

**Authority to Use  
Grant Funds**

**U.S. Department of Housing  
and Urban Development**  
Office of Community Planning  
and Development

<p><b>To:</b> (name &amp; address of Grant Recipient &amp; name &amp; title of Chief Executive Officer)</p> <p>Ms. Lisa Bova Hiatt Executive Director Governor's Office of Storm Recovery State of New York 25 Beaver Street New York, NY 10004</p>	<p><b>Copy To:</b> (name &amp; address of SubRecipient)</p> <p>Thomas J. King Director – Bureau of Environmental Review and Assessment Assistant General Counsel NYS Homes and Community Renewal Housing Trust Fund Corporation 99 Washington Avenue, Suite 1010 Albany, NY 12231</p>
---	---

<p>We received your Request for Release of Funds and Certification, form HUD-7015.15 on</p>	<p>9/08/2016</p>
<p>Your Request was for HUD/State Identification Number</p>	<p>B-13-DS-36-0001</p>

All objections, if received, have been considered. And the minimum waiting period has transpired.  
You are hereby authorized to use funds provided to you under the above HUD/State Identification Number.  
File this form for proper record keeping, audit, and inspection purposes.

Project Activity: Rainbow Marine Associates, LLC

Program Description: This activity will provide the business funds for the removal and disposal offsite of an existing 77-ft section of deteriorating timber bulkhead. Also replace a new 77ft bulkhead and the installation of an anchor system funded under the NYS Small Business Grant Program.

CDBG-DR funds: \$100,000  
Total Project funding: \$100,000

Project Location: 185 Sumpwams Avenue, Babylon, NY (Suffolk County)

<p>Typed Name of Authorizing Officer Stanley Gimont Title of Authorizing Officer Deputy Assistant Secretary for Grant Programs, Acting</p>	<p>Signature of Authorizing Officer</p> <p>X </p>	<p>Date (mm/dd/yyyy)</p> <p>SEP 26 2016</p>
--	---	---

Previous editions are obsolete.