



APPLICATION FOR ASSUMPTION

Each applicant seeking assumption of an existing Project must complete this form and provide additional information if requested. A **non-refundable** application fee of \$350 must be included with this application. Make check payable to COMIDA. If assumption is approved, assumption will require preparation of legal documentation and a fee of \$2,000 plus legal costs.

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, except for information that is considered deniable by the Freedom of Information Law. This form is available online at www.growmonroe.org.

I. PROJECT

a. Address _____
City/State/Zip _____
TAX Map No _____

b. Current Project Owner

c. Does Applicant contemplate any changes in use or tenancy of the project? YES _____ NO _____

If YES, provide information on additional pages.

II. APPLICANT

a. Name _____
Address _____
City/State/Zip _____
TAX ID No _____
Contact Name _____
Title _____
Telephone # _____
Email _____

b. Owners of 20% or more Applicant Company

Do any of these owners currently own property within Monroe County New York? YES _____ NO _____

III. APPLICANT Legal Counsel

Name _____
Firm _____
Address _____
City/State/Zip _____
Telephone # _____
Email _____

IV. CERTIFICATION

Current Project Owner represents that (i) it is not in default under any documents executed in connection with the Project being assigned; (ii) Assignee must agree to assume Current Project Owner's rights, interest, duties, obligations and liability set forth in any documents executed in connection with the Project being assigned; and (iii) Assignee will pay all fees of the Agency and its counsel in connection with the assignment of said Project.

Signed:

Current Project Owner:

Name, Title _____ Date _____

Assignee:

Name, Title _____ Date _____