

## Opinion of Probable Construction Cost

Project: Carleton Villa Restoration

Owner: Ronald Clapp

**Date:** Friday, May 17, 2024 **Project Phase:** Masterplan Concept

Project Phase: Masterplan Concep

ITEM DESCRIPTION	UOM	QUANTITY	l	JNIT COST	ITEM COST
Building Demolition & Stabilization					
Electrical Service	Allowance	1	\$	50,000.00	\$ 50,000
Scaffolding	Lump	1	\$	75,000.00	\$ 75,000
(Purchasing equipment) East Wing Demolition	CY	450	\$	120.00	\$ 54,000
Main House Selective Removals	SF	17,000	\$	8.00	\$ 136,000
(Anticipate 100% of existing subfloors removed)	_				
Main House Plaster and Lathe Removal	SF	17,000	\$	5.00	\$ 85,000
Barge Transportation (Villa to CV)	Day	10	\$	2,500.00	\$ 25,000
Trucking Transportation (CV to Rodman)	Day	10	\$	2,520.00	\$ 25,200
Tipping Fees	Ton	300	\$	100.00	\$ 30,000
Masonry Salvage (New kitchen foundation)	Allowance	1	\$	50,000.00	\$ 50,000
Structural Masonry Restoration (Repointing, replacement, rebuilding)	Allowance	1	\$	100,000.00	\$ 100,000
Chimney Stabilization & Restoration (Shoring, bracing, repointing) Roof Reconstruction	Allowance	1	\$	200,000.00	\$ 200,000
Framing (Anticipate 50% of roof framing)	SF	8,000	\$	30.00	\$ 240,000
Sheathing (Anticipate 100% new sheathing) Floor Reconstruction	SF	16,000	\$	10.00	\$ 160,000
Framing (Anticipate 100% of main house)	SF	14,000	\$	8.00	\$ 112,000
Sheathing (Anticipate 100% of main house) Wall Reconstruction	SF	14,000	\$	10.00	\$ 140,000
Framing (Anticipate 50% of exterior walls)	SF	3,000	\$	30.00	\$ 90,000
Sheathing (Temporary bracing/shoring)	SF	3,000	\$	10.00	\$ 30,000
Stabilization Subtotal					\$ 1,602,200
Contingency	20%				\$ 320,440
General Conditions	15%				\$ 240,330
(Typical mainland construction is 10%) Overhead/Profit/Insurance	15%				\$ 240,330
Escalation	6%				\$ 96,132
ESTIMATED BID					\$ 2,499,432
A & E Design Fees	4%				\$ 99,977
ESTIMATED PROJECT COST					\$ 2,599,409

NOTE:

This estimate is representative of a reasonable opinion of cost based on public and private sources of information. However, it should not be interpreted as a definitive or guaranteed prediction of the successful bid from a contractor as bids may vary due to fluctuating market conditions, a lack of surplus bidders, proprietary specifications, differing perceptions of risk, and other external factors. Consequently, this estimate is expected to fall within the range of competitive bids from multiple contractors and subcontractors.



# Pro Forma

	FY2028	FY2029	FY2030
Revenue	\$2,755,176	\$2,892,935	\$3,037,589
Direct Costs	\$723,554	\$759,732	\$797,720
Gross Margin	\$2,031,622	\$2,133,203	\$2,239,869
Gross Margin %	74%	74%	74%
Operating Expenses			
Salaries & Wages	\$327,170	\$337,204	\$342,455
Employee Related Expenses	\$39,260	\$40,464	\$41,095
Advertising	\$38,000	\$39,900	\$41,896
Accounting & Professional Fees	\$18,000	\$18,360	\$18,728
Credit Card Fees	\$44,083	\$46,287	\$48,601
Utilities	\$46,000	\$46,920	\$47,860
Insurance	\$35,000	\$35,700	\$36,415
Maintenance & Repairs	\$12,000	\$12,240	\$12,488
<b>Total Operating Expenses</b>	\$559,514	\$577,075	\$589,538
Operating Income	\$1,472,108	\$1,556,128	\$1,650,330



#### To whom it may concern:

Regarding the Stabilization of the Carleton Villa Project in Cape Vincent, New York, the funds from the attached accounts will be utilized and will cover the anticipated costs associated with the local share of the RestoreNY Grant which is \$225,000.

### Information you requested

From: American Express Personal Savings (donotreplyps@welcome.americanexpress.com)

To: r1@bellsouth.net

Date: Tuesday, May 21, 2024 at 01:48 PM EDT





Account Ending: 0816

#### Information you requested

Thank you for contacting us regarding the High Yield Savings Account from American Express Personal Savings. Following is the information you requested:

The balance on your account referenced above, including accrued interest as of close of business 05/21/2024, is \$135,847.00.

If you have any questions about your account, please contact us at 1-800-446-6307.

Remember, you can access your account online anytime at <u>yo.amex/savings</u>.

We value our relationship with you and thank you for choosing American Express Personal Savings.

