## MONTGOMERY COUNTY INDUSTRIAL DEVELOPMENT AGENCY

#### APPLICATION FOR FINANCIAL ASSISTANCE

#### FEE SCHEDULE

- 1. APPLICATION FEE: \$1,000 (Non-refundable)
- 2. AGENCY FEE:
  - (a) 3/4 of 1% of bond amount for tax-exempt issue
  - (b) 3/4 of 1% of bond amount for a taxable issue
  - (c) 3/4 of 1% of the cost of the Agency Project
- 3. AGENCY COUNSEL FEE:
  - (a) Determined on a Project by Project Basis
- 4. NEW YORK STATE BOND ISSUANCE FEE
  - (a) 0.168% up to \$1,000,000
  - (b) 0.336% for the amount between \$1,000,0001 to \$5,000,000
  - (c) 0.504% for the amount between \$5,000,001 to \$10,000,000

#### MONTGOMERY COUNTY INDUSTRIAL DEVELOPMENT AGENCY

#### APPLICATION

IMPORTANT NOTICE: The answers to the questions contained in this application are necessary to determine your firm's eligibility for financing and other assistance from Montgomery County Industrial Development Agency. These answers will also be used in the preparation of papers in this transaction. Accordingly, all questions should be answered accurately and completely by an officer or other employee of your firm who is thoroughly familiar with the business and affairs of your firm as well as the proposed project. This application is subject to acceptance by the Agency.

TO: MONTGOMERY COUNTY BUSINESS DEVELOPMENT CENTER

Old County Courthouse

9 Park Street P.O. Box 1500 Fonda, NY 12068

This application by applicant respectfully states:

APPLICANT: Dollar General Corporation or one of its subsidiaries, partners or affiliates

APPLICANT'S ADDRESS:

STREET: 100 Mission Ridge CITY: Goodlettsville STATE: TN

PHONE NO: (615) 855-4439

NAME OF PERSON(S) AUTHORIZED TO SPEAK FOR APPLICANT WITH RESPECT TO

THIS APPLICATION: Mark Payne, Director of Supply Chain Operations

IF APPLICANT IS REPRESENTED BY AN ATTORNEY, COMPLETE THE FOLLOWING:

NAME OF ATTORNEY: Rebekah Fisher, Esq.

ADDRESS:

STREET: 5556 Franklin Road, Suite 202 CITY: Nashville STATE: TN

PHONE NO: (615) 224-8708

### NOTE: PLEASE READ THE INSTRUCTIONS ON THIS PAGE BEFORE FILLING OUT THIS FORM.

#### INSTRUCTIONS

- 1. The Agency will not approve any application unless in the judgment of the Agency said application contains sufficient information upon which to base a decision whether to approve or tentatively approve an action.
- 2. Fill in all blanks, using "none" or "not applicable" or "N/A" where the question is not appropriate to the project which is the subject of this application (the "Project").
- 3. If an estimate is given as the answer to a question, put "(est)" after the figure or answer, which is estimated.
- 4. If more space is needed to answer any specific question attach a separate sheet.
- 5. When completed, return four (4) copies of this application to the Agency at the address indicated on the first page of this application.
- The Agency will not give final approval to this application until the Agency receives a
  completed environmental assessment form concerning the Project, which is the subject of
  this application.
- 7. Please note that Article 6 of the Public Officers Law declares that all records in the possession of the Agency (with certain limited exceptions) are open to public inspection and copying. If the applicant feels that there are elements of the Project which are in the nature of trade secrets or information, the nature of which is such that if disclosed to the public or otherwise widely disseminated would cause substantial injury to the applicant's competitive position, the applicant may identify such elements in writing and request that such elements by kept confidential in accordance with Article 6 of the Public Officers Law.
- 8. The applicant will be required to pay to the Agency all actual costs incurred in connection with this application and the Project contemplated herein.
- 9. The Agency has established an application fee of One Thousand Dollars (\$1,000) to cover the anticipated costs the Agency in processing this application. A check or money order made payable to the Agency must accompany each application. THIS APPLICATION WILL NOT BE ACCEPTED BY THE AGENCY UNLESS ACCOMPANIED BY THE APPLICATION FEE.

