



## Evolution Dental Science Head Quarters

[Instructions and Insurance Requirements Document](#)

### Section I: Applicant Background Information

Please answer all questions. Use "None" or "Not Applicable" where necessary. Information in this application may be subject to public review under New York State Law.

#### Applicant Information - Company Receiving Benefit

<b>Project Name</b>	Evolution Dental Science Head Quarters
<b>Project Summary</b>	Evolution Dental Science is looking to acquire and develop a new, state-of-the-art lab to accelerate business growth and expand our impact as a dental industry leader in AI, additive, and subtractive manufacturing. This facility will serve as a dynamic hub for innovation, workforce development, and industry collaboration, positioning our organization at the forefront of the Industry.
<b>Applicant Name</b>	Evolution Dental Science
<b>Applicant Address</b>	125 Lawrence Bell
<b>Applicant Address 2</b>	
<b>Applicant City</b>	Williamsville
<b>Applicant State</b>	New York
<b>Applicant Zip</b>	14221
<b>Phone</b>	(716) 989-1109
<b>Fax</b>	
<b>E-mail</b>	aj@evolutiondental.net
<b>Website</b>	www.evolutiondental.net
<b>NAICS Code</b>	339116

#### Business Organization

**Type of Business**  
Corporation

**Year Established**  
1993

**State**  
New York

**Indicate if your business is 51% or more (Check all boxes that apply)**  
☐ [No] Minority Owned  
☐ [No] Woman Owned

**Indicate Minority and/or Woman Owned Business Certification if applicable (Check all boxes that apply)**

[No] NYS Certified

[No] Erie Country Certified

Individual Completing Application

**Name** Andrzej Jakson  
**Title** Founder/CEO  
**Address** 41 Beresford  
**Address 2**  
**City** Williamsville  
**State** New York  
**Zip** 14221  
**Phone** (716) 989-1109  
**Fax**  
**E-Mail** aj@evolutiondental.net

Company Contact- Authorized Signer for Applicant

**Contact is same as individual completing application** Yes

**Name****Title****Address****Address 2****City****State****Zip****Phone****Fax****E-Mail**Company Counsel

**Name of Attorney** Marco Cercone  
**Firm Name** Rupp Pfalzgraf  
**Address** 424 Main Street  
**Address 2**  
**City** Buffalo  
**State** New York  
**Zip** 14202  
**Phone** (716) 854-3400  
**Fax**  
**E-Mail** cercone@rupppfalzgraf.com

Benefits Requested (select all that apply).**Exemption from Sales Tax**

Yes

<b>Exemption from Mortgage Tax</b>	Yes
<b>Exemption from Real Property Tax</b>	Yes
<b>Tax Exempt Financing*</b>	No

\* (typically for not-for-profits & small qualified manufacturers)

### Applicant Business Description

**Describe in detail company background, history, products and customers. Description is critical in determining eligibility. Also list all stockholders, members, or partners with % ownership greater than 20%.**

