

TOWN OF GUILDERLAND INDUSTRIAL DEVELOPMENT AGENCY

APPLICATION

IMPORTANT NOTICE: The answers to the questions contained in this application are necessary to determine your firm's eligibility for financing and other assistance from Town of Guilderland 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 firm who is thoroughly familiar with the business and affairs of your firm and who is also thoroughly familiar with the proposed project. This application is subject to acceptance by the Agency.

TO: Town of Guilderland Industrial Development Agency
Guilderland Town Hall
Western Avenue, Route 20
P.O. Box 339
Guilderland, New York 12084
Attention: Chairman

This application by applicant respectfully states:

APPLICANT: *Albany Place Development LLC*

APPLICANT'S STREET ADDRESS: *c/o Promenade Senior Living, 38 Hospital Road*

CITY: *Tuxedo* STATE: *NY* ZIP CODE: *10987*

PHONE NO.: *917-886-3483* FAX NO.: *845-351-1111* E-MAIL: slaufer@promenademanagement.com

NAME OF PERSON(S) AUTHORIZED TO SPEAK FOR APPLICANT WITH RESPECT TO THIS APPLICATION: *Steven Laufer, Ben Laufer, Mike Moriarty, Bill Reisner*

IF APPLICANT IS REPRESENTED BY AN ATTORNEY, COMPLETE THE FOLLOWING:

NAME OF FIRM: *Windels Marx Lane & Mittendorf, LLP*

NAME OF ATTORNEY: *Mike Moriarty and Len LaBarbiera*

ATTORNEY'S STREET ADDRESS: *156 West 56th St.*

CITY: *New York* STATE: *NY* ZIP CODE: *10019*

PHONE NO.: *212-237-1132* FAX NO.: *212-262-1215* E-MAIL: mmoriarty@windelsmarx.com

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

INSTRUCTIONS

1. The Agency will not approve any application unless, in the judgment of the Agency, said application and the summary contain 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 two (2) copies of this application to the Agency at the address indicated on the first page of this application.
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.
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 to the Agency all actual costs incurred in connection with this application and the Project contemplated herein (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 general counsel and bond counsel/special counsel to the Agency. The costs incurred by the Agency, including the Agency’s general counsel and bond 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 an application fee of Two Hundred Fifty Dollars (\$250) to cover the anticipated costs of the Agency in processing this application. A check or money order made payable to the Agency must accompany each application. **THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS ACCOMPANIED BY THE APPLICATION FEE.**
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.**

FOR AGENCY USE ONLY

1. Project Number	_____
2. Date application Received by Agency	_____, 20__
3. Date application referred to attorney for review	_____, 20__
4. Date copy of application mailed to members	_____, 20__
5. Date notice of Agency meeting on application posted	_____, 20__
6. Date notice of Agency meeting on application mailed	_____, 20__
7. Date of Agency meeting on application	_____, 20__
8. Date Agency conditionally approved application	_____, 20__
9. Date scheduled for public hearing	_____, 20__
10. Date Environmental Assessment Form ("EAF") received	_____, 20__
11. Date Agency completed environmental review	_____, 20__
12. Date of final approval of application	_____, 20__

Provide estimates for the following:

Number of Full Time Employees at the Project Site before IDA Status:	<i>N/A</i>
Estimate of Jobs to be Created:	<i>102</i>
Estimate of Jobs to be Retained:	<i>0</i>
Average Estimated Annual Salary of Jobs to be Created:	<i>\$50k(est)</i>
Annualized Salary Range of Jobs to be Created:	<i>\$26k-115k(est)</i>
Estimated Average Annual Salary of Jobs to be Retained:	<i>N/A</i>

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

A. Identity of Company:

1. Company Name: *Albany Place Development LLC*
 Present Address: *1228 Western Ave., Albany, NY*
 Zip Code: *12203*
 Employer's ID No.: *82-0808431*
2. If the Company differs from the Applicant, give details of relationship: *N/A*
3. Indicate type of business organization of Company:
 - a. Corporation. If so, incorporated in what country? _____; What State? _____; Date Incorporated _____; Type of Corporation? _____; Authorized to do business in New York? Yes ___; No ___.
 - b. Partnership. If so, indicate type of partnership _____; Number of general partners _____; Number of limited partners _____.
 - c. **Limited liability company.** If so, formed in what State? *New York*
 Date formed: *3/14/17*; Authorized to do business in New York State? Yes **X**;
 - d. Sole proprietorship.
4. 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: *No*

B. Management of Company:

1. List all owners, officers, members, directors and partners (complete all columns for each person):

NAME AND HOME ADDRESS	OFFICE HELD	OTHER PRINCIPAL BUSINESS
<i>SML LLC</i>	<i>Sole Member</i>	<i>Steven Laufer</i>
<i>FERL Acquisition Co LLC</i>	<i>Sole Member</i>	<i>Ben Laufer</i>

2. Is the Company or management of the Company now a plaintiff or a defendant in any civil or criminal litigation? Yes____; No__X__.
3. Has any person listed above ever been convicted of a criminal offense (other than a minor traffic violation)? Yes____; No__X__.
4. 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__X__.
5. If the answer to any of questions 2 through 4 is yes, please, furnish details in a separate attachment.

C. Principal owners of Company:

1. Is Company publicly held? Yes____; No__X__. If yes, please list exchanges where stock traded: _____

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

NAME	ADDRESS	PERCENTAGE OF HOLDING
<i>Steven Laufer</i>	<i>38 Wedgewood Lane, Lawrence, NY 11559</i>	<i>62.5</i>
<i>Ben Laufer</i>	<i>33 Waverly Place, Lawrence, NY 11559</i>	<i>37.5</i>

D. Company's principal bank(s) of account: *Sterling National Bank*

II. DATA REGARDING PROPOSED PROJECT.

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

Albany Place Development LLC (the "Applicant") proposes to convert an existing Best Western Sovereign Hotel located at 1228 Western Ave., Albany, NY into a state of the art residence for seniors (the "Facility"). The Facility will contain approximately 170 residential units each complete with private bathrooms, cooking facilities and sleeping areas. The Facility will offer a full gamut of services including three meals per day, life enrichment programs, medication management and assistance with activities of daily living and personal care. The Facility will maintain at least 40% of its units for low-income seniors thereby providing a much needed service to the Town's lower income senior population.

B. Location of the Project:

1. Street Address: *1228 Western Ave*
2. City of _____
3. Town of *Guilderland*
4. Village of _____
5. County of *Albany*

C. Description of the Project site:

1. Approximate size (in acres or square feet) of the Project site: *5.8 acres*. Is a map, survey or sketch of the Project site attached? Yes X; No ____.
2. Are there existing buildings on the Project site? Yes X; No ____.
 - a. If yes, indicate the number of buildings on the site: *2*. Also, please briefly identify each existing building and indicate the approximate size (in square feet) of each such existing building: *Existing Best Western Sovereign Hotel which consists of 2 buildings. Building 1 is a 5-story, 100,000 SF hotel and building 2 is a 2-story, 15,000 SF restaurant.*
 - b. Are the existing buildings in operation? Yes X; No _____. If yes, describe present use of present buildings: *The hotel is currently in operation while the restaurant is vacant.*
 - c. Are the existing buildings abandoned? Yes ____; No X. About to be abandoned? Yes ____; No X. If yes, describe: *However, the hotel is older construction and failing to compete with newer hotel facilities developed in the area.*
 - d. Attach photograph of present buildings. *Attached*

