

**Governance Information (Authority-Related)**

Question	Response	URL (if applicable)
1. Has the Authority prepared its annual report on operations and accomplishments for the reporting period as required by section 2800 of PAL?	Yes	www.islipcda.org
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	www.islipcda.org
3. Has the lead audit partner for the independent audit firm changed in the last five years in accordance with section 2802(4) of PAL?	Yes	N/A
4. Does the independent auditor provide non-audit services to the Authority?	No	N/A
5. Does the Authority have an organization chart?	Yes	www.islipcda.org
6. Are any Authority staff also employed by another government agency?	No	
7. Has the Authority posted their mission statement to their website?	Yes	www.islipcda.org
8. Has the Authority's mission statement been revised and adopted during the reporting period?	No	N/A
9. Attach the Authority's measurement report, as required by section 2824-a of PAL and provide the URL.		www.islipcda.org

**Governance Information (Board-Related)**

Question	Response	URL
1. Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL?	Yes	N/A
2. Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL?	Yes	N/A
3. Has the Board established Finance Committee in accordance with Section 2824(8) of PAL?	Yes	N/A
4. Provide a URL link where a list of Board committees can be found (including the name of the committee and the date established):		<a href="http://www.islipcda.org">www.islipcda.org</a>
5. Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?	Yes	N/A
6. Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year		<a href="http://www.islipcda.org">www.islipcda.org</a>
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	<a href="http://www.islipcda.org">www.islipcda.org</a>
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	<a href="http://www.islipcda.org">www.islipcda.org</a>
9. Does the Board review and monitor the Authority's implementation of financial and management controls?	Yes	N/A
10. Does the Board execute direct oversight of the CEO and management in accordance with Section 2824(1) of PAL?	Yes	N/A
11. Has the Board adopted policies for the following in accordance with Section 2824(1) of PAL?		
Salary and Compensation	Yes	N/A
Time and Attendance	Yes	N/A
Whistleblower Protection	Yes	N/A
Defense and Indemnification of Board Members	Yes	N/A
12. Has the Board adopted a policy prohibiting the extension of credit to Board members and staff in accordance with Section 2824(5) of PAL?	Yes	N/A
13. Are the Authority's Board members, officers, and staff required to submit financial disclosure forms in accordance with Section 2825(3) of PAL?	Yes	N/A
14. Was a performance evaluation of the board completed?	No	N/A
15. Was compensation paid by the Authority made in accordance with employee or union contracts?	No	N/A
16. Has the board adopted a conditional/additional compensation policy governing all employees?	No	

Board of Directors Listing

Name	Cavanagh, Debra	Name	Ortiz, Renee
Chair of the Board	Yes	Chair of the Board	No
If yes, Chair Designated by.	Elected by Board	If yes, Chair Designated by.	
Term Start Date	01/01/2013	Term Start Date	01/01/2012
Term Expiration Date	03/01/2017	Term Expiration Date	12/31/2015
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Other	Nominated By	Other
Appointed By	Other	Appointed By	Other
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes	Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes	Complied with training requirement of Section 2824?	Yes
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	Yes

Board of Directors Listing

Name	Colon, Ramon V	Name	Raccuglia, Steven
Chair of the Board	No	Chair of the Board	No
If yes, Chair Designated by.		If yes, Chair Designated by.	
Term Start Date	01/01/2012	Term Start Date	04/01/2013
Term Expiration Date	01/31/2014	Term Expiration Date	03/31/2018
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Other	Nominated By	Other
Appointed By	Other	Appointed By	Other
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes	Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes	Complied with training requirement of Section 2824?	Yes
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Board of Directors Listing

Name	Troche, Manuel
Chair of the Board	No
If yes, Chair Designated by.	
Term Start Date	01/01/2013
Term Expiration Date	06/30/2014
Title	
Has the Board member appointed a designee?	
Designee Name	
Ex-officio	No
Nominated By	Other
Appointed By	Other
Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes
Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No