#### FOR AGENCY USE ONLY

	Project Number	
1.	Date received by Agency	, 20
2.	Date referred to Attorney for review	, 20
3.	Date notice of Agency meeting on application posted	, 20
4.	Date notice of Agency meeting on application mailed	, 20
5.	Date of Agency meeting on application	, 20
6.	Date Agency conditionally approved Application	, 20
7.	Date Agency offer mailed to applicant	, 20
8.	Date applicant accepted Agency offer	, 20
9.	Date Environmental Assessments Form ("EAF") received	
10.	Date Agency completed environmental review	, 20
11.	Date of final approval of application	, 20

I.	Proposed occupant	of Project	(hereinafter,	the "Company").	

Propo	sed oc	cupant of Project (hereinafter, the "Company").			
A.	Company Name: <u>Dollar General Corporation or one of its subsidiaries</u> , partners of affiliates				
	Prese	nt Address: 100 Mission Ridge, Goodlettsville, TN 37072			
		byer's ID No.: 61-0502302 S code: Project activity is warehousing and storage (NAICS 493)			
B.	Please	e provide a description of the proposed project:			
	\$85 n				
	430 employees on the company's payroll and 120 full-time truck drivers, secur staff members, and unloaders that are not on the company's payroll, but dedica to the Dollar General facility. Average annual salary of company jobs creat will be \$33,900 est.				
C.	If the Company differs from the Applicant, give details of relationship:				
	N/A				
D.	Indica	ate type of business organization of Company:			
	1.	Type of Corporation: C corporation			
		If so, incorporated in what Country? USA			
		What State? Tennessee			
		Date Incorporated: May 29, 1998; Type of Corporation: C corp			
		Authorized to do business in New York? Yes; Dolgencorp of New York, Inc. operates all New York retail stores and is a wholly owned subsidiary of Dollar General Corporation.			
	2.	Type of Partnership:			
		Number of General Partners:			

Number of Limited Partners:

	3.	Limited Li	ability Company:	
		If so, form	ed in what State:	
		Date forme	ed:	
		Authorized	l to do business in New Yorl	k? yesno
	4.	Sole Propr	ietorship:	
		1	1	
E.	organi No; h	ization(s)? Is owever, the	f so, indicate name of relate	or indirect affiliate of any other ed organization(s) and relationship:  be a subsidiary, partner or affiliate
F.	Mana	gement of C	ompany:	
	1.		ners, officers, directors and n): Publicly held company –	partners (complete all columns for Annual report attached.
	AME			
(First, M HOME			OFFICE HELD	OTHER PRINCIPAL BUSINESS
				,
			57 H	
	2.			the Company now a plaintiff or a ation? yesno
	there		knowledge - publicly held apact to proposed project in	company. If there is any litigation Montgomery County.
	3.			en convicted of a criminal offense Not to the Company's knowledge

	impact to proposed project in Montgomery County.					
	been bankr detail  N/A impact to pro	connected ever been in reuptcy? yesno. If s in a separate attachment.  - publicly held company. If t posed project in Montgomery				
G.		ners of Company: Is Company yesno. If yes, list	exchanges where stock traded. NYSE			
Schedules 130	G or 13D filed		rest in the Company: Please see any ange Commission (publically available			
NAN	ИE	ADDRESS	PERCENTAGE OF HOLDING			
V/A						
Н.	Company's F  1. Key F  2  3	Principal Bank(s) of account: Bank				
follow A. Do	Information concerning lease or sublease of the project. (Please complete the following section if the Company intends to lease or sublease the Project). A. Does the Company intend to lease or sublease more than 10% (by area or fair market value) of the Project? yes x no. If yes, please provide detail.					
	nding written l	of the space intended to be le ease or sublease?	ased or subleased is now subject to a			