Sincerely,

American Express Savings American Express National Bank

24/1 Account Argest Member POIL West Class II

Accounts offered by American Express National Bank. Member FDIC.

Feedback

Privacy Statement

Add us to your address book

Your Personal Saving Account information is included above to help you recognize this as a customer service e-mail from American Express National Bank. Click the following links to learn more about e-mail security and reporting suspicious e-mail or online security. Please do not reply to this e-mail but instead contact us via Customer Service.

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FSBENFISPS10099



### **Deposit Account Balance Summary**

05/21/2024

Requestor information: RONALD CLAPP

711 N BROADWAY LANTANA, FL 33462-1623

	Sumn	nary of Deposit	Account	
Account Number	Account Type	Open Date	Current Balance	Avg Balance (12 mos
5157	Chase Total Checking	10/16/2018	\$91,411.61	\$18,857.00
	C	ustomer Inform	ation	
RONALD CLAPP		So	le Owner	
<u>.</u>				1 4444
and the second s	tertingers service.			
				**********
**************************************				

Deposit Account Balance Summary request completed by:

ELZBIETA BARAN (561) 642-5818 Lake Worth Lake Ave JPMorgan Chase Bank, N.A. Lake Worth Lake Ave 202 Lake Ave FL7-0095 Lake Worth, FL 33460

# PLEASE NOTE THAT THE INFORMATION PROVIDED IN THIS LETTER WILL BE THE ONLY INFORMATION RELEASED BY JPMorgan Chase, N.A.

This letter is written as a matter of business courtesy, without prejudice, and is intended for the confidential use of the addressee only. No consideration has been paid or received for the issuance of this letter. The sources and contents of this letter are not to be divulged and no responsibility is to attach to this bank or any of its officers, employees or agents by the issuance or contents of the letter which is provided in good faith and in reliance upon the assurances of confidentiality provided to this bank. Information and expressions of opinion of any type contained herein are obtained from the records of this bank or other sources deemed reliable, without independent investigation, but such information and expressions are subject to change without notice and no representation or warranty as to the accuracy of such information or the reliability of the sources is made or implied or vouched in any way. This letter is not to be reproduced, used in any advertisement or in any way whatsoever except as represented to this bank. This bank does not undertake to notify of any changes in the information contained in this letter. Any reliance is at the sole risk of the addressee.

#### ACBBapex Outgoing Wire

#### **Basic Information**

Business Function {3600}

Wire Type {1510} Sender Name {3100}

Receiver Name {3400}

OMAD {1120}

Account Number

Released By

CTR - Customer Transfer

1000 Gouverneur Savings

**JPMCHASE** 20240522 MMQFMP2H 071251

05221423FT01 F221371592

ehight @ 5/22/2024 2:20 PM

Amount {2000} Sender ABA {3100} Receiver ABA {3400}

IMAD {1520} **Business Date** 

Originator FI {5100}

\$500.00 221371592 021000021

F - Fed Routing Number

**42 CHURCH STREET** 

GOUVERNEUR, NY 13642

Gouverneur Savings and Loan Associa

221371592

20240522 MMQFMP3W 000271 Wednesday, May 22, 2024

Created By

ID Code

Identifier

Address

Name

KJones324 @ 5/22/2024 2:04 PM

Originator Information

Originator {5000}

9 - Other Identification ID Code Identifier signature card Town of Cape Vincent Name Address Paul Aubertine

PO Box 680

Cape Vincent NY 13618

Originator to Beneficiary {6000}

Town of Cape Vincent Restore NY Round 8

Beneficiary Information

Beneficiary {4200}

ID Code D - Demand Deposit Account (DDA) Number

Identifier 007004796 Name ESD Ed Income Address 625 Broadway

Albany NY 12207

**OFAC Results** 

There were no OFAC hits on this wire.

5/22/2024 2:40:57 PM



# **Property Data Sheet**

Municipal Name	Town of Cape Vincent					
Project Name	Stabilization of Carleton Villa					
✓ Limit descrip ✓ Attach a phot ✓ Attach a Site	Individual Property Data Sheet tion to the space provided on t tograph of the building façade Control Affidavit for non-munic s of commitment for ALL financ	his form. for each prope cipally owned p	rty.			
Property Name/	Address	Carleton	n Villa, Carleton Island Road 1, Cape Vincent NY			
Size (in square for	eet):		15,000			
Is the municipali	ity the owner of this property?	Yes	No 🗸			
If NO, Name of F			Carleton Villa LLC			
	owner an official of the ipality, or spouse, son or unicipal official?	Yes ☐ No ✓				
Assessed Value		Date of Last				
of Property	\$ 444 705 00		1/1/24			
Opportunity Are	roperty located in a Brownfield a? lo 🕢	A .	If YES, provide name of zone/area:			
The abandoned histo	, describe the reuse strategy fo oric structure will be stabilized with a ng from future damage as phase two	new roof, the wa	Ils will be reframed and covered with new sheeting			
Estimated start of	date:		10/1/24			
Estimated comp	letion date:		1/1/25			
Describe status of Cape Vincer	of permits, zoning, or other reg	ulatory require				
The state of the s	s seminar of thirt					



