

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.monroecountyida.org.

l.	<u>PROJECT</u>	III.	APPLICANT Legal Counsel
a.	Address		Name
	City/State/Zip		Firm
	TAX Map No		Address
b.	Current Project Owner		City/State/Zip
			Telephone #
			Email
C.	Does Applicant contemplate any changes in use or tenancy of the project? YESNO	15.7	OF DIFFICATION
	If YES, provide information on additional pages.	IV.	<u>CERTIFICATION</u>
II. a.	<u>APPLICANT</u>		Current Project Owner represents that (i) it is not i default under any documents executed in connectio with the Project being assigned; (ii) Assignee mus
	Name		agree to assume Current Project Owner's rights interest, duties, obligations and liability set forth in an
	Address		documents executed in connection with the Project being assigned; and (iii) Assignee will pay all fees of the
	City/State/Zip		Agency and its counsel in connection with the
	TAX ID No		assignment of said Project.
	Contact Name		
	Title		Signed:
	Telephone #		Current Project Owner:
	Email		
b.	Owners of 20% or more Applicant Company		Name, Title Date
			Assignee:
	Do any of these owners currently own property within Monroe County New York? YES NO		
			Name, Title Date