		UBLEA . Sub-le	.SE essee Name: N/A				
		Street	Address:				
		CITY	i	STATE:	ZIP:		
		Emplo	oyer's ID No:				
		Sub-le	essee is:	e			
			oration: ionship to Compa	_ Partnership: nny:	Sole Proprieto	orship:	
		Perce	ntage of Project t	o be leased or sublea	ased:		
		Use o	f Project intended	d by Sub-lessee:			
		Date of	of lease or sublea	se to Sub-lessee:			
		Term	of lease or sublea	ase to Sub-lessee:			
III.	<u>Data</u>	regardi	ing Proposed Pr	<u>oject</u>			
	A.	Locat	ion of Proposed I	Project:			
		1.		: <u>Intersection of 5S</u>	and Fort Hunter I	Rd (Florida	<u>Business</u>
		2.	Park Extension City/Town/Vill	) lage of: Town of Flo	rida		
	B.	Projec	ct Site:				
		1.	Approximate si	ize (in acres or squar	e feet) of Project s	ite: <u>100 acre</u>	s est
		2.	a. Are there	in which the Project any variances or spe _ yesx uch variances or on	ecial permits affect no. If yes, list bel	ing the site? ow and attac	ch copies
		3.	no.	ing buildings on pro e number and appro ng:			

4.	Are existing buildings in operation? yes x no. yes, describe present use of present buildings:					
5.	Are existing buildings abandoned? yes x no. Attach photographs of present buildings.					
6.	Utilities serving Project site:					
	Water (Municipal): <u>City of Amsterdam (Town of Florida Water District)</u>					
	Sewer (Municipal): <u>City of Amsterdam (Town of Florida Sewer District)</u> Electric (Utility): <u>National Grid</u>					
	Natural Gas (Utility): <u>National Grid</u>					
	Other (describe):					
7.	Present legal owner of Project site: a. If the Company owns Project site, indicate date of purchase: N/A					
	b. If the Company is not the owner, does the Company have an option signed with the owner to purchase the Project site? yesno. If yes, indicate date option signed with the owner.					
	c. Date option expires: If the Company does not own the Project site, is there a relationship legally or by common control between the Company and the present owners of the Project site? yes no. If yes, describe in detail on a separate attachment. Purchase and sale agreement finalized March 2016.					
Buildi	ngs:					
1.	Does part of the project consist of a new building or buildings?					

C.

	2.	Does part of the project consist of additions and/ or renovation existing buildings? yes x no. If yes nature of expansion and/ or renovation:	ons to the indicate
D.	Proje	ect Use: What are the principal products to be produced at the Project?	
		N/A	
	2.	What are the principal activities to be conducted at the Project?	
		Warehousing and distribution	
	3.	Will any portion of the Project be used for any of the following p	ourposes:
		Retail food and beverage services: yes _	<u>x</u> no
		Automobile sales or service: yes	
		Recreation or entertainment: yes _	
		Golf course: yes _	
		Country club: yes _	
		Massage parlor: yes _	<u>x</u> no
			<u>x</u> no
		Skating facility (including roller skating,	
		skateboard, and ice skating): yes _	<u>x</u> _no
		Racquet sports facility (including handball	
		and racquetball courts): yes _	<u>x</u> _no
		Hot tub facility: yes _	<u>x</u> _no
		Suntan facility: yes _	
		Racetrack: yes _	<u>x</u> _no
		If the answer to any of the above questions is yes, please furnish a separate attachment.	details on
	4.	Does the Project include facilities or property that are primari making retail sales of goods or services to customers who perso such facilities? yesx no. If yes, please provide details	nally visit
	5.	If the answer to question 4 is yes, what percentage of the corporate will be expended on such facilities or property primari making retail sales of goods or services to customers who person the Project? % N/A	ily used in

