

Project Information Form

Milwaukee Dept. of City Development
Redevelopment Authority of the City of Milwaukee

Please complete and submit the following information to the Department of City Development (DCD) for a more detailed review of the feasibility of your request for City or Redevelopment Authority financial assistance. Where there is not enough room for responses provided, please use an attachment.

Staff from the Department of City Development and Redevelopment Authority of the City of Milwaukee will contact you after evaluating the project with respect to its conformity with City of Milwaukee development goals and suitability for City assistance. Certain assistance programs have application fees.

Return completed application and review fee to: Rocky Marcoux, Commissioner, Dept. of City Development, 809 N. Broadway, Milwaukee, WI 53202.

Applicant Information

Legal Name United Milwaukee Scrap LLC

Mailing Address 3232 W Ford Dr Lac Ave
Milwaukee, WI 53210

Primary Contact Name David Arnstein Telephone: 414. 444. 8059

Email darnsteine@mswi.com FAX: 414-444-8097

Attorney Contact Information Ben Stern (414) 276-4080

Legal Entity ☐ Individual(s) ☐ Joint Tenants ☐ Tenants in Common ☐ Corporation
☒ LLC ☐ Partnership ☐ Other:

If not a Wisconsin corporation/partnership/LLC, state where organized: -

Will new entity be created for ownership? ☐ Yes ☒ No

Principals of existing or proposed corporation/partnership/LLC and extent of ownership interest.

<u>Name</u>	<u>Address</u>	<u>Title</u>	<u>Interest</u>
<u>Arthur Arnstein</u>	<u>1567 W Astor Woods Ct Mequon, WI</u>	<u>President</u>	<u>25%</u>
<u>Steven Lebinsky</u>	<u>10647 W Woodcrest Dr Mequon, WI</u>	<u>VP</u>	<u>25%</u>
<u>Richard Mechanic</u>	<u>6540 W Atwater Dr Glendale, WI</u>	<u>VP</u>	<u>50%</u>

Is any owner, member, stockholder, partner, officer or director of any previously identified entities, or any member of the immediate family of any such person, an employee of the City of Milwaukee?
☐ Yes ☒ No If yes, give the name and relationship of the employee:

Have any of the principals of the corporation/partnership/LLC ever been charged or convicted of a misdemeanor or a felony? ☐ Yes ☒ No If yes, please furnish details:

Job Impact Statement

If the project involves commercial or industrial space or retention or expansion of an existing business, provide information about jobs that will be impacted by this project. List both existing jobs and jobs that will be created, sorted by annual wages. (Full-time jobs are those with at least 30 hours/week.)

\$15,000-35,000:

63 Full Time (existing) _____ Part Time (existing) 4 Full Time (created) _____ Part Time (created)

\$35,000- 50,000:

23 Full Time (existing) _____ Part Time (existing) 2 Full Time (created) _____ Part Time (created)

\$50,000 +:

22 Full Time (existing) _____ Part Time (existing) _____ Full Time (created) _____ Part Time (created)

Totals =

130 Full Time (existing) _____ Part Time (existing) 6 Full Time (created) _____ Part Time (created)

Provide information about the benefits package offered by your company.

Benefit	Description	To whom is this benefit available?	Will benefit be available to new hires?
Health insurance	Eligible after 90 days	All Full-time	Yes
Dental insurance	Eligible after 90 days	All Full-time	Yes
401-K	Eligible after 1 yr service, match	All Full-Time	Yes
Tuition benefit	-	-	-
Pension	-	-	-
Other (employer-sponsored daycare, etc.)	Paid 110 days / vacation	All Employees	Yes

Provide information about the composition of your current workforce.

What percentage of the fulltime workforce is female? 7%.

What percentage of the fulltime workforce is minority? 73%.

What percentage of the fulltime workforce lives in the city of Milwaukee? 65%.

Please attach:

- Resumes of principals
- Articles/Bylaws/Partnership agreement of corporation/partnership/LLC
- ✓ • A list of properties in the City of Milwaukee in which buyer has an ownership interest either as an individual or as part of a corporation/partnership/LLC.

Project/Property Information

Describe the project for which you seek City assistance.

Address: 3295 W Townsend Ave

Proposed use: Rail Expansion Project (load/unload scrap metal)

Proposed tenants: United Milwaukee Scrap LLC

Anticipated investment: \$ 571,000

Have you received, or do you plan to seek, public financial assistance from any other sources for this project? If yes, please describe:

Yes, Transportation Economic Assistance Grant (TEA)

Project Summary: Building Area: - SF # Stories: - Basement ☐ Yes ☒ No
Land Area: - SF # Units: - # Parking Spaces -

Will project incorporate any "sustainable" concepts or be LEED-certified?

Rail will lower carbon emissions due to less trucks on road picking up material

Will a zoning change be requested? NO

Identify other approvals, permits or licenses (e.g., BOZA, Health Department, etc.):

No additional permits required

Discuss neighborhood impact/support:

Rail will decrease number of trucks in area. Aldermen supportive of project

If this project is considered for City financial assistance, you will be required to submit the following materials. Please submit them with this information form if they are available.

- Evidence of site control, if any - own site
- ~~Leases and pre-lease commitments, if any~~
- ~~Preliminary site and building plans/elevations, if available~~
- Phase I Environmental Assessment, if available - Phase II Attached
- Appraisal, if available -

Project Budget and Financial Information


Following preliminary staff review, projects that appear to advance the goals of the City of Milwaukee will be analyzed in greater depth to determine if City financial assistance is appropriate. The applicant will be required to submit the following additional documentation for such evaluation.

- 1) Detailed sources and uses statement for entire project - *Attached*
- 2) Detailed development budget including all soft and hard costs - *Attached*
- 3) Projected private development cash flows, including documentation of all material assumptions
- 4* First mortgage loan commitment letter
- 5* Evidence of anchor tenant, lease-up commitments, etc.

If you have any questions about this requirement, please contact Jim Scherer at (414) 286-5850.

Applicant Certification and Acknowledgement

I certify that the information contained in this application is, to the best of my knowledge, true and correct. I authorize the City or its consultants to verify the information obtained in this statement and to obtain additional information concerning the applicant(s) financial condition, although the City may rely on this information without any further verification. I agree to notify the City, in writing, of any changes that materially affect the accuracy of this statement.


Signature

Director Business Development
Title

9/27/10
Date

Signature

Title

Date