**Staff Listing**

Name	Title	Group	Department / Subsidiary	Union Name	Bargaining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the individual	Overtime paid by Authority	Performance Bonus	Extra Pay	Other Compensation/Allowances/Adjustments	Total Compensation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by State or local government
Alden, Cameron	Staff Attorney / Rehab Specialist	Professional				PT	Yes	65,812.76	65,812.76	1,464.42	0	0	0	67,277.18	No	
Felpo, Diane	Bookkeeper	Administrative and Clerical				FT	No	42,274.44	42,274.44	0	0	812.97	0	43,087.41	No	
Fink, Paul A	Executive Director / CEO	Executive				FT	Yes	103,100.40	103,100.4	0	0	0	10,071.77	113,172.17	No	
Fuchs, Robert T	General Counsel	Professional				FT	Yes	118,300.00	118,300	0	0	0	82.8	118,382.8	No	
Gesseck, Janet	Bookkeeper	Administrative and Clerical				FT	No	50,973.00	50,973	0	0	0	9,487.41	60,460.41	No	
Homfeld, George	Senior Rehab Specialists	Operational				FT	No	64,667.20	64,667.2	1,076.09	0	0	0	65,743.29	No	
Kuri, Robert M	Affordable Housing Program Director	Managerial				FT	Yes	73,964.80	73,964.8	0	0	0	8,658.24	82,623.04	No	
MacGibbon, Julia E	Director of Administrative Services	Managerial				FT	Yes	73,600.28	73,600.28	0	0	0	83.64	73,683.92	No	
Matera, Salvatore	Assistant Director / CFO	Executive				FT	Yes	92,925.56	92,925.56	0	0	0	668.78	93,594.34	No	
Silas, Barbara	Property Manager	Operational				FT	No	54,653.04	54,653.04	0	0	0	1,051.02	55,704.06	No	
Tilford, Vivian	Receptionist	Administrative and Clerical				FT	No	38,594.92	38,594.92	0	0	0	2,968.84	41,563.76	No	

**Staff Listing**

Name	Title	Group	Department / Subsidiary	Union Name	Bargaining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the individual	Overtime paid by Authority	Performance Bonus	Extra Pay	Other Compensation/Allowances/Adjustments	Total Compensation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by State or local government
Toth, Terry	Rehabilitation Coordinator	Administrative and Clerical				FT	No	55,588.00	55,588	152.7	0	0	1,069	56,809.7	No	
Williams, Kathy	Program Coordinator	Administrative and Clerical				FT	No	40,000.48	40,000.48	0	0	0	0	40,000.48	No	

**Benefit Information**

During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for

No

**Board Members**

Name	Title	Severance Package	Payment for Unused Leave	Club Member-ships	Use of Corporate Credit Cards	Personal Loans	Auto	Transportation	Housing Allow-ance	Spousal / Dependent Life Insurance	Tuition Assist-ance	Multi-Year Employ-ment	None of These Benefits	Other
Troche, Manuel	Board of Directors												X	
Cavanagh, Debra	Board of Directors												X	
Ortiz, Renee	Board of Directors												X	
Colon, Ramon V	Board of Directors												X	
Raccuglia, Steven	Board of Directors												X	

**Staff**

Name	Title	Severance Package	Payment for Unused Leave	Club Member-ships	Use of Corporate Credit Cards	Personal Loans	Auto	Transportation	Housing Allow-ance	Spousal / Dependent Life Insurance	Tuition Assist-ance	Multi-Year Employ-ment	None of These Benefits	Other
Fink, Paul A	Executive Director / CEO												X	
Fuchs, Robert T	General Counsel												X	

**Subsidiary/Component Unit Verification**

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct? No  
 Are there other subsidiaries or component units of the Authority that are active, not included in the PARIS reports submitted by this Yes

Name of Subsidiary/Component Unit	Status	Requested Changes
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**Subsidiary/Component Unit Creation**

Name of Subsidiary/Component Unit	Establishment Date	Entity Purpose
Islip's Housing Development Fund Company, Inc.	07/01/1990	The Organization cooperates with the Town of Islip Community Development Agency in various activities related to the provision of affordable housing ownership and rental for low and moderate income individuals / families.

