comments. You may also submit written comments to **Bart Haralson** via email (at **rpcomments@apa.ny.gov**) or via mail (at PO Box 99, Ray Brook, NY 12977). Please reference the above project number.

PROJECT SPONSOR, LOCATION AND DESCRIPTION

The Agency received an application on **May 18, 2023**, and additional information on **September 5, 2023,** for a project proposed by **Bionique Testing Lab Inc.** in the Town of **Harrietstown, Franklin** County, on or near **Fay Brook Lane** in an area designated as **Industrial Use** on the Adirondack Park Land Use and Development Plan Map. The tax map number of the project site is: Section **423**, Block **1**, Parcel(s) **41.300**. The attached map shows the approximate location of the project site.

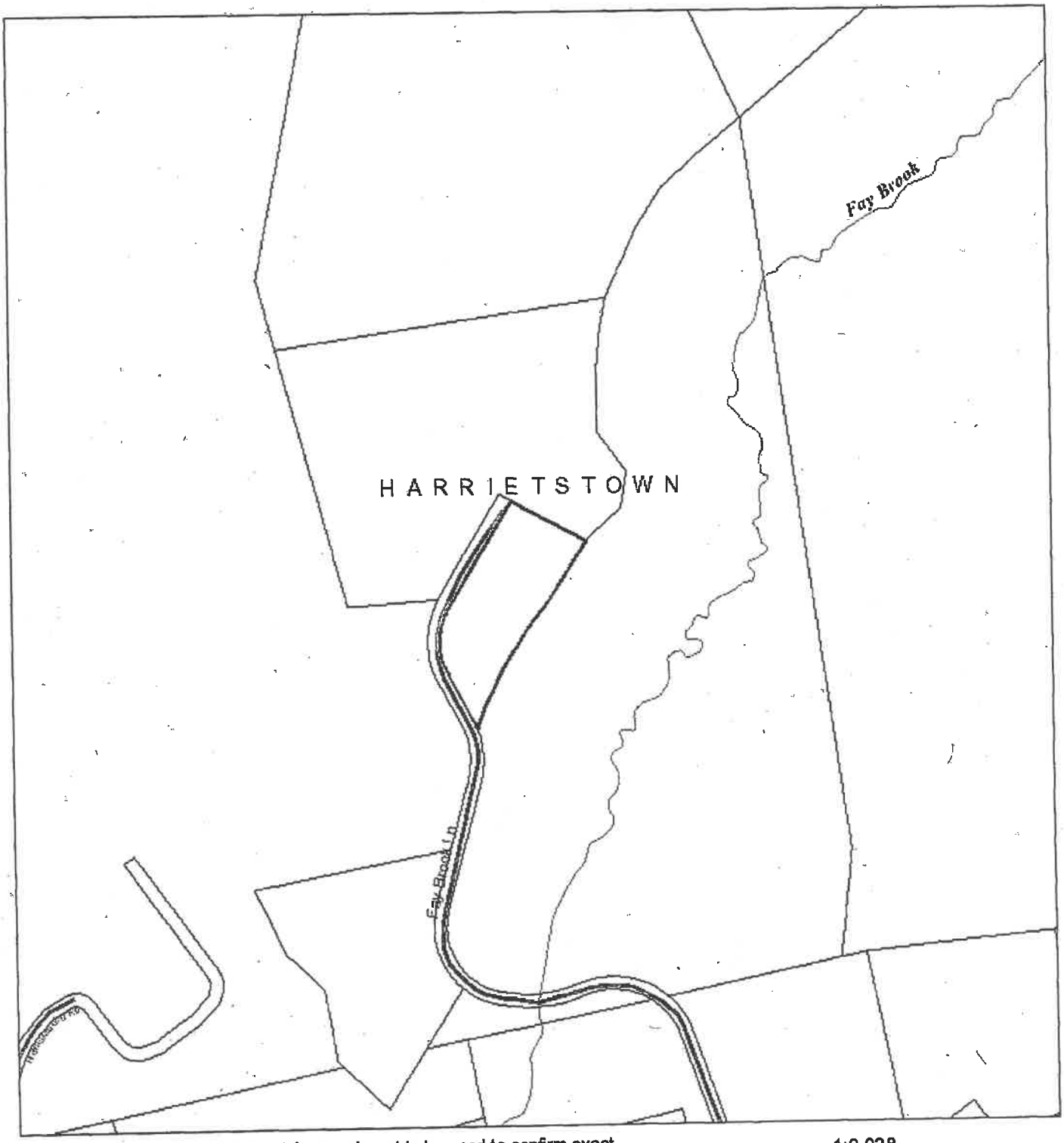
The project is briefly described as follows: **19,000-square-foot expansion of an existing 9,460-square-foot building to provide for expanded laboratory testing facilities and additional staffing for up to 90 employees.**

9/20/23
Date

David J. Plante, AICP CEP
Deputy Director, Regulatory Programs

cc: McKayla Hall, Murnane Building Contractors
Bionique Testing Laboratories
Adjoining Landowners
Town, County & LGRB Officials

Project Location for APA Project P2023-0091



5/22/2023, 10:44:40 AM This is advisory only, not to be used to confirm exact boundary location or for determining Agency jurisdiction.

