

Authority to Use Grant Funds

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

To: (name & address of Grant Recipient & name & title of Chief Executive Officer) Ms. Lisa Bova-Hiatt Executive Director Governor's Office of Storm Recovery State of New York 25 Beaver Street New York, NY 10004	Copy To: (name & address of SubRecipient) Thomas J. King Certifying Officer NYS Homes and Community Renewal Housing Trust Fund Corporation 99 Washington Avenue, Suite 1010 Albany, NY 12231
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We received your Request for Release of Funds and Certification, form HUD-7015.15 on	11/17/2015
Your Request was for HUD/State Identification Number	B-13-DS-36-0001

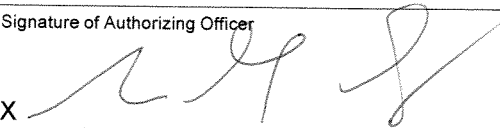
All objections, if received, have been considered. And the minimum waiting period has transpired. You are hereby authorized to use funds provided to you under the above HUD/State Identification Number. File this form for proper record keeping, audit, and inspection purposes.

Project Activity: Copiague Commons

Program Description: The Conifer Realty, LLC proposes to demolish an existing building to redevelop and construct a new 90 unit rental housing complex under the NYS Homes and Community Renewal Housing Trust Fund.

CDBG-DR funding: \$9,000,000
Total Project funding: \$30,086,250

Project Location: 54 Railroad Avenue, Babylon, NY (Suffolk County)-Hamlet of Copiague

Typed Name of Authorizing Officer Marion Mollegen McFadden Title of Authorizing Officer Deputy Assistant Secretary for Grant Programs	Signature of Authorizing Officer  X	Date (mm/dd/yyyy) DEC 03 2015
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