## **Property Data Sheet - Individual Property Budget**

#### Check One in Each Column

Building Type* (Upon Project Completion)	Type of Construction (Commercial/Mixed-Use Only)	Building Category*	Project Type*
Residential Commercial <b>√</b> Mixed-Use	Office - Class A Office - Class B Office - Class C Office - Class D Light Mfg - Class A Light Mfg - Class B Light Mfg - Class C Light Mfg - Class C Retail - Class C	Vacant ✓ Abandoned ✓ Surplus Condemned	Demolition Deconstruction Rehabilitation ✓ Reconstruction

<sup>\*</sup>See Guidelines Section 7 for Definitions.

## **Funding Request Calculations**

- ·Please complete the applicable calculations for your project.
- •See Guidelines Section 5 for Commercial and HazMat Allowance Charts.
- ·Please note, that the funding requests cannot exceed the project budget.
- The funding request cannot exceed the municipal funding cap, found in Section 5 of the guidelines.
- •Please enter square footage for each category, even when it does not apply. If you are not seeking HazMat reimbursement, please enter 0.
- Please be patient as the residential calculations take some time to update.

#### COMMERCIAL PROJECTS

(Demolition Allowance	х	Total Sqft)	+	(HazMat Allowance	×	Total Sqft)	=	Maximum RNY Funding Request
\$ 0.00		0		\$ 0.00		0		0

Construction Allowance	х	Total Sqft)	+	(HazMat Allowance	x	Total Sqft)	=	Maximum RNY Funding Request
\$ 192.91		15000		\$ 120.75		15000		\$4,704,900



#### RESIDENTIAL PROJECTS

Enter 1 for Residential Projects 0

Does this project include affordable housing?

Yes – What percentage of the project includes affordable housing? \_\_\_\_0

Residential Allowance	+	(HazMat Allowance	Total Sqft	=	Maximum RNY Funding Request
0					0

					ATION/RECONSTRUCTION Project Maximum RNY
Residential Allowance	+	(HazMat Allowance	Total Sqft)	=	Funding Request
0	+			-	0

Projects	-									
Number of Apartments	×	Allowance	+	(HazMat Allowance	х	Total Sqft)	+	Affordable Housing Allowance	-	Maximum RNY Funding Request
	3C		4		M		-			0

<sup>\*</sup>If you have determined the project is eligible for the Affordable Housing Allowance, please enter "\$150,000" in the Affordable Housing Allowance prompt above. If not, please enter \$0.

Demolition Funding Request Amount   +   Reconstruction Funding Request Amount   =   Total Funding Requ
--

<sup>\*\*</sup>If your Single-Family Residential project involves both Demolition and Reconstruction, please complete the individual Demolition and Reconstruction funding sections and add them together above for your Total Funding Request.



RNY Funding Calculations for Projects	Aparti	ment Style Residential DEMOLITION	& R	EHAB/RECON
Residential Demolition Funding Request Amount	+	Apartment Style Rehabilitation/ Reconstruction Funding Request Amount		Total Funding Request
0	+	0	11	0

<sup>\*\*</sup>If your Apartment Style Residential project involves both Demolition and Reconstruction, please complete the individual Demolition and Reconstruction funding sections and add them together above for your Total Funding Request.

Please confirm your **Municipality's Funding Cap** noted in Section 5 of the Guidelines here: \$4,704,900

PLEASE BE ADVISED THAT IF YOUR FUNDING REQUEST CALCULATED ABOVE EXCEEDS YOUR MUNICIPALITY'S CAP, YOU WILL NEED TO REDUCE YOUR REQUEST TO THE CAP AMOUNT.



## **Property Data Sheet – Sources and Uses Statement**

Municipal Name: Town of Cape Vincent Site Name and Address: Carleton Villa, Carle	to televide de			Property M	ssessment List H	ndividual Property Numb	er: 1	
	ton Island Road	1						
Use of Funds		Source of Funds						
1. 1.11	Total	Restore	Muni	Equity*	Bank*			
Acquisition								
* Land								
Building				1				
Subtotal								
General Construction								
New Construction								
* Renovation		2,000,000.00				599,400.00		
Subtotal								
Infrastructure / Site Preparation								
Demolition		T				T		
Enviro Cleanup								_
Excavation / Grading		1						-
On-Site Streets								-
* Parking					-			_
" Water / Sewer								_
Subtotal					-		-	_
Indirect / Soft Costs		-						-
Closing Costs						T		
* Contingencies		_	-			-		_
* Engineering								-
Environmental Assessment							_	_
# Fees								_
n inspections								
* Insurance							_	_
* Legal Costs								_
Professional Service / Consultants								_
Subtotal								
LETTER OF COMMITMENT IS ATTACHED						1		
Other Costs								
•								T
•								
0		1						_
Subtotal						1	-	_
TOTAL								