0.	than 33.33%, indicate whether any of the following apply to the Project: N/A
	a. Is the Project likely to attract a significant number of visitors from outside the economic development region in which the Project will be located? yesno
	b. Would the project occupant, but for the contemplated financial assistance from the Agency, locate the related jobs outside the State of New York?
	c. Is the predominant purpose of the Project to make available goods or services which would not, but for the Project, be reasonably accessible to the residents of the City, Town or Village within which the Project will be located because of a lack of reasonably accessible retail trade facilities offering such goods or services? yes no. If yes, please provide detail.
	d. Will the Project be located in one of the following: (a) the City of New York; (b) an area designed as an economic development zone pursuant to Article 18-B of the General Municipal Law; or (c) a census tract or block numbering area (or census tract or block numbering area contiguous thereto) which, according to the most recent census data, has (i) a poverty rate of at least 20% for the year in which the data relates, or at least 20% of households receiving public assistances, and (ii) an unemployment rate of at least 1.25 times the statewide unemployment rate for the year to which the data relates?no
7.	If the answers to subdivisions c through e of question 6 is yes, will the Project preserve permanent, private sector jobs or increase the overall number of permanent, private sector jobs in the State of New York?  yesno. If yes, please provide detail:
	N/A
8.	Will the completion of the Project result in the removal of a plant or facility of the Company or another proposed occupant of the Project (a "Project Occupant") from one area of the State of New York to another area of the State of New York? yesx no. If yes, please explain:

9.	more plants or facilities of the Company located in the State of New York? yes x_ no. If yes, please provide detail:
10.	If the answer to either question 8 or question 9 is yes, indicate whether any of the following apply to the Project: N/A
	<ul> <li>a. Is the Project reasonably necessary to preserve the competitive position of the Company on such Project Occupant in its industry? yesno. If yes, please provide detail:</li> </ul>
	b. Is the Project reasonably necessary to discourage the Company or such Project Occupant from removing such other plant or facility to a location outside of the State of New York? yesno. If yes, please provide detail.
11.	Will the Project be owned by a not-for-profit corporation? yes no. If yes, please provide detail:
12.	If the answer to question 11 is yes, indicate whether any of the following apply to the Project: N/A
	a. Is the Project a housing facility primarily designed to be occupied by individuals 60 years of age or older? yesno. If yes, please explain:
	b. Is the Project a dormitory for an educational institution? yesno. If yes, please explain:
	c. Is the Project a facility as defined in Article 28 of the Public Health Law? yesno. If yes, please explain:
13.	If the answer to any of the questions contained in question 12 is yes, indicate whether the cost of the Project will exceed \$15 million yesno. If yes, please provide detail:
14.	Will the Project be sold or leased to a municipality? yesx no. If yes, please provide detail:

	E.	Construction Status:
		1. Has construction work on this Project begun? yes x no. If yes, please discuss in detail the approximate extent of construction and the extent of completion. Indicate in your answer whether such specific steps have been completed as site clearance and preparation; completion of foundations; installation of footings; etc.:
	.w.	2. Please indicate amounts of funds expended on this project by the Company in the past three (3) years and the purposes of such expenditures:  N/A
	F.	Method of Construction After Agency Approval: If the Agency approves the Project which is the subject of this application, there are two methods that may be used to construct the Project. The applicant can construct the project privately and sell the project to the Agency upon completion. Alternatively, the applicant can request to be appointed as "agent" of the Agency, in which case certain laws applicable to public construction may apply to the Project. Does the applicant wish to be designated as "agent" of the Agency for the purposes of constructing the Project? _x _ yes
IV.	Benef	its expected from the Agency
	A.	Is the applicant requesting that the Agency issue bonds to assist in financing the Project? yesxno
	В.	Is the interest on such bonds intended to be exempt from federal income taxation?  yes no N/A
	C.	Is the applicant requesting any real property tax exemption that would not be available to a project that did not involve the Agency?x yesno
	D.	Is the applicant expecting that the financing of the Project will be secured by one or more mortgages? yesxno. If yes, what is the approximate amount of financing to be secured by mortgages? \$
	E.	Is the applicant expecting to be appointed agent of the Agency for purposes of avoiding payment of N.Y.S. Sales Tax or Compensating Use Tax?x yesno. If yes, what is the approximate amount of purchases, which the applicant expects to be exempt from the N.Y.S. Sales and Compensating Use Taxes? \$52,500,000 est by Montgomery County Business Development Center
	F.	What is the estimated value of each type of tax-exemption and value of the exemption?

All answers below estimated by the Montgomery County Business Development Center.							
	1.	Est. N.Y.S. \$4,200,000	Sales	and	Compensating	Use	Taxes:
	2.	Est. Mortgage R \$ <u>N/A</u>		ixes:			
	3.	Est. Real \$15,600,	Property 000	Tax	Exemptions	(after	PILOT):
	4.	Est. Other (pleas	se specify):	\$ <u> </u>	<u>J/A</u>		
G.	Please	e list the affected t	axing jurisd	ictions fo	or the Project.		
	1. 2.	Village (if any): Town:				/ <u>A</u> orida	
	3.	City (if any):			N	/A	• • • • • • • • • • • • • • • • • • • •
	4.	School District:			<u>F0</u>	onda-Fulto	onville
Н.	Are any of the tax-exemptions being sought in connection with the Project inconsistent with the Agency's tax-exemption policy contained in its Rules and Regulations? yes x no. If yes, please explain.						
The same of the sa	<u>Project Benefit Information</u> Provide the Agency with information in ATTACHMENT A – Cost Benefit Analysis so						
		Agency with information and control of the control					malysis so

V.

NOTE: APPLICANT MUST COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 15 THROUGH 17 HEREOF BEFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 18.

#### **VERIFICATION**

(If Applicant is a Corporation)

SS.:

STATE OF Clines

COUNTY OF Jan Diser

deposes and says that he is the SVP Global Supply Chain of Pollar General Corporation, the corporation named in the attached application; that he has read the foregoing application and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. Deponent further states that the reason this verification is made by the deponent and not by said company is because the said company is a corporation. The grounds of deponent's belief relative to all matters in the said application which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application as well as information acquired by deponent in the course of his duties as an officer of and from the books and papers of said corporation.

SVP of Global Supply Chair

DE

Sworn to before me this

day of

1ch, 20 16.

(Notary Publ

OF TENNESSEE NOTARY PUBLIC

Commission Expires JAN. 9, 2018

NOTE: APPLICANT MUST COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 15 THROUGH 17 HEREOF BERFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 18.
VERIFICATION
(If Applicant is a Sole Proprietor)
STATE OF)
STATE OF
(Name of Individual) and knows the contents thereof; and that the same is true and complete and accurate to the best of his knowledge. The grounds of deponent's belief relative to all matters in the said application, which are not stated upon his own personal knowledge are investigations which deponent has caused to be made concerning the subject matter of this application.
BY:(Applicant)
Sworn to before me thisday of, 20
(Notary Public)

NOTE: APPLICANT MUST COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 15 THROUGH 18 HEREOF BERFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 18.
VERIFICATION
(If Applicant is a Partnership)
STATE OF
deposes and says that he is one of the members of the firm  (Name of Individual)
BY:(Applicant)
Sworn to before me thisday of, 20
(Notary Public)

NOTE: APPLICANT MUST COMPLETE THE APPROPRIATE VERIFICATION APPEARING ON PAGES 15 THROUGH 18 HEREOF BEFORE A NOTARY PUBLIC AND MUST SIGN AND ACKNOWLEDGE THE HOLD HARMLESS AGREEMENT APPEARING ON PAGE 18.

#### HOLD HARMLESS AGREEMENT

Applicant hereby releases Montgomery County Industrial Development Agency and the members, officers, servants, agents, and employees thereof (hereinafter collectively referred to as the "Agency") from, and agrees to indemnify, defend, and hold the Agency harmless from and against any and all liability directly arising from (i) the Agency's examination and processing of, and action pursuant to or upon, the attached Application, regardless of whether the Applicant's application or the project described therein are favorably acted upon by the Agency, and (ii) the Agency's financing of the Project described therein; including, without limiting the generality of the foregoing, all causes of action, reasonable attorneys' fees, and any other reasonable expenses incurred in defending any suits or actions which may arise as a result of any of the foregoing, except to the extent attributable to the Agency's negligence, willful acts or omissions. If, for any reason (except due to Agency's negligence, willful acts or omissions), the Applicant fails to conclude or consummate necessary negotiations, or fails, within a reasonable period of time, to take reasonable, proper or necessary action, or withdraws, abandons, cancels or neglects the Application, then, and in the event, upon presentation of an invoice itemizing the same, the Applicant shall pay to the Agency, its agents or assigns, all actual costs reasonably incurred by the Agency in the processing of the Application, including reasonable attorneys' fees, if any, within forty-five (45) days of Applicant's receipt of Agency's invoice.