3. Utilities serving the Project site:

Water-Municipal: *Guilderland Water and Sewer*

Other (describe) _____

Sewer-Municipal: *Guilderland Water and Sewer*

Other (describe) _____

Electric-Utility: *National Grid*

Other (describe) _____

Heat-Utility: *National Grid*

Other (describe) _____

4. Present legal owner of the Project site: *1228 Western Avenue LLC*

a. If the Company owns the Project site, indicate date of purchase: _____, 20____; purchase price: \$_____.

b. If Company does not own the Project site, does Company have an option signed with the owner to purchase the Project site? Yes__X__; No____. If yes, indicate date option signed with the owner: *October 11, 2016*; and the date the option expires: *June 30, 2017*.

c. If the Company does not own the Project site, is there a relationship legally or by common control between the Company and the present owner of the Project site? Yes__X__; No____. If yes, describe; *The company has a fully executed purchase and sale agreement with the seller.*

5. a. Zoning District in which the Project site is located: *General Business District*

b. Are there any variances or special permits affecting the Project site? Yes__X__; No____. If yes, list below and attach copies of all such variances or special permits: *Special use permit; meeting held on January 18, 2017. See attached.*

D. Description of Proposed Construction:

1. Does part of the Project consist of the acquisition or construction of a new building or buildings? Yes____; No__X__. If yes, indicate number and size of new buildings:

2. Does part of the Project consist of additions and/or renovations to existing buildings located on the Project site? Yes__X__; No____. If yes, indicate the buildings to be expanded or renovated, the size of any expansions and the nature of expansion and/or renovation: *The hotel building will be substantially rehabbed in order to build the senior residences. There will be many overall improvements to the look and feel of the buildings including closure of the swimming pool, creation of atrium space for dining and socializing and upgrades to all systems.*

3. Describe the principal uses to be made by the Company of the building or buildings to be acquired, constructed, or expanded: *Senior living facility*

E. Description of the Equipment:

1. Does a part of the Project consist of the acquisition or installation of machinery, equipment or other personal property (the "Equipment")? Yes X; No _____. If yes, describe the Equipment: *Commercial kitchen and furniture for residential units.*
2. With respect to the Equipment to be acquired, will any of the Equipment be Equipment which has previously been used? Yes _____; No X_. If yes, please provide detail:
3. Describe the principal uses to be made by the Company of the Equipment to be acquired or installed: *All equipment will be utilized to serve the residents of the facility.*

F. Project Use:

1. What are the principal products to be produced at the Project? *Rental units.*
2. What are the principal activities to be conducted at the Project? *Senior living.*
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 X; No _____. If yes, please provide detail: *The facility will provide housing and services as needed to the senior population who will reside at the facility. The services include three meals daily, supervision, schedule of life enrichment programs, personal care and medication management, as needed. **

**** to be further discussed with the IDA***

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? *100%*
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 X_. 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 X; No _____. If yes, please explain: *Attractively designed senior living facilities located on sites with good transportation, are very attractive to residents from a wide area. Individuals move from suburban locations, which require cars to location with good public transportation and better possibilities for socialization, nutrition, and other services designed for seniors. In addition, the facility is uniquely positioned to meet the needs of moderate income seniors and will therefore attract residents from a wider area.*
- 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 X. 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 X; No _____. If yes, please provide detail: *There is currently no facility in Albany County with the ALP licensure that the Project will have that will allow the facility to accept and retain seniors of moderate income with certain healthcare needs.*
- e. Will the Project be located in one of the following: (i) an area designed 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 X. 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 X; No _____. If yes, please explain: *The Project will function as a residence and service provider to 200 residents. It is anticipated that the Project will employ 102 FTE positions on a permanent basis upon stabilization. The employees will be providing services to the 200 residents on a 24/7 basis.*

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__X__. 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__X__. 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:
- a. 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: *N/A*
 - b. 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: *N/A*
10. Will the Project be owned by a not-for-profit corporation? Yes____; No__X__. If yes, please provide detail:
11. If the answer to question 10 is yes, indicate whether any of the following apply to the Project:
- a. Is the Project a housing facility primarily designed to be occupied by individuals 60 years of age or older? Yes____; No____. If yes, please explain: *N/A*
 - b. Is the Project a dormitory for an educational institution? Yes____; No____. If yes, please explain: *N/A*
 - c. Is the Project a facility as defined in Article 28 of the Public Health Law? Yes____; No____. If yes, please explain: *N/A*
12. If the answer to any of the questions contained in question 11 is yes, indicate whether the cost of the Project will exceed \$20 million. Yes____; No____. If yes, please provide detail: *N/A*
13. Will the Project be sold or leased to a municipality? Yes__X__; No____. If yes, please provide detail: *Installment sales agreement.*

G. Project Status:

1. If the Project includes the acquisition of any land or buildings, have any steps been taken toward acquiring same? Yes X; No _____. If yes, please discuss in detail the approximate stage of such acquisition: *Under contract. A purchase and sale agreement was executed on October 11, 2016.*
2. If the Project includes the acquisition of any Equipment, have any steps been taken toward acquiring same? Yes _____; No X_. If yes, please discuss in detail the approximate stage of such acquisition:
3. If the Project involves the construction or reconstruction of any building or other improvement, has construction work on any such building or improvement begun? Yes _____; No X_. 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.:
4. Please indicate amount of funds expended on the Project by the Company in the past three (3) years and the purposes of such expenditures: *None*
5. Please indicate the date the applicant estimates the Project will be completed: *November 2018.*

I. 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 X; 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 X; No _____.

III. INFORMATION CONCERNING LEASES OR SUBLEASES OF THE PROJECT.
(PLEASE COMPLETE THE FOLLOWING SECTION IF THE COMPANY INTENDS TO
LEASE OR SUBLEASE ANY PORTION OF THE PROJECT).

A. Does the Company intend to lease or sublease more than 10% (by area or fair market value) of the Project? Yes___; No__X__. If yes, please complete the following for each existing or proposed tenant or subtenant:

1. Sublessee name: _____
Present Address: _____
City: _____ State: _____ Zip: _____
Employer's ID No.: _____
Sublessee is: ___ Corporation: ___ Partnership: ___ Sole Proprietorship
Relationship to Company: _____
Percentage of Project to be leased or subleased: _____
Use of Project intended by Sublessee: _____
Date of lease or sublease to Sublessee: _____
Term of lease or 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 on a separate attachment (a) details and (b) the answers to questions II(F)(4) through (6) with respect to such sublessee.

2. Sublessee name: _____
Present Address: _____
City: _____ State: _____ Zip: _____
Employer's ID No.: _____
Sublessee is: _____
___ Corporation: ___ Partnership: ___ Sole Proprietorship
Relationship to Company: _____
Percentage of Project to be leased or subleased: _____
Use of Project intended by Sublessee: _____
Date of lease or sublease to Sublessee: _____
Term of lease or 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 on a separate attachment (a) details and (b) the answers to questions II(F)(4) through (6) with respect to such sublessee.

3. Sublessee name: _____
Present Address: _____
City: _____ State: _____ Zip: _____
Employer's ID No.: _____
Sublessee is: ___ Corporation: ___ Partnership: ___ Sole Proprietorship
Relationship to Company: _____
Percentage of Project to be leased or subleased: _____

Use of Project intended by Sublessee: _____
 Date of lease or sublease to Sublessee: _____
 Term of lease or 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 on a separate attachment (a) details and (b) the answers to questions II(F)(4) through (6) with respect to such sublessee.

