

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 [check one or more boxes below]
Add Substitute 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: Mod-Pac Corp. is doing a corporate restructure which will see the subject property transferred to other entities. Mod-Pac Corp.'s parent company, Rosalia Capital LLC, will be added to the BCA.
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Please refer to the attached instructions for guidance on filling out this application

Section I. Existing Agreement In	formation			
BCP SITE NAME: Mod-Pac Cor	р.	BCP SITE NUM	MBER: C915314	
NAME OF CURRENT APPLICANT(S): Mod-Pac Corp.				
INDEX NUMBER OF EXISTING A	GREEMENT:	DATE OF EXISTIN	G AGREEMENT: 6/21/17	
Section II. New Requestor Inform	nation (if no chang	e to Current Applicant, ski	p to Section V)	
NAME Rosalia Capital LLC				
ADDRESS 1209 Orange Street				
CITY/TOWN Wilmington		Z	ZIP CODE 19801	
		E-MAIL dkeane@modpac.c		
Is the requestor authorized to cond	duct business in New	York State (NYS)?	Yes ✓ No	
 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 & 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. 				
NAME OF NEW REQUESTOR'S	REPRESENTATIVE	Daniel G. Keane		
ADDRESS 1801 Elmwood A	venue			
CITY/TOWN Buffalo			ZIP CODE 14207	
PHONE 716-873-0640	FAX 716-447-9201	E-MAIL dkeane@mod	oac.com	
NAME OF NEW REQUESTOR'S	CONSULTANT (if ap	pplicable) Michele M. Wi	ttman	
ADDRESS 3636 North Buffa	lo Road			
CITY/TOWN Orchard Park			ZIP CODE 14127	
PHONE 716-667-3130	FAX	E-MAIL mwittman@ha	zardevaluations.com	
NAME OF NEW REQUESTOR'S	ATTORNEY (if applic	cable) Marc A. Romano	wski, Esq.	
ADDRESS 26 Mississippi Stre	eet, Suite 400			
CITY/TOWN Buffalo			ZIP CODE 14203	
PHONE 716-427-7100	FAX 716-424-2171	E-MAIL mromanowski@	hsr-legal.com	
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?				
Describe Requestor's Relationship to Existing Applicant:				
LeCaron Enterprises Corp. holds en	tire Membership Intere	st for original Applicant and ne	w Requestor.	

	wner/Operator Information (only incl nation is provided, and highlight new				
OWNER'S NAME (if different from	m requestor) Mod-Pac Corp.				
ADDRESS 1801 Elmwood Avenu	е				
CITY/TOWN Buffalo			ZIP CODE 14207		
PHONE 716-873-0640	FAX 716-447-9201	E-MAIL	dkeane@modpac.com		
OPERATOR'S NAME (if differen	t from requestor or owner)				
ADDRESS					
CITY/TOWN_			ZIP CODE		
PHONE	FAX	E-MAIL			
Section IV. Eligibility Information	on for New Requestor (Please refer t	o ECL § 2	7-1407 for more detail)		
If answering "yes" to any of the fo	ollowing questions, please provide an e	xplanation	as an attachment.		
Are any enforcement actions	pending against the requestor regarding	ng this site	Yes No		
Is the requestor presently sub- relating to contamination at the	oject to an existing order for the investion ne site?	gation, rem	oval or remediation ☐Yes 📝 No		
3. Is the requestor subject to an outstanding claim by the Spill Fund for this site? ☐Yes ✓ No Any questions regarding whether a party is subject to a spill claim should be discussed with the Spill Fund Administrator.					
4. Has the requestor been determined in an administrative, civil or criminal proceeding to be in violation of i) any provision of the subject law; ii) any order or determination; iii) any regulation implementing ECL Article 27 Title 14; or iv) any similar statute, regulation of the state or federal government? If so, provide an explanation on a separate attachment. ☐ Yes ✓ No					
5. Has the requestor previously been denied entry to the BCP? If so, include information relative to the application, such as name, address, Department assigned site number, the reason for denial, and other relevant information.					
	in a civil proceeding to have committe ring, treating, disposing or transporting				
7. Has the requestor been convicted of a criminal offense i) involving the handling, storing, treating, disposing or transporting of contaminants; or ii) that involves a violent felony, fraud, bribery, perjury, theft, or offense against public administration (as that term is used in Article 195 of the Penal Law) under federal law or the laws of any state? ☐ Yes ✓ No					
jurisdiction of the Department,	alsified statements or concealed mater or submitted a false statement or madent or application submitted to the Dep	le use of o			
or failed to act, and such act of all of the second act of the sec	or entity of the type set forth in ECL 27- or failure to act could be the basis for de tion in any remedial program under DE	enial of a B C's oversi	CP application? ☐ Yes ☑ No ght terminated by DEC or		
	antially comply with an agreement or or		☐Yes ✓ No		
11. Are there any unregistered bu	alk storage tanks on-site which require	registration	? Yes ✓ No		