(Applicant)

Sworn to before me this aday of

lay of 11 M

,2016.

#### Attachment A: Cost Benefit Analysis

#### Project Questionnaire

Name of Project Beneficiary ("Company"):			<u>Dollar General Corporation or a to be formed wh</u> olly owned subsidiary
Brief Identification of the Project:			Regional distribution center
Estimated Amount of Project Benefits Sough	it		
1. Amount of Bonds Sought			N/A
2. Value of Sales Tax Exemption	n Sought		\$4,200,000 est by Montgomery County Business Development Center
3. Value of Real Property Tax E.	xemption Sought		\$15,600,000 est by Montgomery County Business Development Center
4. Value of Mortgage Recording	Tax Exemption Sought		N/A
	Projected Project Investment		
Land-Related Costs	Project Costs		
Land acquisition	\$5,200,000	÷	
Site Preparation	Included in construction cost total	_	
Landscaping	Included in construction cost total		
Utilities and infrastructure development	\$1,000,000 est	Utilities, ro	pads, etc.
Access roads and parking development	Included in construction cost total		
Other land-related costs (describe)	Included in construction cost total	-	
Building- Related Costs			
Acquisition of existing structures	N/A	-	
Renovation of existing structures	N/A	-	
New construction costs	\$65,000,000 est	_	
Electrical systems	Included in construction cost total	_	,
Heating, ventilation and air conditioning	Included in construction cost total		
Plumbing	Included in construction cost total		
Other building-related costs (describe)	Included in construction cost total		
Machinery and Equipment Costs			
Production and process equipment	N/A		
Packaging equipment	Included in warehouse equipment total	•	
Warehousing equipment	\$20,000,000 est	_	
Installation costs for various equipment	Included in warehouse equipment total		
Other equipment-related costs (describe)	N/A	-	

#### Project Costs

Project Costs
Included in warehouse equipment total
modded in warehouse equipment total
N/A
TBD
N/A
TBD
TBD
TBD
\$5,200,000
\$65,000,000
\$20,000,000
\$1,000,000
\$91,200,000

Please provide estimated total construction jobs and estimates of total annual wages and benefits as a result of the Project: Several hundred construction jobs will exist as a result of the project, but wages/benefits unknown.

				2017	2018			
Job Titles	Hourly Wage and Benefits	Base Salary 6 Months	Estimated NYS Income Tax Per Employee	Number of Employees Year 1	Number of Employees Year 2	Number of Employees Year 3	Total Estimated NYS Income Tax (all	Total Payroll for all Employees
Construction Jobs				150	150			
Total				150	150		\$0	\$0

Please provide estimated total new permanent jobs to be created as a result of the Project:

Permanent Jobs in Company	Description of new skills required for position (attached additional sheet if needed)	Base Annual Salary or Hourly Wage and Benefits	Estimated Additional NYS Income Tax	Number of Employees Year 1 - 2019	Number of Employees Year 2 - 2020	Number of Employees Year 3 - 2021	Total new permanent jobs to be created
Professional							
Clerical	Clerical	\$31,678		15	18	20	20
Sales							
Service							
Manufacturing							
Skilled	Maintenance	\$32,847		15	15	15	15
Semi -Skilled	Warehouse	\$31,406		280	320	365	365
Unskilled							
Other (describe)							
Management	Management	\$64,064		25	27	30	30
Totals				335	380	430	430

#### PROJECTED OPERATING IMPACT

Please provide estimates for the impact of Project operating purchases and sales:

Additional Purchases (1st full year following project completion)	TBD
Additional Sales Tax Paid on Additional Purchases	TBD
Estimated Additional Sales (1st full year following	TBD
Estimated Additional Sales Tax to be collected on additional	TBD

Please provide estimates for the impact of Project on existing real property taxes and new payments in lieu of taxes ("PILOT Payments"):

#### See Attached PILOT Calculation Worksheet

Year	% of Assessed Value	Project Facility PILOT Payment	Montgomery County PILOT Payment	School District PILOT Payment	Total Annual PILOT Payment
1	0%				
2	0%	*			
3	25%				
4	25%		(3)		
5	25%				
6	50%	· · · · · · · · · · · · · · · · · · ·		_	
7	50%				
8	50%				
9	50%				
10	50%				
11	75%				
12	75%				
13	75%				
14	75%				
15	75%				
tal					

Existing Real Property Taxes Paid on Property per year is \$4,400 which will not be abated.

# PILOT CALCULATION WORKSHEET

# DOLLAR GENERAL

65,000,000.00 50,00% 32,500,000.00 Full Value Equalization Rate Assessed Value

TAXES WITH NO PILOT	O PILOT	,		Year 2	Year3	Year 4	Year 5	Year6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
County Town/Highway	25.27389		821,401,43 \$	821,401,43 \$	821,401,43 \$	821,401,43 \$	821,401.43	821,401.43 \$	821,401,43 \$	821,401,43 \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	821,401,43	8 821,401.43 \$	821,401.43 \$	821,401.43 \$	821,401,43 \$	\$ 821,401.43
FFCS	34,66179		,126,506,18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	04.00 \$ 1.000.004.0 \$ 1.000.00	1,126,508,18	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18 \$	1,126,508.18
		\$	\$ 09'606'25	1,947,909.60 \$	1,947,909.50 \$	1,947,909.60 \$	\$ 1,947,909.60 \$	1,947,909.60	1,947,909.60 \$	1,947,909.60 \$	\$ 1,947,909.60 \$ 1,947,909.60 \$ 1,947,909.60 \$ 1,947,909.60 \$ 1,947,909.60 \$ 1,947,909.60 \$ 1,947,909.60 \$	1,947,909.60	1,947,909.60	1,947,909,60 \$	1,947,909.60 \$	\$ 1,947,909.60 \$	1 947 909.60
											•	200000000000000000000000000000000000000					20,100,000

	32,500,000,00		•		8,125,000.00	\$ 8,125,000.00 \$	8,125,000,00 \$	16,250,000.00 \$	8,125,000,00 \$ 16,250,000,00 \$ 16,250,000,00 \$	\$ 16,250,000,00 \$	16,250,000,00 \$	16,250,000,00	124,375,000,00	16,250,000,00 \$24,375,000,00 \$24,375,000,00 \$24,375,000,00	24,375,000,00 \$	24,375,000.00 \$	24,375,000,00
	_	Percentage Sanda States	THE PERSON NAMED IN	STATE STATE STATE OF THE PARTY	NAME OF TAXABLE AND PARTY OF TAXABLE PAR	SHOOT CONSTITUTED	PILOT SCHEDULE	Enchancemental and	STORY CONTRACTOR	Section Control	September Seminary	SCHOOL SEE	Opposition and an experience of	A CONTRACTOR IN	AND STATISTICS OF STATISTICS O	CINCLESSINGWEEN STREET	point Asim sarring
		%0	THE PARTY OF	960	25%	25%	25%	%09	1,09	20%	20%	3,05	75%	75%	75%	*25	75%
		Year 1	STATE OF THE PARTY	9ar 2	Year 3	Year 4	Year5	Year 6	rear /	Teard	rear s	1ear 10	T cal 13	168112	1691 13	104 14	rear 10
l			5		205,350,36	\$ 205,350,36 \$	\$ 96,350,36 \$	410,700.71 \$	410,700.71	\$ 410,700.71 \$	410,700.71 \$	410,700.71	616,051,07 \$	\$ 616,051.07 \$	616,051.07 \$	616,051,07 \$	616,051,07
				•	281 627.04	\$ 281,627,04 \$	281,627,04 \$	563,254,09 \$	563,254,09 \$	\$ 563,254,09 \$	563,254,09 \$	563,254,09 \$	844,881,13 \$	\$ 844,881,13	844,881,13 \$	844,881,13 \$	844,881,13
	*0		-		486 977.40	\$ 486.977.40 \$	486 977.40 \$	973.954.80 \$	973,954.80	1 973.954.80 \$	973,954,80 \$	973,954,80 \$	1,450,932,20	1,460,932.20	1,460,932.20 \$	1,460,932.20 \$	1,460,932,20
	-11															•	13,635,367,20
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															SA	SAVINGS	15.583.276.30