B. What percentage of the space intended to be leased or subleased is now subject to a binding written lease or sublease? 0%

IV. EMPLOYMENT IMPACT.

A. 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					
Present Part Time					
Present Seasonal					
First Year Full Time					
First Year Part Time	16	10	12	10	48
First Year Seasonal					
Second Year Full Time	16	21	35	30	102

Second Year Part Time					
Second Year Seasonal					

TYPE OF EMPLOYMENT Independent Contractors					
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled	Totals
Present Full Time					
Present Part Time					
Present Seasonal					
First Year Full Time					
First Year Part Time					
First Year Seasonal					
Second Year Full Time					
Second Year Part Time					
Second Year Seasonal					

TYPE OF EMPLOYMENT Employees of Independent Contractors					
	Professional or Managerial	Skilled	Semi-Skilled	Un-Skilled	Totals
Present Full Time					
Present Part Time					
Present Seasonal					

First Year Full Time					
First Year Part Time					
First Year Seasonal					
Second Year Full Time					
Second Year Part Time					
Second Year Seasonal					

- B. Indicate below (1) the estimated salary and fringe benefit averages or ranges and (2) the estimated number of employees residing in the Capital Region 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 or Ranges	\$45k-115k \$5k per	\$31k-46k \$5k per	\$27k-31k \$5k per	\$26k-30k \$5k per
Estimated Number of Employees Residing in the Capital Region Economic Development Region ¹	100%	100%	100%	100%

- C. Please describe the projected timeframe for the creation of any new jobs with respect to the undertaking of the Project: *It is anticipated that after 10 months of construction, the Facility will begin hiring staff. The Facility will be fully staffed upon full stabilization.*
- D. 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.

¹ The Capital Region Economic Development Region consists of the following counties: Albany, Columbia, Greene, Saratoga, Schenectady, Rensselaer, Warren, and Washington.

V. PROJECT COST.

- A. 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:

<u>Description of Cost</u>	<u>Amount (est)</u>
Land	\$ 1,235,000
Buildings	\$ 11,115,000
Furniture, Fixtures & Equipment	\$ 1,182,000
Design, Engineering, Soft Costs	\$ 481,577
Costs of Financing	\$ 662,340
Capitalized Interest During Construction	\$ 1,503,433
Hard Construction Costs	\$ 8,392,300
Debt Service Reserve Fund	\$ 1,714,729
Contingency, Marketing, Operating, Taxes	\$ 1,531,230
TOTAL PROJECT COSTS	\$ 27,817,609

- B. 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:

<u>Description of Sources</u>	<u>Amount (est)</u>
Private Sector Financing: Tax-Exempt Bond	\$ 25,035,000
Applicant Equity	\$ 2,782,609
TOTAL AMOUNT OF PROJECT FINANCING SOURCES	\$ 27,817,609

- C. Have any of the above expenditures already been made by the applicant?
 Yes ____; No X__. If yes, indicate particulars.

D. Amount of loan requested: \$30,000,000

Maturity requested: 35 years

E. Has a commitment for financing been received as of this application date, and if so, from whom?

Yes ____; No X. Institution Name:

Provide name and telephone number of the person we may contact.

Name: *Bill Reisner, Oppenheimer & Co.* Phone: *212-667-6234*

F. The percentage of Project costs to be financed from public sector sources is estimated to equal the following: 90%

G. The total amount estimated to be borrowed to finance the Project is equal to the following: \$25,035,000

VI. FINANCIAL ASSISTANCE EXPECTED FROM THE AGENCY.

A. Financing

1. Is the applicant requesting that the Agency issue bonds to assist in financing the project? Yes X; No _____. If yes, indicate:

a. Amount of loan requested: *not to exceed 30,000,000 dollars;*

b. Maturity requested: *35Years*

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

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

a. retail food and beverage services: Yes ____; No X

b. automobile sales or service: Yes ____; No X

c. recreation or entertainment: Yes ____; No X

d. golf course: Yes ____; No X

e. country club: Yes ____; No X

f. massage parlor: Yes ____; No X

g. tennis club: Yes ____; No X

h. skating facility (including roller skating, skateboard and ice skating): Yes ____; No X

i. racquet sports facility (including handball and racquetball court): Yes ____; No X

j. hot tub facility: Yes ____; No X

- k. suntan facility: Yes____; No__X__
- l. racetrack: Yes____; No_X__

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

B. Tax Benefits.

1. 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__X__; No____. If yes, is the real property tax exemption being sought consistent with the Agency's Uniform Tax Exemption Policy? Yes__X__; No____.
2. Is the applicant expecting that the financing of the Project will be secured by one or more mortgages? Yes__X__; No____. If yes, what is the approximate amount of financing to be secured by mortgages? *\$30,000,000*
3. 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__X__; 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*
4. 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 each exemption.

a. N.Y.S. Sales and Compensating Use Taxes:	\$400,000
b. Mortgage Recording Taxes:	\$250,000
c. Real Property Tax Exemptions:	\$200,000
d. Other (please specify):	
	\$ _____
	\$ _____

5. Are any of the tax-exemptions being sought in connection with the Project inconsistent with the Agency's Uniform Tax-exemption Policy? Yes____; No__X__. If yes, please explain how the request of the applicant differs from the Agency's Uniform Tax-Exemption Policy:

C. Project 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.).

VII. REPRESENTATIONS BY THE APPLICANT. The applicant understands and agrees with the Agency as follows:

A. 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 “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”), as replaced by the Workforce Investment Act of 1998 (Public Law 105-220), 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 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.

E. 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.

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

G. 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:

H. 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 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.

I. 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.

J. 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.

K. 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:

L. Additional Information. Additional information regarding the requirements noted in this Application and other requirements of the Agency is included on the Agency’s website which can be accessed at http://www.townofguilderland.org/pages/guilderlandNY_ida/index.

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

By: _____
Applicant
Title: _____

NOTE: APPLICANT MUST ALSO COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 28 THROUGH 31 HEREOF BEFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 32.

VERIFICATION

(If Applicant is a Corporation)

STATE OF)
) SS.:
COUNTY OF)

_____deposes and says that he is the
(Name of officer of applicant)
_____of _____,
(Title) (Company Name)

the corporation named in the attached application; that 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 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 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 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

(If applicant is partnership)

STATE OF)
) SS.:
COUNTY OF)

_____, deposes and says that he is one of the
(Name of Individual)

members of the firm of _____, the partnership named in the attached
(partnership name)

application; that 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 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 as well as information acquired by deponent in the course of 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

(If applicant is limited liability company)

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

_____, deposes and says that he is one of the
(Name of Individual)
members of the firm of _____, the limited liability company named
(limited liability company)

in the attached application; that 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 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 as well as information acquired by deponent in the course of his duties as a member of and from the books and papers of said limited liability company.

Sworn to before me this
__ day of _____, 20__.

Notary Public

VERIFICATION

(If applicant is sole proprietor)

STATE OF)
) SS.:
COUNTY OF)

_____, deposes and says that he has read the foregoing

(Name of Individual)

application and knows the contents thereof; and that the same is true and complete and accurate to the best of 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

NOTE: THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS THE
HOLD HARMLESS AGREEMENT APPEARING ON PAGE 32 IS SIGNED BY THE
APPLICANT.

HOLD HARMLESS AGREEMENT

Applicant hereby releases Town of Guilderland 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 (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 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)

BY: _____

Sworn to before me this _____
day of _____, 20____.

Notary Public

TO: Project Applicants
 FROM: Town of Guilderland Industrial Development Agency
 RE: Cost/Benefit Analysis

In order for the Town of Guilderland 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”):	
2. Brief Identification of the Project:	
3. Estimated Amount of Project Benefits Sought:	
A. Amount of Bonds Sought:	\$ _____
B. Value of Sales Tax Exemption Sought	\$ _____
C. Value of Real Property Tax Exemption Sought	\$ _____
D. Value of Mortgage Recording Tax Exemption Sought	\$ _____
4. Likelihood of accomplishing the Project in a timely fashion:	

PROJECTED PROJECT INVESTMENT

A. Land-Related Costs	
1. Land acquisition	\$ _____
2. Site preparation	\$ _____
3. Landscaping	\$ _____
4. Utilities and infrastructure development	\$ _____
5. Access roads and parking development	\$ _____
6. Other land-related costs (describe)	\$ _____
B. Building-Related Costs	
1. Acquisition of existing structures	\$ _____
2. Renovation of existing structures	\$ _____
3. New construction costs	\$ _____
4. Electrical systems	\$ _____
5. Heating, ventilation and air conditioning	\$ _____
6. Plumbing	\$ _____
7. Other building-related costs (describe)	\$ _____

C.	Machinery and Equipment Costs	
1.	Production and process equipment	\$ _____
2.	Packaging equipment	\$ _____
3.	Warehousing equipment	\$ _____
4.	Installation costs for various equipment	\$ _____
5.	Other equipment-related costs (describe)	\$ _____
D.	Furniture and Fixture Costs	
1.	Office furniture	\$ _____
2.	Office equipment	\$ _____
3.	Computers	\$ _____
4.	Other furniture-related costs (describe)	\$ _____
E.	Working Capital Costs	
1.	Operation costs	\$ _____
2.	Production costs	\$ _____
3.	Raw materials	\$ _____
4.	Debt service	\$ _____
5.	Relocation costs	\$ _____
6.	Skills training	\$ _____
7.	Other working capital-related costs (describe)	\$ _____
F.	Professional Service Costs	
1.	Architecture and engineering	\$ _____
2.	Accounting/legal	\$ _____
3.	Other service-related costs (describe)	\$ _____
G.	Other Costs	
1.	_____	\$ _____
2.	_____	\$ _____
H.	Summary of Expenditures	
1.	Total Land-Related Costs	\$ _____
2.	Total Building-Related Costs	\$ _____
3.	Total Machinery and Equipment Costs	\$ _____
4.	Total Furniture and Fixture Costs	\$ _____
5.	Total Working Capital Costs	\$ _____
6.	Total Professional Service Costs	\$ _____
7.	Total Other Costs	\$ _____

PROJECTED CONSTRUCTION EMPLOYMENT IMPACT

I. 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		\$ _____	\$ _____
Year 1		\$ _____	\$ _____
Year 2		\$ _____	\$ _____
Year 3		\$ _____	\$ _____
Year 4		\$ _____	\$ _____
Year 5		\$ _____	\$ _____

PROJECTED PERMANENT EMPLOYMENT IMPACT

I. 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 in Section IV of the Application.

II. Estimates of the total new permanent jobs to be created by the Project are described in the tables in Section IV of the Application.

III. Please provide estimates for the following:

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

IV. Provide the projected percentage of employment that would be filled by Town of Guilderland residents: _____

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

PROJECTED OPERATING IMPACT

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

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

II. 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			
Year 1			
Year 2			
Year 3			
Year 4			
Year 5			
Year 6			
Year 7			
Year 8			
Year 9			
Year 10			

III. 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 Project is designed to serve the needs of local seniors, as typically, 80% of residents or families live within a 10 mile radius of the Facility. The seniors will benefit from an amenity and service package which will include a centralized dining room, home theater room, bingo room, fitness room, and other amenities, and services.

The services which will be available at the Facility include those which will be provided by facility staff and affiliates, described above, as well as additional services expected to be available by third party providers including medical services, podiatry, beauticians, and other community service providers.

The Project is expected to include over \$10MM of construction labor, supplies, and furniture, fixtures and equipment with respect to the construction and equipping of the Facility. It is the intention of the project developer to utilize local businesses, where possible.

The Project expects to employ approximately 82 FTE permanent jobs. These jobs include professional management positions, social work, finance, maintenance and skilled and semi-skilled health related positions. These positions will be filled through the local labor work force, where possible.

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.

Date Signed: _____, 20__.	Name of Person Completing Project Questionnaire on behalf of the Company. Name: _____ Title: _____ Phone Number: _____ Address: _____ Signature: _____
----------------------------------	---



1



2



3



4



5



6



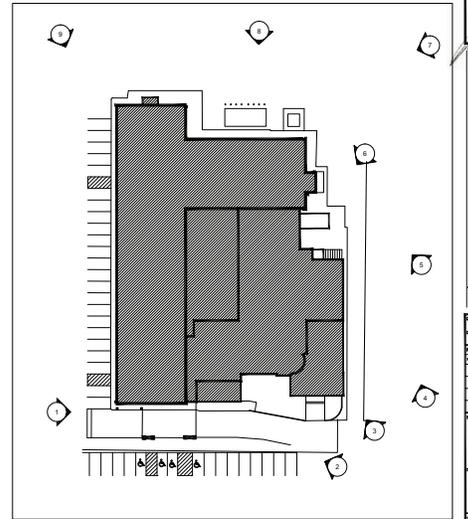
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8



9



PROMENADE AT UNIVERSITY PLACE
PROPOSED 200 BED ASSISTED LIVING FACILITY
ALBANY, NEW YORK 12208

DATE: 08/14/18
SCALE: AS SHOWN
PROJECT NO.: 18-001
SHEET NO.: T1.1
111 JAMES ST.
SYRACUSE, NY 13203

Schopfer Architects LLP
111 JAMES ST.
SYRACUSE, NY 13203
TEL: 315-474-4000
FAX: 315-474-1922

NO. 18-001
T1.1
EXISTING
BUILDING
PHOTOGRAPHS
T1.1
1666

Steven Laufer

From: Dawn Berschwinger <dawnb@togny.org>
Sent: Monday, March 13, 2017 3:34 PM
To: Steven Laufer
Subject: Special use permit 1228 Western Avenue
Attachments: CCF03132017_00000.jpg; CCF03132017_00001.jpg; CCF03132017_00002.jpg;
CCF03132017_00003.jpg; CCF03132017_00004.jpg; CCF03132017_00005.jpg;
CCF03132017_00006.jpg

The Zoning Administrator is hereby authorized to issue the permits necessary to implement this decision.

Upon compliance with all other requirements of the Town Law and other applicable laws and regulations, this resolution was adopted by a 5- 0 (Santos absent, Reese alternate) vote the Zoning Board of Appeals.

BY ORDER OF THE ZONING BOARD OF APPEALS

Dated: 1/18/17

Thomas Rennert (db)
CHAIRMAN

ATTEST: Dawn Berschinger
SECRETARY

APPLICANT: PROMENADE SENIOR LIVING

ADDRESS: 1228 WESTERN AVENUE ALBANY, NY 12203

GRANTED: JANUARY 18, 2017

WHEREAS, a public hearing to consider the applicant's request was duly noticed and held before the Zoning Board of Appeals to consider:

Special Use Permit Request No. 4612

Request of **Promenade Senior Living LLC** for a Special Use Permit under the Zoning Law to permit: **the conversion of an existing hotel to an assisted-living residential care facility.**

Per Articles **III & V** Sections **280-21 & 280-52** respectively

For property owned by **1228 Western Ave LLC**

Situated as follows: **1228 Western Avenue Albany, NY 12203**

Tax Map # **63.08-4-5** Zoned: **GB**

In rendering this decision, the Board makes the following findings of fact:

- ✓ A public hearing was duly noticed and held this evening. Three residents provided oral comments regarding the application.
- ✓ The Board adopted a negative declaration under SEQRA by a unanimous vote.
- ✓ The Town Planning Board recommended the use with the suggestions as noted.
- ✓ Albany County Planning Board recommended approval subject to several factors as noted.
- ✓ Parking on site is certainly sufficient for the intended use.