**Subsidiary/Component Unit Termination**

Name of Subsidiary/Component Unit	Termination Date	Termination Reason	Proof of Termination
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Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

<u>Assets</u>	
<b>Current Assets</b>	
Cash and cash equivalents	\$3,467,768
Investments	\$0
Receivables, net	\$1,406,252
Other assets	\$117,034
<b>Total Current Assets</b>	<b>\$4,991,054</b>
<b>Noncurrent Assets</b>	
Restricted cash and investments	\$298,331
Long-term receivables, net	\$13,759,994
Other assets	\$0
<b>Capital Assets</b>	
Land and other nondepreciable property	\$11,105,352
Buildings and equipment	\$3,830,225
Infrastructure	\$0
Accumulated depreciation	\$2,182,670
Net Capital Assets	\$12,752,907
<b>Total Noncurrent Assets</b>	<b>\$26,811,232</b>
<b>Total Assets</b>	<b>\$31,802,286</b>

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

**Current Liabilities**

Accounts payable	\$600,536
Pension contribution payable	\$62,553
Other post-employment benefits	\$0
Accrued liabilities	\$366,008
Deferred revenues	\$0
Bonds and notes payable	\$140,000
Other long-term obligations due within one year	\$0
<b>Total Current Liabilities</b>	<b>\$1,169,097</b>

**Noncurrent Liabilities**

Pension contribution payable	\$0
Other post-employment benefits	\$567,829
Bonds and notes payable	\$660,000
Long Term Leases	\$0
Other long-term obligations	\$508,150
<b>Total Noncurrent Liabilities</b>	<b>\$1,735,979</b>

**Total Liabilities**

**\$2,905,076**

Net Asset (Deficit)

**Net Asset**

Invested in capital assets, net of related debt	\$2,172,538
Restricted	\$25,395,990
Unrestricted	\$1,328,682
<b>Total Net Assets</b>	<b>\$28,897,210</b>

Summary Financial InformationSUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETSOperating Revenues

Charges for services	\$189,920
Rental & financing income	\$1,979,206
Other operating revenues	\$0
<b>Total Operating Revenue</b>	<b>\$2,169,126</b>

Operating Expenses

Salaries and wages	\$903,734
Other employee benefits	\$401,426
Professional services contracts	\$35,800
Supplies and materials	\$0
Depreciation & amortization	\$133,297
Other operating expenses	\$0
<b>Total Operating Expenses</b>	<b>\$1,474,257</b>

Operating Income (Loss) **\$694,869**

Nonoperating Revenues

Investment earnings	\$3,947
State subsidies/grants	\$0
Federal subsidies/grants	\$6,054,488
Municipal subsidies/grants	\$0
Public authority subsidies	\$0
Other nonoperating revenues	\$842,068
<b>Total Nonoperating Revenue</b>	<b>\$6,900,503</b>

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETS

Nonoperating Expenses

Interest and other financing charges	\$18,415
Subsidies to other public authorities	\$0
Grants and donations	\$326,343
Other nonoperating expenses	\$5,020,133
<b>Total Nonoperating Expenses</b>	<b>\$5,364,891</b>
<b>Income (Loss) Before Contributions</b>	<b>\$2,230,481</b>
Capital Contributions	\$0
Change in net assets	\$2,230,481
Net assets (deficit) beginning of year	\$26,666,729
Other net assets changes	\$0
Net assets (deficit) at end of year	\$28,897,210

**Current Debt**

Question	Response
1. Did the Authority have any outstanding debt, including conduit debt, at any point during the reporting period?	Yes
2. If yes, has the Authority issued any debt during the reporting period?	No

**New Debt Issuances List by Type of Debt and Program**

No Data has been entered by the Authority for this section in PARIS

**Schedule of Authority Debt**

Type of Debt	Statutory Authorization (\$)	Outstanding Start of Fiscal Year (\$)	New Debt Issuances (\$)	Debt Retired (\$)	Outstanding End of Fiscal Year (\$)
<b>State Obligation</b>					
State Guaranteed					
State Supported					
State Contingent Obligation					
State Moral Obligation					
Other State Funded					
<b>Authority Obligation</b>					
General Obligation	0.00	930,000.00	0.00	130,000.00	800,000.00
Revenue					
Other Non-State Funded					
<b>Conduit</b>					
Conduit Debt					
Conduit Debt - Pilot Increment Financing					

Real Property Acquisition/Disposal List

1. Address Line1: 39 Juniper Street  
 Address Line2:  
 City: CENTRAL ISLIP  
 State: NY  
 Postal Code: 11722  
 Plus4:  
 Province/Region:  
 Country: USA  
 Property Description: Residential Building  
 Estimated Fair Market Value: \$125,000  
 How was the Fair Market Value Appraisal  
 Determined?  
 Transaction Type: ACQUISITION  
 If Other, Explain:

Transaction Date: 07/13/2012  
 Purchase Sale Price: \$125,000.00  
Lease Data (If applicable)  
 Market Rate(\$/square foot):  
 Lease Rate(\$/square foot):  
 Lease Period (months):  
Seller/Purchaser/Tenant Data:  
 Organization: Town of Islip CDA  
 Last Name:  
 First Name:

Address Line1: 15 Shore Lane  
 Address Line2:  
 City: BAY SHORE  
 State: NY  
 Postal Code: 11706  
 Plus4:  
 Province/Region:  
 Country: USA  
 Relation With Board  
 member/senior authority  
 management? No

2. Address Line1: 36 Lakeview Avenue  
 Address Line2:  
 City: BAY SHORE  
 State: NY  
 Postal Code: 11706  
 Plus4:  
 Province/Region:  
 Country: USA  
 Property Description: Vacant Lot/Undeveloped Land  
 Estimated Fair Market Value: \$65,000  
 How was the Fair Market Value Appraisal  
 Determined?  
 Transaction Type: DISPOSITION SALE  
 If Other, Explain:

Transaction Date: 07/17/2012  
 Purchase Sale Price: \$65,000.00  
Lease Data (If applicable)  
 Market Rate(\$/square foot):  
 Lease Rate(\$/square foot):  
 Lease Period (months):  
Seller/Purchaser/Tenant Data:  
 Organization: Town of Islip Housing Authority  
 Last Name:  
 First Name:

Address Line1: 963 Montauk Highway  
 Address Line2:  
 City: OAKDALE  
 State: NY  
 Postal Code: 11769  
 Plus4:  
 Province/Region:  
 Country: USA  
 Relation With Board  
 member/senior authority  
 management? Yes

Real Property Acquisition/Disposal List

3. Address Line1: 42 Lakeview Avenue  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Vacant Lot/Undeveloped Land  
Estimated Fair Market Value: \$65,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: DISPOSITION SALE  
If Other, Explain:

Transaction Date: 07/17/2012  
Purchase Sale Price: \$65,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization: Town of Islip Housing Authority  
Last Name:  
First Name:

Address Line1: 963 Montauk Highway  
Address Line2:  
City: OAKDALE  
State: NY  
Postal Code: 11769  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? Yes

4. Address Line1: 1 Dartmonth Drive  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$250,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: DISPOSITION SALE  
If Other, Explain:

Transaction Date: 08/29/2012  
Purchase Sale Price: \$250,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization:  
Last Name: Andersen  
First Name: Eric

Address Line1: 1 Dartmonth Drive  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

Real Property Acquisition/Disposal List

5. Address Line1: 10 Bluejay Court  
Address Line2:  
City: BRENTWOOD  
State: NY  
Postal Code: 11717  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$220,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: DISPOSITION SALE  
If Other, Explain:

Transaction Date: 08/29/2012  
Purchase Sale Price: \$220,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization:  
Last Name: Linder  
First Name: Kevin

Address Line1: 10 Bluejay Court  
Address Line2:  
City: BRENTWOOD  
State: NY  
Postal Code: 11717  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

6. Address Line1: 42 Birch Street  
Address Line2:  
City: CENTRAL ISLIP  
State: NY  
Postal Code: 11722  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$180,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: DISPOSITION SALE  
If Other, Explain:

Transaction Date: 11/16/2012  
Purchase Sale Price: \$180,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization:  
Last Name: Pisani  
First Name: Patrica

Address Line1: 42 Birch Street  
Address Line2:  
City: CENTRAL ISLIP  
State: NY  
Postal Code: 11722  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

Real Property Acquisition/Disposal List

7. Address Line1: 29 East Cherry Street  
Address Line2:  
City: CENTRAL ISLIP  
State: NY  
Postal Code: 11722  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$115,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: ACQUISITION  
If Other, Explain:

Transaction Date: 01/30/2013  
Purchase Sale Price: \$115,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization: Town of Islip CDA  
Last Name:  
First Name:

Address Line1: 15 Shore Lane  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