Evolution Dental Science (EDS) was founded in 1993 by Andrzej Jakson, who remains the sole owner with 100% ownership in Cheektowaga, New York. The location will remain as a training and storage facility. EDS has grown into a nationally recognized leader in dental restorations, known for precision, innovation, and excellence in the dental laboratory industry. Over more than three decades, EDS has developed a reputation for combining artisanal craftsmanship with scalable, digital production, setting industry standards in restorative manufacturing and patient-centered care. Andrzej Jakson, with over 30 years of experience in dental technology, has been instrumental in driving technical innovation and integrating advanced workflows throughout the company's operations. Under his leadership, EDS has reached revenues of over \$14 million. EDS is the parent company of Evolution Dental Lab, Olivia Dental Lab, and Evolve Dentistry, each contributing to a comprehensive suite of dental restoration solutions. Products and Services: EDS provides a full range of dental restoration products and services, including: Crowns & Bridges: Zirconia, PMMA, e.max®, Trina, Nacera, Gold, PFM, Removables: Dentures, partials, flippers, 3D printed prototype, Implant Solutions: All-on-X, implant bars, surgical guides, CBCT evaluations, denture stabilization, Digital Services: CAD design, remote CAD education, manufacturing outsourcing, Orthodontics: Clear aligners for rapid smile correction, Occlusal Appliances: Night guards, athletic mouth guards, retainers, Provisionals: Temporary restorations for tissue healing and fit assurance, Veneers: Cosmetic and restorative solutions for chipped or discolored teeth EDS is also recognized for its leadership in AI, CAD/CAM digital workflows, additive and subtractive manufacturing, and dental education, frequently providing training and lectures for dental professionals nationwide. Customers: EDS serves a wide range of clients, including: Dental practitioners and clinics (regional and national), Hospitals and health care organizations, Dental specialists seeking advanced restorative solutions, Evolution Dental Academy and training programs. The company is trusted by dental professionals for its superior fit, comfort, and innovation, having produced millions of implant restorations and supporting both conventional and mini-implant protocols. Ownership and Key Personnel: Andy Jakson: 100% owner, Founder, and CEO. There are no other stockholders, members, or partners with more than 20% ownership, J.J. Siepierski: Senior Vice President, Joshua Jakson: President, head of CAD/CAM team, and digital technology leader, Alex Jakson: Marketing Director/Supply Chain Coordinator, Jonny Jakson: Exocad Trainer & Lead 3D Printing Coordinator Tristan Drescher: Director of Sales & Distribution, Vinny Murphy: Lead Implant Treatment Plan Coordinator, Colin Chairmonte: Design Manger, Chris Johnson: General Manager, Kevin Schmitt: CFO, Joshua Johnson: Subtractive Manger, Justin Johnson: Laboratory Manager, Brian Bocella: CTO, and Darlene Jakson: Human Recourses Strategic Direction: To accelerate growth and remain at the forefront of dental technology, EDS is planning to acquire and develop a new, state-of-the-art laboratory. This facility will serve as a hub for innovation, workforce development, and industry collaboration, positioning EDS as a continued leader in AI, additive, and subtractive manufacturing in dentistry.

<b>Estimated % of sales within Erie County</b>	20 %
<b>Estimated % of sales outside Erie County but within New York State</b>	5 %
<b>Estimated % of sales outside New York State but within the U.S.</b>	75 %
<b>Estimated % of sales outside the U.S.</b>	0 %

(\*Percentage to equal 100%)

**For your operations, company and proposed project what percentage of your total annual supplies, raw materials and vendor services are purchased from firms in Erie County?**

85

**Describe vendors within Erie County for major purchases**

Ivoclar, Great Lakes Ortho and the University of Buffalo

## Section II: Eligibility Questionnaire - Project Description & Details

### Project Location

**Address of Proposed Project Facility**

150 Essay Rd.

**Town/City/Village of Project Site**

Amherst

**School District of Project Site**

Williamsville South

**Current Address (if different)**

125 Lawrence Bell

**Current Town/City/Village of Project Site (if different)**

Amherst

**SBL Number(s) for proposed Project**

142289.69.140-5-5.000

**What are the current real estate taxes on the proposed Project Site**

10,000

**If amount of current taxes is not available, provide assessed value for each.**

Land

\$ 690,000

Building(s)

\$ 5,010,000

If available include a copy of current tax receipt.

**Are Real Property Taxes current at project location?**

Yes

**If no please explain****Does the Applicant or any related entity currently hold fee title or have an option/contract to purchase the Project site?**

Yes

**If No, indicate name of present owner of the Project Site****Does Applicant or related entity have an option/contract to purchase the Project site?**

Yes

**Describe the present use of the proposed Project site (vacant land, existing building, etc.)**

Vacant Office Building

**Provide narrative and purpose of the proposed project (new build, renovations) square footage of existing and new construction contemplated and/or equipment purchases. Identify specific uses occurring within the project. Describe any and all tenants and any/all end users: (This information is critical in determining project eligibility)**

Evolution Dental Science (EDS) is planning to expand its operations by developing a new state-of-the-art laboratory facility designed to consolidate and enhance its AI-driven dental restoration capabilities. This project will replace the company's current fragmented spaces at 125 Lawrence Bell Drive with a state-of-the-art, modernized complex that features advanced manufacturing infrastructure. Our Cheektowaga location will remain a training and storage facility. Significantly increase capacity beyond the existing 15,000 square feet. The new laboratory will be equipped with cutting-edge technology, including next-generation AI systems for crown design, additive and subtractive manufacturing tools for producing 3D-printed dental prosthetics, and CBCT imaging equipment to support precise implant planning. The facility will serve multiple functions, housing CAD/CAM design studios, AI training centers for dental professionals, prototype labs for creating aligners and occlusal appliances, as well as production floors capable of handling high volumes of dental restorations. EDS and its subsidiaries- Evolution Dental Lab, Olivia Dental Lab, and Evolve Dentistry- will be the primary occupants of the new space. Additionally, the facility will include collaborative areas designed to host dental practitioners for hands-on training, partner clinicians for joint research and development projects, and students enrolled in the Evolution Dental Academy. The end users of the products and services generated at this facility will be a broad range of regional and national dental clinics, hospital networks, and ultimately the patients who benefit from streamlined, high-quality crowns, implants, dentures, and other dental restorations. This expansion project is a strategic move to solidify EDS's leadership position in the field of digital dentistry, enabling the company to meet the increasing demand for AI-optimized dental restorations while fostering innovation, workforce development, and industry collaboration.

#### **Municipality or Municipalities of current operations**

Town of Amherst

#### **Will the Proposed Project be located within a Municipality identified above?**

Yes

#### **Will the completion of the Project result in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state OR in the abandonment of one or more plants or facilities of the project occupant located within the state?**

No

#### **If the Proposed Project is located in a different Municipality within New York State than that Municipality in which current operations are being undertaken, is it expected that any of the facilities in any other Municipality will be closed or be subject to reduced activity?**

No

(If yes, you will need to complete the Intermunicipal Move Determination section of this application)

#### **Is the project reasonably necessary to prevent the project occupant from moving out of New York State?**

Yes

#### **If yes, please explain and identify out-of-state locations investigated, type of assistance offered and provide supporting documentation available**

Evolution Dental has looked into expanding or relocating to a few places outside New York, including South Carolina, North Carolina, and Tampa, Florida, while also considering staying put in Cheektowaga. South Carolina offers a solid dental services program through its Department of Health and Human Services, with DentaQuest handling administrative support, claims, and reimbursements. The state also has programs like the Dental Lifeline Network that help seniors, veterans, and people with disabilities who can't afford dental care. North Carolina presents similar opportunities with a growing population and supportive dental networks, making it an attractive option for expansion. Tampa's dental scene is vibrant, featuring advanced clinics like The Dental Walk-In Clinic that provide emergency care, digital lab services, and strong professional training opportunities- good for partnerships and growth. Cheektowaga remains a strong candidate too, with steady demand for dental assistants, hygienists, and office staff, supporting ongoing business operations.

#### **Have you contacted or been contacted by other Local, State and/or Federal Economic Development Agencies?**

Yes

#### **If yes, please indicate the Agency and nature of inquiry below**

Cheektowaga, Tampa and South and North Carolina

#### **If the Project could be undertaken without Financial Assistance provided by the Agency, then provide a statement in the space provided below indicating why the Project should be undertaken by the Agency:**

EDS has been in operation for over 3 decades and is hoping to stay in Western NY. With significant growth due to advancing technology, after COVID. 70% of EDS's customers are from out of State, predominately due to our partnership with Heartland Dental. These partnerships give us the possibility to increase our workforce.

#### **Describe the reasons why the Agency's financial assistance is necessary, and the effect the Project will have on the Applicant's business or operations. Focus on competitiveness issues, project shortfalls, etc... Your eligibility determination will be based in part on your answer (attach additional pages if necessary)**

Evolution Dental requires financial assistance from the Amherst IDA to address critical competitiveness challenges and project shortfalls that impact the sustainability and growth of our practice. The dental industry is highly competitive, with significant capital demands for advanced equipment, technology upgrades, and workforce expansion to meet increasing patient needs and regulatory standards. Without this financial support, our ability to invest in these essential areas is constrained, limiting our capacity to enhance service quality and operational efficiency. Financial assistance will enable Evolution Dental to fund key components of our project, including the acquisition of state-of-the-art dental technology and the expansion of our skilled workforce. This support will improve our return on investment by increasing patient throughput, reducing operational bottlenecks, and strengthening our market position in the region. Moreover, the funding will help us overcome shortfalls in capital that currently hinder our growth plans, ensuring we remain competitive against larger dental providers who benefit from greater financial resources. By partnering with the AIDA, Evolution Dental will solidify its commitment to the local community, fostering economic development through job creation and enhanced healthcare services. The project will not only improve patient access to high-quality dental care but also position our practice for future expansion and innovation, ultimately contributing to long-term business sustainability and competitiveness in the dental sector.

**Please confirm by checking the box, below, if there is likelihood that the Project would not be undertaken but for the Financial Assistance provided by the Agency**

Yes

**If the Applicant is unable to obtain Financial Assistance for the Project, what will be the impact on the Applicant and Erie County?**

Without financial assistance EDS would have to consider existing offers from other States.

**Will project include leasing any equipment?**

No

If yes, please describe equipment and lease terms.

### Site Characteristics

**Is your project located near public transportation?**

Yes

**If yes describe if site is accessible by either metro or bus line (provide route number for bus lines)**

Metro Bus #35.

**Has your local municipality and/or its planning board made a determination regarding the State Environmental Quality Review (SEQR) for your project?**

No

**Will the Project meet zoning/land use requirements at the proposed location?**

Yes

**Describe the present zoning/land use**

Zone Number 464. Town Zone Classification "OB"

**Describe required zoning/land use, if different**

N/A

**If a change in zoning/land use is required, please provide details/status of any request for change of zoning/land use requirements**

N/A

**Is the proposed Project located on a site where the known or potential presence of contaminants is complicating the development/use of the property?**

No

**If yes, please explain**

**Has a Phase I Environmental Assessment been prepared, or will one be prepared with respect to the proposed Project Site?**

Yes

If yes, please provide a copy.

**Have any other studies, or assessments been undertaken with respect to the proposed Project Site that indicate the known or suspected presence of contamination that would complicate the site's development?**

No

**If you are purchasing new machinery and equipment, does it provide demonstrable energy efficiency benefits?**

7/17

No

If you answered yes to question above, what level of LEED certification do you anticipate receiving? (Check applicable box)

Standard

Provide estimate of additional construction cost as a result of LEED certification you are seeking < BLANK >

Will project result in significant utility infrastructure cost or uses No

What is the estimated project timetable (provide dates).

**Start date : acquisition of equipment or construction of facilities**

9/1/2025

**End date : Estimated completion date of project**

6/1/2026

**Project occupancy : estimated starting date of occupancy**

6/1/2026

Capital Project Plan / Budget

**Estimated costs in connection with Project**

**1.) Land and/or Building Acquisition**

\$ 3,500,000

34,700 square feet

2 acres

**2.) New Building Construction**

\$ 0

square feet

**3.) New Building addition(s)**

\$ 0

square feet

**4.) Reconstruction/Renovation**

\$ 1,000,000

34,700 square feet

**5.) Manufacturing Equipment**

\$ 500,000

**6.) Infrastructure Work**

\$ 500,000

**7.) Non-Manufacturing Equipment: (furniture, fixtures, etc.)**

\$ 300,000

**8.) Soft Costs: (Legal, architect, engineering, etc.)**

\$ 75,000

**9.) Other Cost**

\$ 100,000

**Explain Other Costs** EV charging Stations, beautify and signage

**Total Cost**      \$ 5,975,000

Construction Cost Breakdown:

<b>Total Cost of Construction</b>	\$ 1,500,000 (sum of 2, 3, 4 and 6 in Project Information, above)
<b>Cost of materials</b>	\$ 500,000
<b>% sourced in Erie County</b>	95%

Sales and Use Tax:

<b>Gross amount of costs for goods and services that are subject to State and local sales and use tax- said amount to benefit from the Agency's sales and use tax exemption benefit</b>	\$ 800,000
<b>Estimated State and local Sales and Use Tax Benefit (product of 8.75% multiplied by the figure, above):</b>	\$ 70,000

\*\* Note that the estimate provided above will be provided to the New York State Department of Taxation and Finance. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to undertake the total amount of investment as proposed within this Application, and that the estimate, above, represents the maximum amount of sales and use tax benefit that the Agency may authorize with respect to this Application. The Agency may utilize the estimate, above, as well as the proposed total Project Costs as contained within this Application, to determine the Financial Assistance that will be offered.

<b>Project refinancing estimated amount, if applicable (for refinancing of existing debt only)</b>	\$ 0
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<b>Have any of the above costs been paid or incurred as of the date of this Application?</b>	No
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**If Yes, describe particulars:**

Sources of Funds for Project Costs:

<b>Equity (excluding equity that is attributed to grants/tax credits):</b>	\$ 1,200,000
<b>Bank Financing:</b>	\$ 3,800,000
<b>Tax Exempt Bond Issuance (if applicable):</b>	\$ 0
<b>Taxable Bond Issuance (if applicable):</b>	\$ 0
<b>Public Sources (Include sum total of all state and federal grants and tax credits):</b>	\$ 0
<b>Identify each state and federal grant/credit: (ie Historic Tax Credit, New Market Tax Credit, Brownfield, Cleanup Program, ESD, other public sources)</b>	
<b>Total Sources of Funds for Project Costs:</b>	\$5,000,000
<b>Have you secured financing for the project?</b>	Yes

Mortgage Recording Tax Exemption Benefit:

Amount of mortgage, if any that would be subject to mortgage recording tax:

<b>Mortgage Amount (include sum total of construction/permanent/bridge financing).</b>	3,800,000
<b>Lender Name, if Known</b>	
<b>Estimated Mortgage Recording Tax Exemption Benefit (product of mortgage amount as indicated above multiplied by 3/4 of 1%):</b>	\$28,500

Real Property Tax Benefit:

**Identify and describe if the Project will utilize a real property tax exemption benefit other than the Agency's PILOT benefit (485-a, 485-b, other):**

IDA PILOT Benefit: Agency staff will indicate the estimated amount of PILOT Benefit based on estimated Project Costs as contained herein and anticipated tax rates and assessed valuation, including the annual PILOT Benefit abatement amount for each year of the PILOT benefit and the sum total of PILOT Benefit abatement amount for the term of the PILOT as depicted in the PILOT worksheet in the additional document section.

Percentage of Project Costs financed from Public Sector sources: Agency staff will calculate the percentage of Project Costs financed from Public Sector sources based upon the Sources of Funds for Project Costs as depicted above. The percentage of Project Costs financed from public sector sources will be depicted in the PILOT worksheet in the additional document section.

**Is project necessary to expand project employment?**

Yes

**Is project necessary to retain existing employment?**

Yes

**Will project include leasing any equipment?**

No

If yes, please describe equipment and lease terms.

Employment Plan (Specific to the proposed project location)

The Labor Market Area consists of the following six counties: Erie, Niagara, Chautauqua, Cattaraugus, Wyoming and Genessee.

By statute, Agency staff must project the number of FTE jobs that would be retained and created if the request for Financial Assistance is granted. Agency staff will project such jobs over the TWO Year time period following Project completion. Agency staff converts PT jobs into FTE jobs by dividing the number of PT jobs by two (2).

	Current # of jobs at proposed project location or to be relocated at project location	If financial assistance is granted – project the number of FT and PT jobs to be retained	If financial assistance is granted – project the number of FT and PT jobs to be created upon 24 months (2 years) after Project completion	Estimate number of residents of the Labor Market Area in which the project is located that will fill the FT and PT jobs to be created upon 24 months (2 years) after project completion **
Full time	85	85	25	25
Part time	0	0	0	0
Total	85	85	25	

**If you estimated new job growth over the next 2 years, please provide a short description of how those estimates were calculated (i.e. jobs per square foot, new contracts/increased revenues, etc.)**

EDS is projecting growth because of expanded ability to produce.

Salary and Fringe Benefits for Jobs to be Retained and Created

Job Categories	# of Full Time Employees retained and created	Average Salary for Full Time	Average Fringe Benefits for Full Time	# of Part Time Employees retained and created	Average Salary for Part Time	Average Fringe Benefits for Part Time
Management	11	\$ 70,000	\$ 14,000	0	\$ 0	\$ 0
Professional	1	\$ 40,000	\$ 8,000	0	\$ 0	\$ 0
Administrative	3	\$ 130,000	\$ 26,000	0	\$ 0	\$ 0
Production	75	\$ 40,000	\$ 8,000	0	\$ 0	\$ 0
Independent Contractor	0	\$ 0	\$ 0	0	\$ 0	\$ 0
Other	0	\$ 0	\$ 0	0	\$ 0	\$ 0
Total	90			0		

\*\* Note that the Agency may utilize the foregoing employment projections, among other items, to determine the financial assistance that will be offered by the Agency to the Applicant. The Applicant acknowledges that the transaction documents may include a covenant by the Applicant to retain the number of jobs and create the number of jobs with respect to the Project as set forth in this Application.

Yes **By checking this box, I certify that the above information concerning the current number of jobs at the proposed project location or to be relocated to the proposed project location is true and correct.**

Employment at other locations in Erie County: (provide address and number of employees at each location):

Address	125 Lawrence Bell, Williamsville, NY	235 Aero Drive, Cheektowaga, NY	
Full time	85	5	0
Part time	0	0	0
Total	85	5	0

#### Payroll Information

##### **Annual Payroll at Proposed Project Site upon completion**

3,400,000

##### **Estimated average annual salary of jobs to be retained (Full Time)**

55,000

##### **Estimated average annual salary of jobs to be retained (Part Time)**

0

##### **Estimated average annual salary of jobs to be created (Full Time)**

45,000

##### **Estimated average annual salary of jobs to be created (Part Time)**

0

##### **Estimated salary range of jobs to be created**

<b>From (Full Time)</b>	40,000	<b>To (Full Time)</b>	150,000
<b>From (Part Time)</b>	0	<b>To (Part Time)</b>	0

## Section III: Facility Type - Single or Multi Tenant

### Is this a Single Use Facility or a Multi-Tenant Facility?

Single Use Facility

#### For Single Use Facility.

**Occupant Name** Evolution Dental Science EDS  
**Address** 150 Essjay Road  
**Contact Person** Andy Jakson  
**Phone** (716) 989-1109  
**Fax**  
**E-Mail** aj@evolvedentistry.com  
**Federal ID #** 27-3074182  
**SIC/NAICS Code** 339116

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## Section V: Retail Determination

To ensure compliance with Section 862 of the New York General Municipal Law, the Agency requires additional information if the proposed Project is one where customers personally visit the Project site to undertake either a retail sale transaction or to purchase services.

Please answer the following:

**Will any portion of the project (including that portion of the costs to be financed from equity or other sources) consist of facilities or property that are or will be primarily used in making sales of goods or services to customers who personally visit the project site?**

No

If yes, complete the Retail Questionnaire Supplement below. **If no, proceed to the next section.**

## Section VI: Adaptive Reuse Projects

Adaptive Reuse is the process of adapting old structures or sites for new purposes.

**Are you applying for tax incentives under the Adaptive Reuse Program?**

No

## Section VII: Inter-Municipal Move Determination

The Agency is required by state law to make a determination that, if completion of a Project benefiting from Agency Financial Assistance results in the removal of an industrial or manufacturing plant of the project occupant from one area of the state to another area of the state or in the abandonment of one or more plants or facilities of the project occupant located within the state, Agency financial Assistance is required to prevent the project occupant from relocating out of the state, or is reasonably necessary to preserve the project occupant's competitive position in its respective industry.

### Current Address

#### City/Town

#### State

New York

#### Zip Code

**Will the project result in the removal of an industrial or manufacturing plant of the Project occupant from one area of the state to another area of the state?**

No

**Will the project result in the abandonment of one or more plants or facilities of the Project occupant located within the state?**

No

**If Yes to either question, explain how, notwithstanding the aforementioned closing or activity reduction, the Agency's Financial Assistance is required to prevent the Project from relocating out of the State, or is reasonably necessary to preserve the Project occupant's competitive position in its respective industry:**

**Does this project involve relocation or consolidation of a project occupant from another municipality?**

**Within New York State**

Yes

**Within Erie County**

Yes

**If Yes to either question, please, explain**

**Will the project result in a relocation of an existing business operation from the City of Buffalo?**

No

**If yes, please explain the factors which require the project occupant to relocate out of the City of Buffalo (For example, present site is not large enough, or owner will not renew leases etc.)**

**What are some of the key requirements the project occupant is looking for in a new site? (For example, minimum sq. ft., 12 foot ceilings, truck loading docs etc.)**

**If the project occupant is currently located in Erie County and will be moving to a different municipality within Erie County, has the project occupant attempted to find a suitable location within the municipality in which it is currently located?**

No

**What factors have lead the project occupant to consider remaining or locating in Erie County?**

**If the current facility is to be abandoned, what is going to happen to the current facility that project occupant is located in?**

**Please provide a list of properties considered, and the reason they were not adequate. (Some examples include: site not large enough, layout was not appropriate, did not have adequate utility service, etc.) Please include full address for locations.**

## Section VIII: Senior Housing

IDA tax incentives may be granted to projects under the Agency's Senior Citizen Rental Housing policy when the project consists of a multi-family housing structure where at least 90% of the units are (or are intended to be) rented to and occupied by a person who is 60 years of age or older.

**Are you applying for tax incentives under the Senior Rental Housing policy?**

No

## Section IX: Tax Exempt Bonds

In order to receive the benefits of a tax-exempt interest rate bond, private borrowers and their projects must be eligible under one of the federally recognized private active bond categories (Fed Internal Rev Code IRC sections 142-144, and 1394).

**Are you applying for tax exempt bonds / refinancing of bonds related to a residential rental facility project?**

No