Based on these findings, I move that the Board **grant** the special use permit with the following conditions:

- ✓ Adherence to the plans and application as submitted and all representations made here this evening to the Board.
- ✓ Applicant must work with the Town EMS for any of their concerns regarding access.
- ✓ The additional 14,000sf Special Use Permit action will include shared access discussion.

The Zoning Administrator is authorized to take necessary actions to implement this decision.

Motion seconded by Sharon Cupoli. Vote 5 – 0. (Santos absent, Reese alternate)

MATTER OF GENITOR ORGANIZATION – 2298-2314 WESTERN AVENUE

Chairman Remmert stated that this is an angle of repose issue and they might possibly be moving some of the buildings to remove the variance from the angle of repose.

Chairman Remmert stated that Delaware Engineering was appointed by the Board as the TDE several years ago to take a look at the project.

Jackie Coons stated that if Delaware Engineering agrees with their angle of repose designation and they do not need a variance, it will be strictly a Town Board matter.

Chairman Remmert made a motion to continue the public hearing, motion seconded by Sharon Cupoli. Vote 5 – 0. (Santos absent, Reese alternate)

MATTER OF PROMENADE SENIOR LIVING – 1228 WESTERN AVENUE

Jake Crawford read the legal notice:

“Notice is hereby given that the Zoning Board of Appeals of the Town of Guilderland, New York, will hold a public hearing pursuant to Articles **III & V** of the Zoning Law on the following proposition:

Special Use Permit Request No. 4612

Request of **Promenade Senior Living LLC** for a Special Use Permit under the Zoning Law to permit: **the conversion of an existing hotel to an assisted-living residential care facility.**

Per Articles **III & V** Sections **280-21 & 280-52** respectively

For property owned by **1228 Western Ave LLC**

Situated as follows: **1228 Western Avenue Albany, NY 12203**

Tax Map # **63.08-4-5** Zoned: **GB**

Plans open for public inspection at the Building Department during normal business hours. Said hearing will take place on the **18th of January, 2017** at the Guilderland Town Hall beginning at 7:30pm.

Dated: **January 11, 2017**”

The file consists of the mailing list to 62 neighboring property owners, the Town’s required forms for a special use permit along with a Short Environmental Assessment Form under SEQRA, the Town Planning Board’s site plan review of 12/14/16, Albany County Planning Board’s notification of 12/20/16, a project narrative, a copy of the purchase and sale agreement, and maps and drawings of the property.

Albany County Planning Board's notification was as follows:

Considerations: Special Use Permit to allow conversion of an existing hotel (Best Western Hotel) to an assisted living center with 200 beds. No changes are proposed to the building footprint, no additions will be made. The building is two story in some sections and five stories in other sections, it has a total of 119,450sf. The facility will have 35-40 employees on shifts to cover 24:7 staffing needs. There are two curb cuts to SR20 that will remain. There are 334 parking spaces on the site, but no information was given on the required number of spaces for the new use. Applicant states that few if any residents will drive. The City of Albany municipal line runs through the property, approximately 55 parking spaces on the site are within the city's boundary. The current owner of the property owns adjacent commercial uses and shares the parking lot with those uses.

Modify local approval to include:

- 1) Review and approvals by NYSDOH for required licensing.
- 2) Due to the change in use, review by NYSDOT for design of highway access, drainage and assessment of road capacity. NYSDOT should have a chance to review the curb cuts in case any changes are deemed necessary.
- 3) Notification to the City of Albany Building Department and Planning Department due to the fact that an adjacent restaurant (City Line) within the City currently uses the parking lot for the hotel.
- 4) Before any approvals are granted, the town should determine how many parking spaces will be required for the proposed use, how many spaces will be used by other commercial properties and if there is a shared parking and access agreement. If shared parking is not acceptable to the applicants; then possibly a sale of a portion of the hotel property parking lot can be made to accommodate parking for adjacent commercial uses.
- 5) There is currently a connection between the parking lots for the hotel and adjacent commercial property to the east that is not shown on the site plan. This cross access connection should remain to provide good access management design along a busy state highway and provide access to the existing traffic signal for left hand turns. The cross access connection should be recorded in the deeds of both properties as part of the sale of the hotel property.
- 6) Review by town emergency services for access.

Advisory: The Town may want to consider additional landscaping or green space if the unused asphalt parking area shown on the plan is not needed for parking.

The Town Planning Board's site plan review of 12-14-16 was to recommend with the following conditions:

- Consider a cross access easement with the neighboring property to the east for access to the traffic light.
- Consider removal of additional asphalt pavement in the rear of the property not needed to support the use.
- Consider planting deciduous street trees along the Western Avenue frontage.

Ben Laufer, President of Development of Promenade Senior Living, described the nature of the operation.

David Schlosser of Schopfer Architects noted the submission of a last minute minor site plan modification. Mr. Schlosser stated that there are no modifications being made to the footprint of the building, there are some modifications being made to the site for the benefit of the residents. Across the front of the façade, the asphalt is being removed and trees and shrubbery will be going in there; it will help mask and soften the look of the existing hotel. Additionally, at each of the curbcuts they have created an island and added trees also. With respect to parking, the spaces needed would be mainly for staff. The restaurant area of the existing hotel (14,000sf) will remain unoccupied until such time as the applicant returns with a use that they feel is appropriate for that space. Mr. Schlosser stated that their parking needs for the assisted living facility would be for shift change, and about 60 spaces needed. The remainder of the spaces are being left open for potential use by whatever goes into the restaurant. Mr. Schlosser stated that whatever goes into the restaurant will be health related, will be compatible and consistent with the assisted living facility.

Mr. Schlosser stated that there is not a shared access agreement with the property to the east at this time. If they were able to come to an agreement, it would have to be very controlled and not affect the residents of the assisted living facility.

Chairman Remmert stated that an agreement with the neighbor for their employee parking might be a possibility. Chairman Remmert stated that they were under no obligation to open up and connect the parking lots.

There was discussion regarding EMS and fire department concerns.

Mr. Schlosser stated that the concerns of the fire chief were addressed at the Planning Board meeting. The site plan will be modified to accommodate an exceptionally high volume of EMS call personnel.

Jake Crawford asked if the residents would be allowed to have a car.

Mr. Schlosser replied that a very low percentage of residents will retain a personal vehicle.

Mr. Schlosser stated that 65% to 70% of the rooms will be converted to "private accommodations" with private bathrooms. All of the banquet space and common area will be converted into dining and activity areas. The indoor swimming pool will be removed. The existing kitchen facility will prepare three meals a day and there is no cooking permitted in the resident's rooms.

Chairman Remmert asked if there were any questions or comments from the residents.

Debbie Trees of 8 Ayre Drive, prefers to have use of the traffic light required for access safety and is happy to see this space utilized in this way.

Martha Harauz of 1445 Western Avenue had concerns for traffic safety accessing the site.

Bill Coons of 12 Lee Avenue complimented the additional greenspace and encouraged shared access for improved traffic functioning.

Chairman Remmert stated that the big issue is the access to the traffic light; everyone is recommending it.

Mr. Schlosser emphasized that they would need to come back to amend the special use permit for the space that is not being used for the assisted living facility. At that time, they can separate the need for this access because it is really not needed for the assisted living facility. They would like to continue discussions with their neighbor and see if they can work something out and address that for the alternate use.

There was discussion regarding the cellular antennas on the roof of the building.

Jim Potter, attorney for the applicant, reminded the Board that green space additions can be addressed when the applicant amends the special use permit for the current restaurant space conversion. They will keep discussions open with the east property until that time also.

Chairman Remmert stated that their approval tonight is subject to all the representations made here tonight.

Chairman Remmert made a motion to close the public hearing. Motion seconded by Sharon Cupoli. Vote 5 – 0. (Santos absent, Reese alternate)

Chairman Remmert made a motion of non-significance in this Unlisted Action:
“This Board has conducted a careful review of this application to determine whether the granting of this special use permit to use the building for an adult assisted living center will have a significant negative impact upon the environment. In conducting this review, this Board has considered comments provided to us by the applicant, neighboring property owners, the Town Planning Board, the Albany County Planning Board and our review of the application. Based on this collective record, I move that a negative declaration under SEQRA be issued.” Motion seconded by Sharon Cupoli. Vote 5 – 0. (Santos absent, Reese alternate)

Chairman Remmert made a motion for approval of:

Special Use Permit Request No. 4612

Request of **Promenade Senior Living LLC** for a Special Use Permit under the Zoning Law to permit: **the conversion of an existing hotel to an assisted-living residential care facility.**

Per Articles **III & V** Sections **280-21 & 280-52** respectively

For property owned by **1228 Western Ave LLC**

Situated as follows: **1228 Western Avenue Albany, NY 12203**

Tax Map # **63.08-4-5** Zoned: **GB**

In rendering this decision, the Board makes the following findings of fact:

A public hearing was duly noticed and held this evening. Three residents provided oral comments regarding the application.

The Board adopted a negative declaration under SEQRA by a unanimous vote.

The Town Planning Board recommended the use with the suggestions as noted.

Albany County Planning Board recommended approval subject to several factors as noted.

Parking on site is certainly sufficient for the intended use.

Based on these findings, I move that the Board grant the special use permit with the following conditions:

Adherence to the plans and application as submitted and all representations made here this evening to the Board.

Applicant must work with the Town EMS for any of their concerns regarding access.

The additional 14,000sf Special Use Permit action will include shared access discussion.

The Zoning Administrator is hereby authorized to issue the permits necessary to implement this decision.

Motion seconded by Sharon Cupoli. Vote 5 – 0. (Santos absent, Reese alternate)

MATTER OF RYAN JANKOW – 1206-1210 WESTERN AVENUE

Sindi Saita read the legal notice:

“Notice is hereby given that the Zoning Board of Appeals of the Town of Guilderland, New York, will hold a public hearing pursuant to Articles III, IV & V of the Zoning Law on the following proposition:

Special Use Permit/Variance Request No. 4575

Request of Ryan Jankow for a Variance of the regulations/ Special Use Permit under the Zoning Law to permit: the demolition of an existing residence and the construction of a 5220sf local shopping center in a GB zone. Variances are requested to permit the following: (1) a 6ft side yard setback where 15ft is required (2) a 9ft front yard setback where 25ft is required (3) the elimination of a required 75ft rear yard buffer and (4) 15% green space where 25% is required.

Per Articles III, IV & V Sections 280-21, 280-24, 280-27, 280-51 & 280-52 respectively

For property owned by Twelve Hundred Western Ave LLC

SUBMISSION FOR SPECIAL USE PERMIT & PLANNING APPROVAL

PROMENADE AT UNIVERSITY PLACE

PROPOSED 200 BED ASSISTED LIVING FACILITY

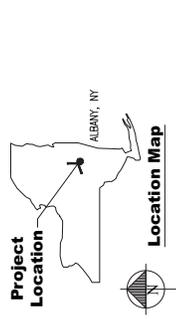
1228 WESTERN AVENUE
ALBANY, NEW YORK 12203 TOWN OF GUILDERLAND, ALBANY COUNTY



Project No. 1666
Date: 11-23-16

List of Drawings

- T1.0 — TITLE SHEET
- T1.1 — EXISTING BUILDING PHOTOGRAPHS
- L1.0 — EXISTING SURVEY
- L1.1 — PROPOSED SITE PLAN & DETAILS



Existing Hotel & Restaurant To Be Converted Into Assisted Living



Zoning Summary:
EXISTING HOTEL SITE & BUILDING FOR CONVERSION TO 200 BED RESIDENTIAL CARE FACILITY, ASSISTED LIVING

Code Item	Code Requirement	Existing Condition	Proposed
1. Zoning	OB (General Business)	OB (General Business)	OB (General Business)
2. Use	*****	Hotel & Restaurant	Residential Care Facility
3. Permitted Use	*****	Residential Care Facility	Residential Care Facility
4. Lot Area	20,000 Sq. Ft. (Minimum)	613 Acres	No Change
5. Building Line	100 Ft. (Minimum)	28985 Ft.	No Change
6. Front Yard	25 Ft. (Minimum)	30'-4"	No Change
7. Side Yard	15 Ft. (Minimum)	15 Ft. & 71 Ft.	No Change
8. Rear Yard	15 Ft. (Minimum)	115'-8"	No Change
9. Lot Coverage	75% (Maximum)	12.8 %	No Change
10. Height	3 1/2 Stories	55 Ft.	No Change
10. Parking	1 Per Bed	325 Stopped Spaces 8 Handicap Spaces 311 Total Parking Spaces	501 Regular Spaces 8 Handicap Spaces 311 Total Parking Spaces

EXISTING BUILDING AREA

FLOOR	TOTAL
BASEMENT	6,200 SF
FIRST FLOOR	33,204 SF
SECOND FLOOR	17,519 SF
THIRD FLOOR	17,519 SF
FOURTH FLOOR	17,519 SF
FIFTH FLOOR	17,519 SF
TOTAL	119,452 SF

PROMENADE AT UNIVERSITY PLACE
PROPOSED 200 BED ASSISTED LIVING FACILITY
1828 WESTERN AVENUE
ALBANY, NEW YORK 12203



Schopfer Architects LLP
1111 JAMES ST.
SYRACUSE, NY 13203
PHONE: 315-474-8501
FAX: 315-474-1922

DATE: 11/23/16
SCALE: AS NOTED
PROJECT: 1666
SHEET: T1.0



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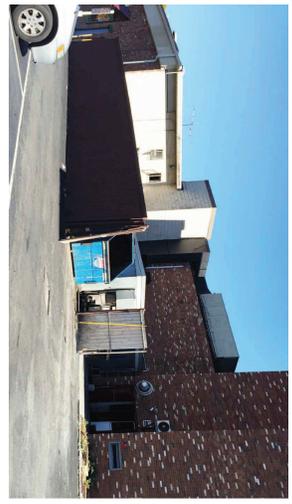
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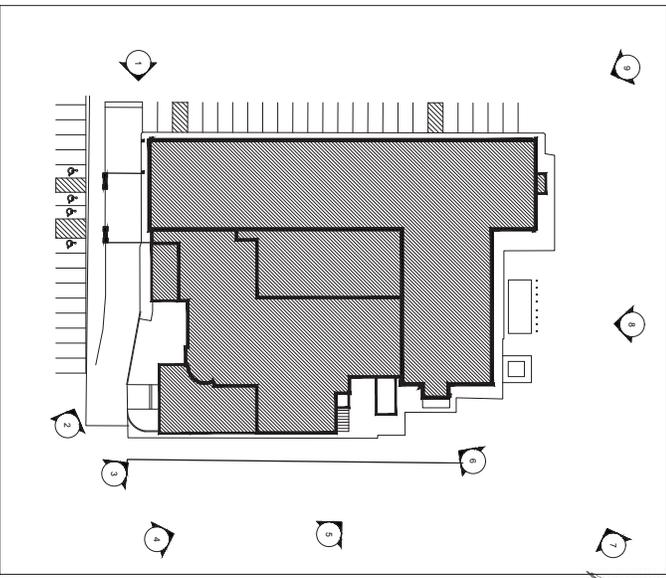
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9