Tabling Authorication         Rate Sections         Year 1         Year 2         Year 3         Year 9         Year 9 <th>איור</th> <th>•</th> <th>32,500,000,00</th> <th>\$ 16,250,000.00</th> <th>\$ 17,675,000.00 \$</th> <th>19,500,000,00</th> <th>* 00,000,001,15 *</th> <th>27,750,000,00</th> <th>22,750,000.00 \$ 24,375,000.00 \$</th> <th>00,000,028,12 4 00,000,000,02</th> <th>\$ 00'000'CFB'/Z</th> <th>00'000'007'87</th> <th>20,000,000,00</th>	איור	•	32,500,000,00	\$ 16,250,000.00	\$ 17,675,000.00 \$	19,500,000,00	* 00,000,001,15 *	27,750,000,00	22,750,000.00 \$ 24,375,000.00 \$	00,000,028,12 4 00,000,000,02	\$ 00'000'CFB'/Z	00'000'007'87	20,000,000,00
90 Jundention Rate 55% 90% 55% 90% 50% 90% 50% 90% 50% 90% 50% 90% 50% 90% 90% 90% 90% 90% 90% 90% 90% 90% 9			=	Year 1 was 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year9	- 69
1.527388   1.527388   1.527388   1.527388   1.527388   1.5257388	Taylor hyladication	Rate	40	50%	55%	*609	82%	%02	75%	80%	85%	%06	123
4,66179 5 0.025460 5 0.050401 7 120.0521 7 120.0527 2 0.040411.15 0.02064 5 0.02064 5 0.010573.05 5 0.01057.05 5 0.00041.12 0.0004 5 0.000	County	25,273,89		17 007 014	\$ 451,770,78 \$	492.840.86 \$	533.910.93 \$	574.981.00	\$ 10,150,918	657,121,14 \$	698,191,21 \$	739,261,28 \$	
\$ 077 054 80 \$ 1077 054 80 \$ 1785 14124 \$ 1305 56772 \$ 1400 952,70 \$ 1 655 723.16 \$ 1,753,118.64 \$	9000	24 66170		563 254 09	\$ 619 579 50 \$	675 904 91	732 230 31 \$	788 555.72 \$	844.881.13 \$	901,206,54 \$	\$ 557,531,95 \$	1,013,857,36 \$	4
			10	\$ 973 954 80	\$ 1.071.350.28 \$	1.168.745.76 \$	1,266,141,24 \$	1,363,536,72	1,460,932,20 \$	1,558,327,68 \$	1,655,723.16 \$	1,753,118.64 \$	

1,996.27 2,433.78 4,430.05 EXISITING TAXES NOT ABATEABLE
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#### CERTIFICATION

I certify that I have prepared the responses provided in this Questionnaire and that, to the best of my knowledge; such responses are true, correct and complete. I understand that the foregoing information and attached documentation will be relied upon, and constitute inducement for, the Agency in providing financial assistance to the Project. I certify that I am familiar with the Project and am authorized by the Company to provide the foregoing information, and such information is true and complete to the best of my knowledge. I further agree that I will advise the Agency of any changes in such information, and will answer any further questions regarding the Project prior to the closing.

Name of Person Completing Project Questionnaire on behalf of the Company.	
Name: Mark Payne	
Title: Director, Supply Chain Operations	
Phone Number: (615) 855-4439	
Signature:	
Date Signed:, 2016.	
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