

## BROWNFIELD CLEANUP PROGRAM (BCP) APPLICATION TO AMEND BROWNFIELD CLEANUP AGREEMENT AND AMENDMENT

#### PART I. BROWNFIELD CLEANUP AGREEMENT AMENDMENT APPLICATION

Check the appropriate box below based on the nature of the amendment modification requested:

	Amendment to	Icheck o	one or more	e boxes	belowl
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- o Add
- Substitute
- o Remove
- Change in Name

applicant(s) to the existing Brownfield Cleanup Agreement [Complete Section I-IV below and Part II]

Does this proposed amendment involve a transfer of title to all or part of the brownfield site? Yes No

If yes, pursuant to 6 NYCRR Part 375-1.11(d), a Change of Use form should have been previously submitted. If not, please submit this form with this Amendment. See http://www.dec.ny.gov/chemical/76250.html

Amendment to modify description of the property(ies) listed in the existing Brownfield Cleanup Agreement [Complete Sections I and V below and Part II]

Amendment to Expand or Reduce property boundaries of the property(ies) listed in the existing Brownfield Cleanup Agreement [Complete Section I and V below and Part II]

**Sites in Bronx, Kings, New York, Queens, or Richmond counties ONLY:** Amendment to request determination that the site is eligible for the tangible property credit component of the brownfield redevelopment tax credit. Please answer questions on the supplement at the end of the form.

Other (explain in detail below)

	Please provide a brief narrative on the nature of the amendment:
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<sup>\*</sup>Please refer to the attached instructions for guidance on filling out this application\*

Section I. Existing Agreement In	nformation			
BCP SITE NAME:		BCP SITE NUMBER:		
NAME OF CURRENT APPLICAN	T(S):			
INDEX NUMBER OF EXISTING A	AGREEMENT:	DATE OF EXISTING AGREEMENT:		
Section II. New Requestor Inform	mation (if no chang	e to Current Applicant, skip to Section V)		
NAME				
ADDRESS				
CITY/TOWN		ZIP CODE		
PHONE Is the requestor authorized to con-	FAX	E-MAIL v York State (NYS)? Yes No		
<ul> <li>If the requestor is a Corporation, LLC, LLP or other entity requiring authorization from the NYS Department of State to conduct business in NYS, the requestor's name must appear, exactly as given above, in the NYS Department of State's (DOS) Corporation &amp; Business Entity Database. A print-out of entity information from the DOS database must be submitted to DEC with the application, to document that the applicant is authorized to do business in NYS.</li> </ul>				
NAME OF NEW REQUESTOR'S	REPRESENTATIVE			
ADDRESS				
CITY/TOWN	,	ZIP CODE		
PHONE	FAX	E-MAIL		
NAME OF NEW REQUESTOR'S CONSULTANT (if applicable)				
ADDRESS				
CITY/TOWN		ZIP CODE		
PHONE	FAX	E-MAIL		
NAME OF NEW REQUESTOR'S	ATTORNEY (if appli	cable)		
ADDRESS				
CITY/TOWN		ZIP CODE		
PHONE	FAX	E-MAIL		
Requestor must submit proof that the party signing this Application and Amendment has the authority to bind the Requestor. This would be documentation from corporate organizational papers, which are updated, showing the authority to bind the corporation, or a Corporate Resolution showing the same, or an Operating Agreement or Resolution for an LLC. Is this proof attached?  Yes  No				
Describe Requestor's Relationship	o to Existing Applicar	nt:		

