

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2024 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address: GLEN COVE VILLA, LLC 402188 KIRBY LANE

SYOSSET, NY 11791

Project Name: 2021 VILLA AT GLEN COVE

**Job Information**

Current number of full time equivalent employees ("FTE") **retained** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

Category	FTE	Average Salary and Fringe Benefits or Ranges
Full Time	<u>0</u>	<u>N/A</u>
Part Time	<u>0</u>	<u>N/A</u>
Construction	<u>32</u>	<u>PAID BY CONTRACTOR</u>
Other	<u>49</u>	<u>PAID BY VENDOR</u>

Current number of full time equivalent employees ("FTE") **created** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

Category	FTE	Average Salary and Fringe Benefits or Ranges
Full Time	<u>0</u>	<u>N/A</u>
Part Time	<u>0</u>	<u>N/A</u>
Construction	<u>0</u>	<u>N/A</u>
Other	<u>0</u>	<u>N/A</u>

A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a **bond or note**)

Yes   No

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued \_\_\_\_\_
- Outstanding principal balance of such bond or note as of December 31 \_\_\_\_\_
- Outstanding principal balance of such bond or note as of December 31 \_\_\_\_\_

Final maturity date of the bond or note \_\_\_\_\_

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project During the prior year?

Yes  No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

\_\_\_\_\_ No ACCOUNT

(Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project During the prior year?

Yes   No

(note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

\$ \_\_\_\_\_

**TAX AGREEMENT INFORMATION: (EXEMPTIONS)**

County Real Property Tax without Tax Agreement	\$ _____
City/Town Property Tax without Tax Agreement	\$ _____
School Property Tax without Tax Agreement	\$ <u>41,591.80</u>
<b>TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT</b>	\$ _____


Total Tax Agreement Payments due without PILOT: \$ 41,591.80

Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)

County Tax Agreement Payment	\$ _____
City Tax Agreement Payment	\$ _____
School Tax Agreement Payment	\$ _____
Library Tax Agreement Payment	\$ _____
TOTAL TAX AGREEMENT PAYMENTS	\$ _____

Net Exemptions \$ \_\_\_\_\_  
(subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of jobs retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to voidance of the agreement and potential claw back of benefits.

Signed:  \_\_\_\_\_

Name: Manoj Narang

Title: Project Owner

(authorized company representative)

Date: 02/14/2025

Adopted 6-25-19

**Glen Cove Villa LLC**  
**Quarter End December 31, 2024**  
**List of Contractors**

<b>Company</b>	<b>Trade</b>	<b># of Employees</b>
Kulka LLC	Construction Manager	6
Concrete Works Corp	Concrete Subcontractor	15
United Site Services	Fence Subcontractor	10
Beaver Lanscaprers Corp	Landscaper	1
R&M Engineering	Civil Engineer	3
Special Testing & Consulting LLC	Special Inspector	4
Raymond Chan Architect PC	Architect	4
B. Laing Associates	SWPPP Inspector	3
Mueser Rutledge Consulting Engineers	Geotechnical Engineer	8
Craig Geotechnical Drilling	Cone Penetration Testing	3
Northcoast Civil LS & PE, PC	Land Surveyors	4
L2H Group LLC	Sitework	12
Whitestone Associates, Inc.	Engineer	3
Wexler Associates	Structural Engineer	5