**PROMENADE AT UNIVERSITY PLACE
PROPOSED 200 BED ASSISTED LIVING FACILITY**

1228 WESTERN AVENUE
ALBANY, NEW YORK 12203

Schopfer Architects LLP

315-474-8501
315-474-1922

5111 JAMES ST.
SYRACUSE, NY 13203

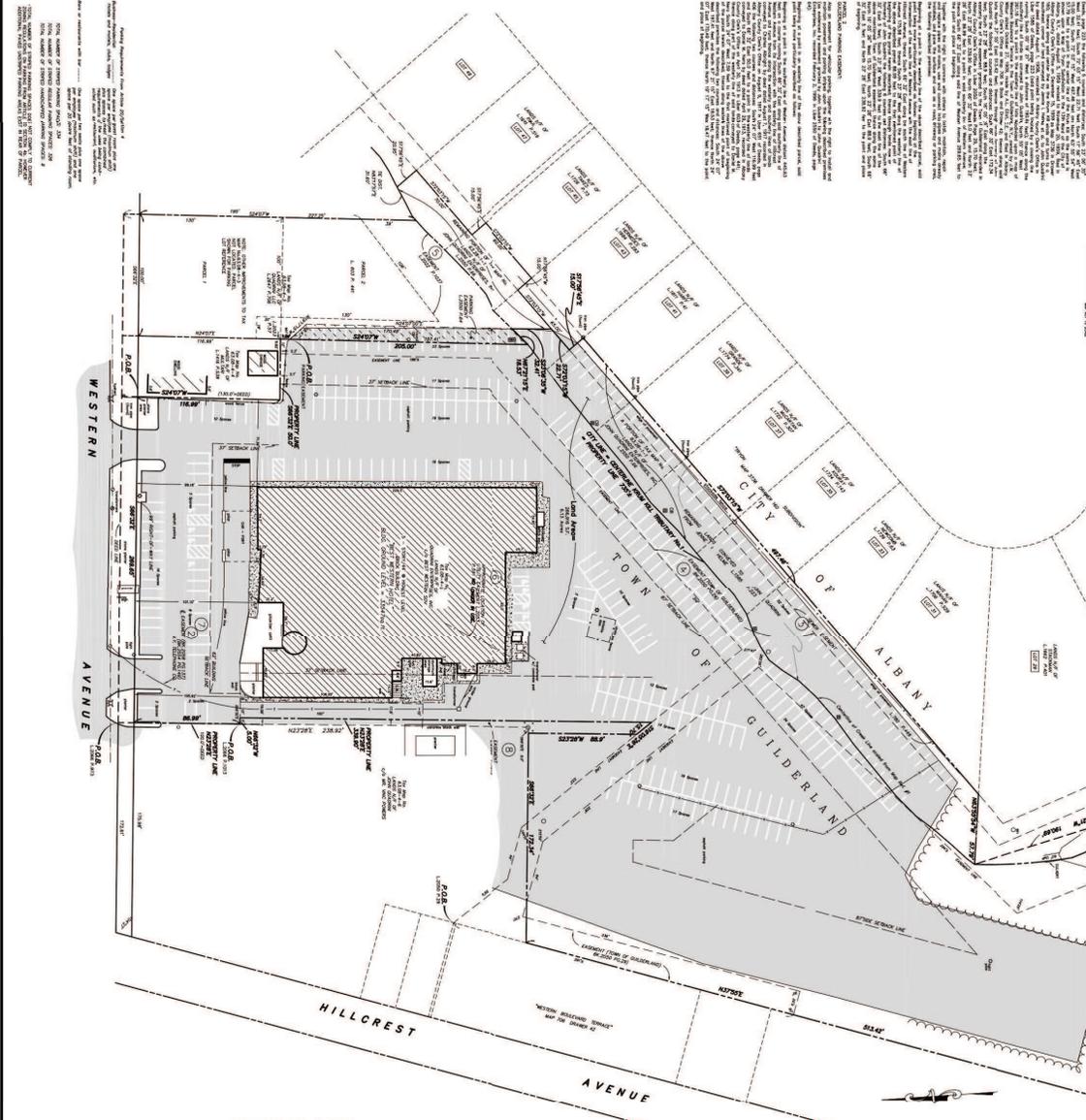
EXISTING
DRAWING
PHOTOGRAPHS

T1.1

1666

LOCAL DESCRIPTION

The site is located in the City of Albany, New York, within the Town of Guilderland. The site is bounded by Western Avenue to the west, Hillcrest Avenue to the south, and University Place to the east. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility. The site is zoned R-100, which allows for residential care facilities. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet. The site is bounded by Western Avenue to the west, Hillcrest Avenue to the south, and University Place to the east. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility. The site is zoned R-100, which allows for residential care facilities. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet.



LEGEND

- 1. Proposed Building Footprint
- 2. Proposed Parking
- 3. Proposed Driveway
- 4. Proposed Landscaping
- 5. Proposed Site Elevation
- 6. Proposed Site Grading
- 7. Proposed Site Utilities
- 8. Proposed Site Access
- 9. Proposed Site Fencing
- 10. Proposed Site Lighting
- 11. Proposed Site Signage
- 12. Proposed Site Security
- 13. Proposed Site Maintenance
- 14. Proposed Site Safety
- 15. Proposed Site Health
- 16. Proposed Site Environment
- 17. Proposed Site Community
- 18. Proposed Site Culture
- 19. Proposed Site Recreation
- 20. Proposed Site Education

SCHEDULE OF ITEMS

1. Site Plan
2. Grading Plan
3. Utility Plan
4. Access Plan
5. Fencing Plan
6. Lighting Plan
7. Signage Plan
8. Security Plan
9. Maintenance Plan
10. Safety Plan
11. Health Plan
12. Environment Plan
13. Community Plan
14. Culture Plan
15. Recreation Plan
16. Education Plan

FLOOD NOTE

The site is located in a flood plain area. The site is bounded by Western Avenue to the west, Hillcrest Avenue to the south, and University Place to the east. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility. The site is zoned R-100, which allows for residential care facilities. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet.

GENERAL NOTES

1. The site is located in a flood plain area.
2. The site is bounded by Western Avenue to the west, Hillcrest Avenue to the south, and University Place to the east.
3. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility.
4. The site is zoned R-100, which allows for residential care facilities.
5. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet.
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23. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility.
24. The site is zoned R-100, which allows for residential care facilities.
25. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet.

APPROPRIATE ZONING NOTE

The site is located in a flood plain area. The site is bounded by Western Avenue to the west, Hillcrest Avenue to the south, and University Place to the east. The site is currently vacant and is proposed for the construction of a 200-bed assisted living facility. The site is zoned R-100, which allows for residential care facilities. The site is situated on a 10-acre parcel with a total area of approximately 435,600 square feet.

CONTRACTOR'S CERTIFICATION

I, the undersigned, certify that I am the owner of the property described herein and that I have authorized the preparation of this plan. I understand that this plan is subject to the approval of the appropriate authorities and that I am responsible for obtaining all necessary permits and approvals. I understand that this plan is subject to the approval of the appropriate authorities and that I am responsible for obtaining all necessary permits and approvals.