		wner/Operator Information (only inclu ation is provided, and highlight new		rator or	new
O۷	VNER'S NAME (if different fror	m requestor)			
ΑC	DDRESS				
CI.	TY/TOWN		ZIP CODE		
PH	IONE	FAX	E-MAIL		
OF	PERATOR'S NAME (if differen	t from requestor or owner)			
ΑC	DRESS				
CI	TY/TOWN		ZIP CODE		
PH	IONE	FAX	E-MAIL		
So	ction IV Fligibility Information	on for New Requestor (Please refer to	FCI & 27-1/07 for m	nore de	tail\
	<u> </u>				lalij
IT &	answering "yes" to any of the fo	ollowing questions, please provide an ex	pianation as an attach	iment.	
1.	Are any enforcement actions	pending against the requestor regarding	g this site?	Yes	No
2.	Is the requestor presently sub relating to contamination at the	oject to an existing order for the investigate site?	ation, removal or reme	diation Yes	No
3.		outstanding claim by the Spill Fund for ther a party is subject to a spill claim sho		Yes the Sp	No ill
4.	any provision of the subject la	mined in an administrative, civil or crimir w; ii) any order or determination; iii) any imilar statute, regulation of the state or attachment.	/ regulation implement	ing ECL	-
5.		peen denied entry to the BCP? If so, inc dress, Department assigned site number			
6.		in a civil proceeding to have committed ring, treating, disposing or transporting or		nally to Yes	rtious No
7.	disposing or transporting of co	cted of a criminal offense i) involving the ontaminants; or ii) that involves a violent inistration (as that term is used in Article state?	felony, fraud, bribery,	perjury,	theft,
8.	jurisdiction of the Department,	alsified statements or concealed materia or submitted a false statement or made ent or application submitted to the Depa	use of or made a fals		
9.	•	or entity of the type set forth in ECL 27- or failure to act could be the basis for de	. ,		ct
				Yes	No
10	·	tion in any remedial program under DEC antially comply with an agreement or orc	•	ed by DE Yes	EC or No
11	. Are there any unregistered bu	ulk storage tanks on-site which require re	egistration?	Yes	No

THE NEW REQUESTOR MU	JST CERTIFY THAT IT	IS EITHER A PARTICIP	ANT OR VOLUNTEER IN
ACCORDANCE WITH ECL §	27-1405 (1) BY CHEC	KING ONE OF THE BOX	(ES BELOW:

#### **PARTICIPANT**

A requestor who either 1) was the owner of the site at the time of the disposal of contamination or 2) is otherwise a person responsible for the contamination, unless the liability arises solely as a result of ownership, operation of, or involvement with the site subsequent to the disposal of contamination.

#### **VOLUNTEER**

A requestor other than a participant, including a requestor whose liability arises solely as a result of ownership, operation of or involvement with the site subsequent to the disposal of hazardous waste or discharge of petroleum.

NOTE: By checking this box, a requestor whose liability arises solely as a result of ownership, operation of or involvement with the site certifies that he/she has exercised appropriate care with respect to the hazardous waste found at the facility by taking reasonable steps to: i) stop any continuing discharge; ii) prevent any threatened future release; iii) prevent or limit human, environmental, or natural resource exposure to any previously released hazardous waste.

If a requestor whose liability arises solely as a result of ownership, operation of or involvement with the site, submit a statement describing why you should be considered a volunteer – be specific as to the appropriate care taken.

	specific as to the appropriate care taken.
Requestor's Relationship to Property (check one):	
Prior Owner Current Owner Potential /Fu	ture Purchaser Other
If requestor is not the current site owner, <b>proof of site must be submitted</b> . Proof must show that the requestion BCA and throughout the BCP project, including the abattached?  Yes  No  Note: a purchase contract does not suffice as process.	stor will have access to the property before signing the illity to place an easement on the site Is this proof

Section V. Property description and description of changes/additions/reductions (if applicable)					
ADDRESS					
CITY/TOWN			ZIP C	ODE	
TAX BLOCK AND LOT (TBL) (in existing agreement)					
Parcel Address	Parcel No.	Section No.	Block No.	Lot No.	Acreage

Check appropriate boxes below:					
Changes to metes and bounds description or TBL correction					
Addition of property (may require additional citizen participation depending on the nature of the expansion – see attached instructions)				the	
Approximate acreage added:					
ADDITIONAL PARCELS:					
Parcel Address	Parcel No.	Section No.	Block No.	Lot No.	Acreage
Reduction of property					
Approximate acreage removed:					
PARCELS REMOVED:					
Parcel Address	Parcel No.	Section No.	Block No.	Lot No.	Acreage
If requesting to modify a metes and bounds description of please attach a revised metes and bounds description, s	•				

# Supplement to the Application To Amend Brownfield Cleanup Agreement And Amendment - Questions for Sites Seeking Tangible Property Credits in New York City ONLY.

Property is in Bronx, Kings, New York, Queens, or Richmond counties.

Requestor seeks a determination that the site is eligible for the tangible property credit component of the brownfield redevelopment tax credit.

Yes No

#### Please answer questions below and provide documentation necessary to support answers.

- 1. Is at least 50% of the site area located within an environmental zone pursuant to Tax Law 21(6)? Please see <a href="DEC's website">DEC's website</a> for more information. Yes No
- 2. Is the property upside down as defined below?

Yes No

No

#### From ECL 27-1405(31):

"Upside down" shall mean a property where the projected and incurred cost of the investigation and remediation which is protective for the anticipated use of the property equals or exceeds seventy-five percent of its independent appraised value, as of the date of submission of the application for participation in the brownfield cleanup program, developed under the hypothetical condition that the property is not contaminated.