THE NEW REQUESTOR MUST CERTIFY THAT IT IS EITHER A PARTICIPANT OR VOLUNTEER IN ACCORDANCE WITH ECL §27-1405 (1) BY CHECKING ONE OF THE BOXES 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				a result of the the
	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.				olvement bing why eer – be	
Requestor's Relationship to Property (check one):					
☐ Prior Owner ☐ Current Owner ☐ Potential /Future Purchaser ☐ Other Parent company of current owner					
If requestor is not the current site owner, proof of site access sufficient to complete the remediation must be submitted. Proof must show that the requestor will have access to the property before signing the BCA and throughout the BCP project, including the ability to place an easement on the site. Is this proof attached? Yes No					
Note: a purchase contract does not suffice as proc	of of access				
Section V. Property description and description of	changes/a	dditions/red	ductions (if applicat	ile)
ADDRESS				واستعطفت ادر استالف	
CITY/TOWN ZIP CODE					
TAX BLOCK AND LOT (TBL) (in existing agreement)					
Parcel Address	Parcel No.	Section No.	Block No.	Lot No.	Acreage
				<i>y</i> 1	

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)					
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.	Yes No				
Requestor seeks a determination that the site is eligible for the tangible property brownfield redevelopment tax credit.	credit component of the Yes No				
Please answer questions below and provide documentation necessary to sup	port answers.				
Is at least 50% of the site area located within an environmental zone pursuant to Tax Law 21(6)? Please see DEC's website for more information. Yes No.					
2. Is the property upside down as defined below?	Yes 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: Mod-Pac Corp.	BCP SITE NUMBER: C915314				
NAME OF CURRENT APPLICANT(S): Mod-Pac Corp.					
INDEX NUMBER OF EXISTING AGREEMENT: C915314-06-17					
EFFECTIVE DATE OF EXISTING AGREEMENT: 6/21/17					

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 held in accordance with the Agreement or any applicable state and/or federal law or a release for any party from any obligations held under the Agreement or those same laws.

Statement of Certification and Signatures: New Requestor(s) (if applicable)
(Individual)
I hereby affirm that information provided on this form and its attachments is true and complete to the best of my knowledge and belief. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to section 210.45 of the Penal Law. My signature below constitutes the requisite approval for the amendment to the BCA Application, which will be effective upon signature by the Department.
Date:Signature:
Print Name:
(Entity)
I hereby affirm that I am (title President) of (entity LeCaron Enterprises Corp.); that I am authorized by that entity to make this application; that this application was prepared by me or under my supervision and direction; and that information provided on this form and its attachments is true and complete to the best of my knowledge and belief. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law. President My signature below constitutes the requisite approval for the amendment to the BCA Application, which will be effective upon signature by the Department. Date: 12/27/(8 Signature:) Amendment Management Managem
Print Name: Daniel G. Keane President

Statement of Certification and Signatures: Existi applicant must sign)	ng Applicant(s) (an authorized representative of each
(Individual)	
I hereby affirm that I am a party to the Brownfield Cl Section I above and that I am aware of this Applicat Application. My signature below constitutes the req Application, which will be effective upon signature b	on for an Amendment to that Agreement and/or uisite approval for the amendment to the BCA
Date:Signature:	
Print Name:	_
(Entity)	
Application for an Amendment to that Agreement ar	dod-Pac Co(p. (entity) which is a party to the eferenced in Section I above and that I am aware of this id/or Application. Application, which will be effective
Date: 12 2 1 1 6 Signature:	2 / Care
Print Name: Daniel G. Keane, Preside	<u> </u>
A requestor who either 1) was the A reque owner of the site at the time of the liability	LUNTEER stor other than a participant, including a requestor whose arises solely as a result of ownership, operation of or nent with the site subsequent to the contamination.
subsequent to the disposal of contamination.	
Effective Date of the Original Agreement:	
Signature by the Department:	
DATED:	
JAN 3 0 2019 By:	J. Ryan, P.E., Director 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		
TOR DEL ARTIMENT GOL ONET		
BCP SITE T&A CODE:	LEAD OFFICE:	
PROJECT MANAGER:		