1:9,028

Temp Highlight Parcel(s)

Parcels 2021

Park Boundary Blueline

Coordinate System: WGS 1984 Web Mercator Auxiliary Sphere

NYS Adirondack Park Agency

NYS Adirondack Park Agency

STAFFORD • OWENS
MURNANE • KELLEHER • MILLER • MEYER & ZEDICK, PLLC
Attorneys & Counselors at Law

One Cumberland Avenue
PO Box 2947
Plattsburgh, NY 12901
P 518.561.4400
F 518.561.4848
staffordowens.com

August 26, 2022

VIA EMAIL
Gladis Zamparo
156 Fay Brook Drive
Saranac Lake, NY 12983

RE: Merger of Bionique Testing Laboratories, Inc. and BioTestLab LLC into BioTestLab LLC – surviving entity.

Dear Gladis:

1. BCL 906(a)(2) states that all property of the constituent Corporations vests in the surviving entity.

2. I have your materials and inquiry about a "new" deed to the surviving entity of the merger. Our practice in the past, following similar mergers, has been to communicate with the local tax assessor advising them of the merger, and requesting they change the name to the new entity to receive the tax bills. They will record in their records the name of the owner of the property, if you will, which in this case is Bionique Testing Laboratories LLC (see Certificate of Merger attached showing the name change of BioTestLab LLC to Bionique Testing Laboratories LLC).

3. There is no need to have a new deed filed.

Very truly yours,

STAFFORD, OWENS, MURNANE, KELLEHER, MILLER, MEYER & ZEDICK, PLLC

William L. Owens

William L. Owens, Esq.
Congressman (Ret.)

WLO/hfk
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2023 FRANKLIN COUNTY AND TOWN OF HARRIETSTOWN TAX BILL

* For Fiscal Year 01/01/2023 to 12/31/2023 * Warrant Date 12/30/2022

Bill No. 001460
Sequence No. 1452
Page No. 1 of 1

MAKE CHECKS PAYABLE TO:
TOWN OF HARRIETSTOWN
39 MAIN STREET
SARANAC LAKE, NY 12983
PHONE: 518-891-1470

TO PAY IN PERSON
MONDAY-FRIDAY 8:30AM-3PM
TOWN OF HARRIETSTOWN
39 MAIN STREET
SARANAC LAKE, NY 12983
CREDIT CARDS ACCEPTED

SWIS S/B/L ADDRESS & LEGAL DESCRIPTION & CK DIGIT
164689 423.-1-41.300
Address: 156 Fay Brook Dr
Town of: Harrietstown
School: Saranac Lake Central
NYS Tax & Finance School District Code:
465 - Prof. bldg.
Roll Sect. 1
Parcel Acreage: 4.96
Account No.
Bank Code

Bionique Testing Lab Inc.
156 Fay Brook Dr
Saranac Lake, NY 12983

PROPERTY TAXPAYER'S BILL OF RIGHTS

The Total Assessed Value of this property is: 1,430,000
The **Uniform Percentage of Value** used to establish assessments in your municipality was: 84.00
The assessor estimates the **Full Market Value** of this property **as of July 1, 2021 was:** 1,702,381

Estimated State Aid: CNTY 4,026,352 TOWN 198,500

If you feel your assessment is too high, you have the right to seek a reduction in the future. A publication entitled "Contesting Your Assessment in New York State" is available at the assessor's office and on-line: www.tax.ny.gov. Please note that the period for filing complaints on the above assessment has passed.

Exemption	Value	Tax Purpose	Full Value Estimate	Exemption	Value	Tax Purpose	Full Value Estimate

PROPERTY TAXES

Taxing Purpose	Total Tax Levy	% Change From Prior Year	Taxable Assessed Value or Units	Rates per $1000 or per Unit	Tax Amount
County General	3,935,606	-3.8	1430,000.00	4.625552	6,614.54
Harrietstown Tn Gene	1,167,807	5.0	1430,000.00	1.378282	1,970.94
General Outside	132,232	10.7	1430,000.00	.205332	293.62
Highway Outside	470,161	-18.8	1430,000.00	.730073	1,044.00
Adirondack Airport	450,768	16.9	1430,000.00	.532011	760.78
Board Of Election	101,978	12.4	1430,000.00	.120358	172.11
Harrietstn Fire Prot	462,499	17.5	1430,000.00	.685885	980.82
TOTAL					