3. Is the project an affordable housing project as defined below?

Yes No

From 6 NYCRR 375- 3.2(a) as of August 12, 2016:

- (a) "Affordable housing project" means, for purposes of this part, title fourteen of article twenty seven of the environmental conservation law and section twenty-one of the tax law only, a project that is developed for residential use or mixed residential use that must include affordable residential rental units and/or affordable home ownership units.
- (1) Affordable residential rental projects under this subdivision must be subject to a federal, state, or local government housing agency's affordable housing program, or a local government's regulatory agreement or legally binding restriction, which defines (i) a percentage of the residential rental units in the affordable housing project to be dedicated to (ii) tenants at a defined maximum percentage of the area median income based on the occupants' households annual gross income.
- (2) Affordable home ownership projects under this subdivision must be subject to a federal, state, or local government housing agency's affordable housing program, or a local government's regulatory agreement or legally binding restriction, which sets affordable units aside for home owners at a defined maximum percentage of the area median income.
- (3) "Area median income" means, for purposes of this subdivision, the area median income for the primary metropolitan statistical area, or for the county if located outside a metropolitan statistical area, as determined by the United States department of housing and urban development, or its successor, for a family of four, as adjusted for family size.

#### PART II. BROWNFIELD CLEANUP PROGRAM AMENDMENT

Existing Agreement Information		
BCP SITE NAME: Hope Street Project	BCP SITE NUMBER: C224281	
NAME OF CURRENT APPLICANT(S): Hope Keap LLC		
INDEX NUMBER OF EXISTING AGREEMENT: C224281-12-18		
EFFECTIVE DATE OF EXISTING AGREEMENT: 01/17/2019		

#### Declaration of Amendment:

By the Requestor(s) and/or Applicant(s) signatures below, and subsequent signature by the Department, the above application to amend the Brownfield Cleanup Agreement described above is hereby approved. This Amendment is made in accordance with and subject to all of the BCA and all applicable guidance, regulations and state laws applicable thereto. All other substantive and procedural terms of the Agreement will remain unchanged and in full force and effect regarding the parties to the Agreement.

Nothing contained herein constitutes a waiver by the Department or the State of New York of any rights

Statement of 0	Certification and Signatures: New Requestor(s) (if applicable)
(Individual)	
my knowledge misdemeanor p approval for the Department.	that information provided on this form and its attachments is true and complete to the best of and belief. I am aware that any false statement made herein is punishable as a Class A bursuant to section 210.45 of the Penal Law. My signature below constitutes the requisite a amendment to the BCA Application, which will be effective upon signature by the
Date: 4/18	/2025 Signature:
Print Name: 5	olomon Schwimmer
(Entity)	
am authorized supervision and complete to the punishable as a BCA Application	that I am (title Authorized Signatory ) of (entity Hope-Keap Owner LLC ); that by that entity to make this application; that this application was prepared by me or under my direction; and that information provided on this form and its attachments is true and e best of my knowledge and belief. I am aware that any false statement made herein is a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.
Print Name: So	olomon Schwimmer

Statement of Certification and Signatures: Existing Applicant(s) (an authorized representative of each applicant must sign)
(Individual)
I hereby affirm that I am a party to the Brownfield Cleanup Agreement and/or Application referenced in Section I above and that I am aware of this Application for an Amendment to that Agreement and/or Application. My signature below constitutes the requisite approval for the amendment to the BCA Application, which will be effective upon signature by the D epartment.
Date: 4/18/200 Signature:  Print Name: Solomon Schwimmer
Print Name: Solomon Schwimmer
(Entity)
I hereby affirm that I am Authorized Signatory (title) of Hope Keap LLC (entity) which is a party to the Brownfield Cleanup Agreement and/or Application referenced in Section I above and that I am aware of this Application for an Amendment to that Agreement and/or Application.  signature below constitutes the requisite approval for the amendment to the BCA Application, which will be effective upon signature by the Department.
Date: 4 / 18 / 2 02 - Signature:
Print Name: Solomon Schwimmer
REMAINDER OF THIS AMENDMENT WILL BE COMPLETED SOLELY BY THE DEPARTMENT
Status of Agreement:
PARTICIPANT A requestor who either 1) was the owner of the site at the time of the disposal of contamination or 2) is otherwise a person responsible for the contamination, unless the liability arises solely as a result of ownership, operation of, or involvement with the site subsequent to the disposal of contamination.  VOLUNTEER A requestor other than a participant, including a requestor whose liability arises solely as a result of ownership, operation of or involvement with the site subsequent to the contamination.
Effective Date of the Original Agreement: I must 17, 2019
Effective Date of the Original Agreement: January 17, 2019  Signature by the Department: June 8, 2020
DATED:
Juno 9, 2020 NEW VODE STATE DEDARTMENT OF