ALTA/ASLR LAND TITLE SURVEY
 No. 1228
 WESTERN AVENUE
 ALBANY, NEW YORK

L1.0
 EXISTING SITE
 SHEET 1 OF 1

Schopfer Architects LLP
 5111 JAMES STREET
 SYRACUSE, NY 13203
 315-474-8001
 FAX 315-474-1922

DISCLAIMER
 THE ARCHITECT SHALL BE RESPONSIBLE FOR THE DESIGN AND CONSTRUCTION OF THE PROJECT AND SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS. THE ARCHITECT SHALL NOT BE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION PROVIDED BY THE CLIENT OR FOR THE RESULTS OF THE CONSTRUCTION.

PROMENADE AT UNIVERSITY PLACE
 PROPOSED 200 BED ASSISTED LIVING FACILITY
 1228 WESTERN AVENUE
 ALBANY, NEW YORK 12203

PROPOSED 200 BED ASSISTED LIVING FACILITY

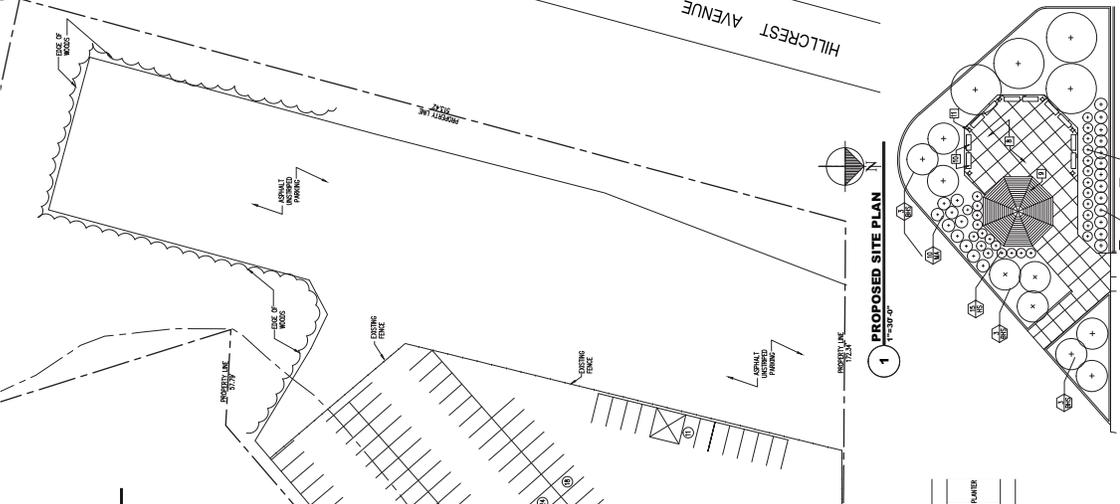
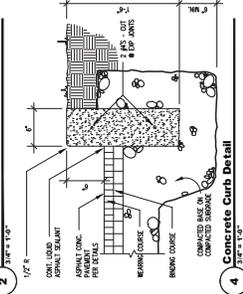
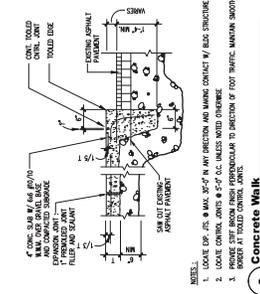
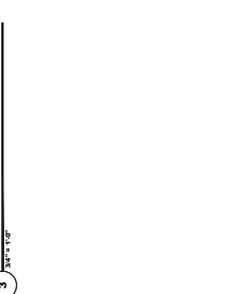
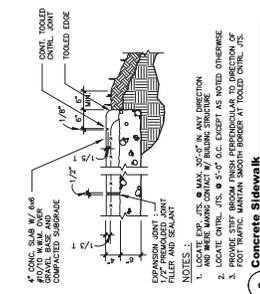
1225 WESTERN AVENUE
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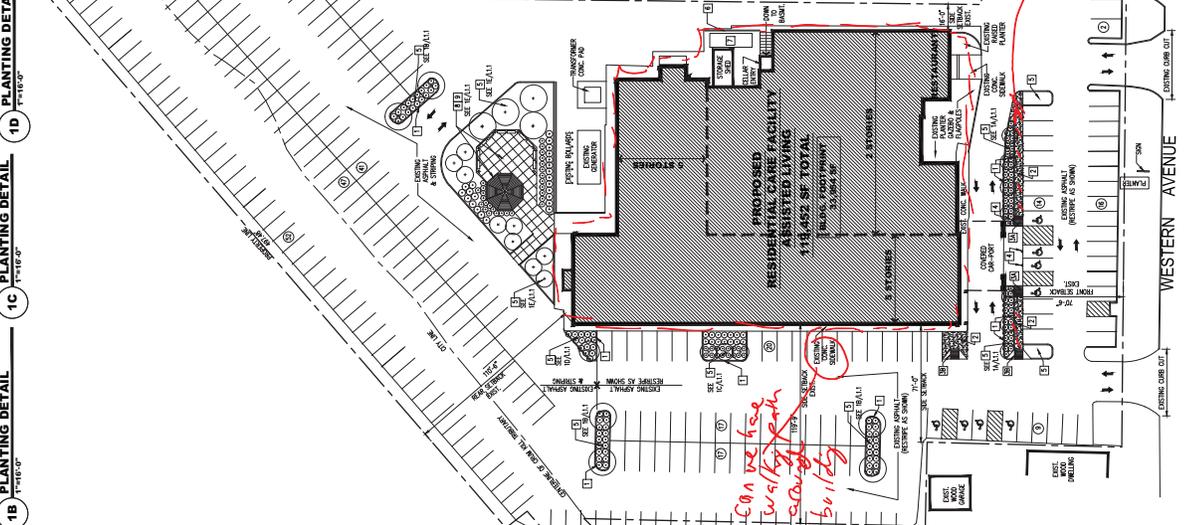
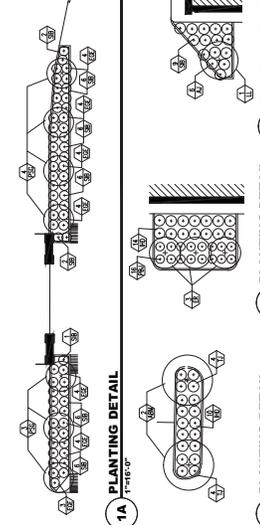
PROPOSED
SITE PLAN
& DETAILS

DATE: 11/11/11
DRAWN BY: [Signature]

NO. 1666



- KEYED DRAWING NOTES:**
- 1 NEW CONCRETE CURBING
 - 2 REBAR CONCRETE SIDEWALK AS REQUIRED
 - 3 NEW CONCRETE CURB RAMP
 - 4 NEW CONCRETE SIDEWALK AS REQUIRED
 - 5 TYPICAL SIDE DETAIL
 - 6 NEW CONCRETE SIDEWALK AS REQUIRED
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PLANTING SCHEDULE

NO.	QTY.	EXISTING NAME (COMMON NAME)	SIZE	REMARKS
1	1	PLANT 1 (COMMON NAME)	18" x 18"	
2	1	PLANT 2 (COMMON NAME)	18" x 18"	
3	1	PLANT 3 (COMMON NAME)	18" x 18"	
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98	1	PLANT 98 (COMMON NAME)	18" x 18"	
99	1	PLANT 99 (COMMON NAME)	18" x 18"	
100	1	PLANT 100 (COMMON NAME)	18" x 18"	

Can we use walkway path as concrete?

Do we need this concrete?