PLEASE NOTE: Franklin County allows partial payment of Town & County Real Property Taxes with a minimum amount of $100.00

Property description(s): T21 Industrial Park

PENALTY SCHEDULE

Due By:	Penalty/Interest	Amount	Total Due
01/31/2023	**0.00**	**11,836.81**	**11,836.81**
02/28/2023	118.37	11,836.81	11,955.18
03/31/2023	236.74	11,836.81	12,073.55

TOTAL TAXES DUE **$11,836.81**

Apply For Third Party Notification By: 11/15/2023
Taxes paid by _____ CA CH

RETURN THE ENTIRE BILL WITH PAYMENT AND PLACE A CHECK MARK IN THIS BOX [ ] IF YOU WANT A RECEIPT OF PAYMENT. THE RECEIVER'S STUB MUST BE RETURNED WITH PAYMENT.

TOWN OF HARRIETSTOWN TAX BILL RECEIVER'S STUB

Town of: Harrietstown
School: Saranac Lake Central
Property Address: 156 Fay Brook Dr

Bill No. 001460
164689 423.-1-41.300
Bank Code

Bionique Testing Lab Inc.
156 Fay Brook Dr
Saranac Lake, NY 12983

Pay By:			
01/31/2023	**0.00**	**11,836.81**	**11,836.81**
02/28/2023	118.37	11,836.81	11,955.18
03/31/2023	236.74	11,836.81	12,073.55

TOTAL TAXES DUE
$11,836.81

SARANAC LAKE CENTRAL SCHOOL DISTRICT

Bill No. 004012

2023 - 2024 School Tax

For Fiscal Year Ending 06/30/24 * Warrant Date 08/09/23

MAKE CHECKS PAYABLE TO
Saranac Lake CSD Tax Collector
79 Canaras Ave
Saranac Lake, NY 12983
OR PAY ONLINE AT
https://www.infotaxonline.com

TO PAY IN PERSON
Saranac Lake High School
Door #5 Near Auditorium
79 Canaras Ave, Saranac Lake
(518) 897-1404 (NOT 891-1404)
Hours: 8:00 AM - 3:30 PM

FORWARDING SERVICE REQUESTED
11
BIONIQUE TESTING LAB INC.
156 FAY BROOK DR
SARANAC LAKE, NY 12983

PROPERTY ADDRESS & LEGAL DESCRIPTION

S/B/L 164689 423.-1-41.300
Address: 156 Fay Brook Dr
Town of: HARRIETSTOWN
School: 164601 - SARANAC LAKE CENTRAL
Class: Professional Building
Bank: **Acres:** 4.96 **Roll:** 1
Property Descrip: T21 Industrial Park

Total School Budget:	$36,000,000
Total District Tax Levy:	$23,648,800
Estimated State Aid:	$9,683,133

Property Taxpayer's Bill of Rights

Full Market Value:	$1,958,904
Total Assessed Value as of March 1, 2023:	$1,430,000
The Uniform Percentage of Value used to establish assessments was:	73.00%

If you feel your assessment is too high, you have the right to seek a reduction in the future. For further information, please ask your assessor for the booklet "How to File a Complaint on Your Assessment". Please note that the period for filing complaints on the above assessment has passed. NYS Taxation and Finance School District Code 561

Exemption	Value	Tax Purpose	Full Value Est.

PAY ONLINE at https://www.infotaxonline.com. ONLINE FEES are $1.50 for payments by CHECK and 2.65% for payments by CREDIT CARD. Also review tax bill(s), check payment status and print receipts.

IN-PERSON PAYMENTS - Cash or Check Only (No Credit Cards)

PROPERTY TAXES

Taxing Purpose	Total Tax Levy	% Change from Prior Year	Taxable Value or Units	Rate per $1000 or Per Unit	Tax Amount
Saranac Lake Central	23,648,800	1.7%	1,430,000.00	10.848107	15,512.79
Library	409,506	15.0%	1,430,000.00	0.187847	268.62

Payment Schedule

Payment Period	Penalty	Fee Amt	Total Due
09/01/23 - 10/02/23			15,781.41
10/03/23 - 10/31/23	2.00%	315.63	16,097.04

TOTAL TAXES DUE $15,781.41

2023 - 2024 School Tax
RECEIVERS STUB

Bill No. 004012
164689 423.-1-41.300

Bionique Testing Lab Inc.
156 Fay Brook Dr
Saranac Lake, NY 12983

Payment Schedule

Payment Period	Penalty	Fee Amt	Total Due
09/01/23 - 10/02/23			15,781.41
10/03/23 - 10/31/23	2.00%	315.63	16,097.04

Return ENTIRE BILL with payment. The Tax Collector will mark it as paid, and mail a copy back to you. Thank you!