June 8, 2020

**ENVIRONMENTAL CONSERVATION** 

By:

Michael J. Ryan, P.E., Director Division of Environmental Remediation

#### **SUBMITTAL INFORMATION:**

• **Two (2)** copies, one hard copy with original signatures and one electronic copy in Portable Document Format (PDF) must be sent to:

Chief, Site Control Section New York State Department of Environmental Conservation Division of Environmental Remediation 625 Broadway Albany, NY 12233-7020

FOR DEPARTMENT USE ONLY	
BCP SITE T&A CODE:	LEAD OFFICE:
PROJECT MANAGER:	

### BROWNFIELD CLEANUP PROGRAM (BCP) INSTRUCTIONS FOR COMPLETING A BCP AMENDMENT APPLICATION

This form must be used to add a party, modify a property description, or reduce/expand property boundaries for an existing BCP Agreement and/or Application. **NOTE: DEC requires a standard application to request major changes to the description of the property set forth in the BCA (e.g., adding a significant amount of new property, or adding property that could affect an eligibility determination due to contamination levels or intended land use).** The application must be submitted to DEC in the same manner as the original application to participate.

#### **SECTION II**

#### **NEW REQUESTOR INFORMATION**

#### Requestor Name

Provide the name of the person(s)/entity requesting participation in the BCP. (If more than one, attach additional sheets with requested information. If an LLC, the members/owners names need to be provided on a separate attachment). The requestor is the person or entity seeking DEC review and approval of the remedial program.

If the requestor is a Corporation, LLC, LLP or other entity requiring authorization from the NYS Department of State to conduct business in NYS, the requestor's name must appear, exactly as given above, in the <a href="NYS Department of State's Corporation & Business Entity Database">NYS Department of State's Corporation & Business Entity Database</a>. A print-out of entity information from the database must be submitted to DEC with the application, to document that the applicant is authorized to do business in NYS.

#### Requestor Address, etc.

Provide the requestor's mailing address, telephone number; fax number and e-mail address.

#### Representative Name, Address, etc.

Provide information for the requestor's authorized representative. This is the person to whom all correspondence, notices, etc will be sent, and who will be listed as the contact person in the BCA. Invoices will be sent to the representative unless another contact name and address is provided with the application.

#### Consultant Name, Address, etc.

Provide information for the requestor's consultant.

#### Attorney Name, Address, etc.

Provide information for the requestor's attorney.

## SECTION III CURRENT PROPERTY OWNER/OPERATOR INFORMATION - only include if new owner/operator or new existing owner/operator information is provided, and highlight new information in form.

#### Owner Name, Address, etc.

Provide information for the new owner of the property. List <u>all</u> new parties holding an interest in the property.

#### Operator Name, Address, etc.

Provide information for the new operator (if different from the new requestor or owner).

#### SECTION IV NEW REQUESTOR ELIGIBILITY INFORMATION

As a <u>separate attachment</u>, provide complete and detailed information in response to any eligibility questions answered in the affirmative. It is permissible to reference specific sections of existing property reports; however, it is requested that such information be summarized. For properties with multiple addresses or tax parcels, please include this information for each address or tax parcel.

### SECTION V PROPERTY DESCRIPTION AND DESCRIPTION OF CHANGES / ADDITIONS / REDUCTIONS (IF APPLICABLE)

NOTE: DEC requires a standard application to request major changes to the description of the property set forth in the BCA (e.g., adding a significant amount of new property, or adding property that could affect an eligibility determination due to contamination levels or intended land use). The application must be submitted to DEC in the same manner as the original application to participate.

#### Property Address

Provide a street address, city/town, and zip code. For properties with multiple addresses, provide information for all.

#### Tax Parcel Information

Provide the tax parcel/section/block/lot information. If requesting to modify a metes and bounds description or requesting changes to the boundaries of a site, please attach a revised metes and bounds description, survey, and/or acceptable site map to this application. Tax map information may be obtained from the tax assessor's office for all tax parcels that are included in the property boundaries. Attach a county tax map with identifier numbers, along with any figures needed to show the location and boundaries of the property. Include a USGS 7.5 minute quad map on which the property appears.