8. Address Line1: 36 Fifth Street  
Address Line2:  
City: WEST ISLIP  
State: NY  
Postal Code: 11795  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$160,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: ACQUISITION  
If Other, Explain:

Transaction Date: 02/14/2013  
Purchase Sale Price: \$160,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization: Town of Islip CDA  
Last Name:  
First Name:

Address Line1: 15 Shore Lane  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

Real Property Acquisition/Disposal List

9. Address Line1: 51 West Adams Street  
Address Line2:  
City: EAST ISLIP  
State: NY  
Postal Code: 11730  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$225,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: ACQUISITION  
If Other, Explain:

Transaction Date: 03/13/2013  
Purchase Sale Price: \$225,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization: Town of Islip CDA  
Last Name:  
First Name:

Address Line1: 15 Shore Lane  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

10. Address Line1: 22 Williams Avenue  
Address Line2:  
City: EAST ISLIP  
State: NY  
Postal Code: 11730  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$201,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: ACQUISITION  
If Other, Explain:

Transaction Date: 03/16/2013  
Purchase Sale Price: \$201,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization: Town of Islip CDA  
Last Name:  
First Name:

Address Line1: 15 Shore Lane  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

Real Property Acquisition/Disposal List

11. Address Line1: 943 Nemeth Street  
Address Line2:  
City: BOHEMIA  
State: NY  
Postal Code: 11716  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$204,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: ACQUISITION  
If Other, Explain:

Transaction Date: 04/17/2013  
Purchase Sale Price: \$204,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization: Town of Islip CDA  
Last Name:  
First Name:

Address Line1: 15 Shore Lane  
Address Line2:  
City: BAY SHORE  
State: NY  
Postal Code: 11706  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

12. Address Line1: 29 East Cedar Street  
Address Line2:  
City: CENTRAL ISLIP  
State: NY  
Postal Code: 11722  
Plus4:  
Province/Region:  
Country: USA  
Property Description: Residential Building  
Estimated Fair Market Value: \$255,000  
How was the Fair Market Value Appraisal  
Determined?  
Transaction Type: DISPOSITION SALE  
If Other, Explain:

Transaction Date: 06/05/2013  
Purchase Sale Price: \$255,000.00  
Lease Data (If applicable)  
Market Rate(\$/square foot):  
Lease Rate(\$/square foot):  
Lease Period (months):  
Seller/Purchaser/Tenant Data:  
Organization:  
Last Name: Pierce  
First Name: Eric

Address Line1: 29 East Cedar Street  
Address Line2:  
City: CENTRAL ISLIP  
State: NY  
Postal Code: 11722  
Plus4:  
Province/Region:  
Country: USA  
Relation With Board  
member/senior authority  
management? No

Real Property Acquisition/Disposal List

13. Address Line1: 100 East Adams Street

Address Line2:

City: EAST ISLIP

State: NY

Postal Code: 11730

Plus4:

Province/Region:

Country: USA

Property Description: Residential Building

Estimated Fair Market Value: \$226,500

How was the Fair Market Value Appraisal

Determined?

Transaction Type: ACQUISITION

If Other, Explain:

Transaction Date: 06/13/2013

Purchase Sale Price: \$226,500.00

Lease Data (If applicable)

Market Rate(\$/square foot):

Lease Rate(\$/square foot):

Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization: Town of Islip CDA

Last Name:

First Name:

Address Line1: 15 Shore Lane

Address Line2:

City: BAY SHORE

State: NY

Postal Code: 11706

Plus4:

Province/Region:

Country: USA

Relation With Board

member/senior authority

management? No

Personal Property

This Authority has indicated that it had no personal property disposals during the reporting period.

**Property Documents**

Question	Response	URL (if applicable)
1. In accordance with Section 2896(3) of PAL, the Authority is required to prepare a report at least annually of all real property of the Authority. Has this report been prepared?	Yes	www.islipcda.org
2. Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring, and reporting of contracts for the acquisition and disposal of property?	Yes	www.islipcda.org
3. In accordance with Section 2896(1) of PAL, has the Authority named a contracting officer who shall be responsible for the Authority's compliance with and enforcement of such guidelines?	Yes	

**No Data has been entered by the Authority for this section in PARIS**

Additional Comments: