COMPLIANCE WITH STATEMENT OF BENEFITS **REAL ESTATE IMPROVEMENTS**

Prescribed by the Department of Local Government Finance

MAY 17 2023

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FORM CF-1 / Real Property

State Form 51766 (R6 / 4-23)

- Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Priory).
 This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor
- 3. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15 or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.3(j))
- With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (l).

ONFIDENTIAL

one (1) compliance form (Form CF-1/Real		and the same of		OMITULIVITAL	
SECTION 1	TAXPAYER	INFORMATION	RELIGIO		
Name of Taxpayer				unty	
Fitesa Indiana LLC				go	
Address of Taxpayer (number and street, city, state				GF Taxing District Number	
3400-A Fort Harrison Road, Terre Ha	iute, Indiana 4/804	1		1-002	
Name of Contact Person		Telephone Number		Email Address	
Kimberly Broadway		(864) 967-6		proadway@fitesa.com	
SECTION 2	LOCATION AND DES				
Name of Designating Body	Hauta Indiana	Resolution Number		Estimated Start Date (month, day, year) 6/1/2021	
Common Council of the City of Terre	naute indiana	7-2021		Actual Start Date (month, day, year)	
Location of Property 3400-A Fort Harrison Road, Terre Ha	auto Indiana 47804			1/2021	
Description of Real Property Improvements	aute, ilidialia 47004			timated Completion Date (month, day, year	
Description of Real Property Improvements				1/30/2021	
See attached Form SB-1				tual Completion Date (month, day, year)	
occ attached Form ob-1				ending 2023	
SECTION 3	EMPI OVEES	AND SALARIES	Mark Control		
EMPLOYEES AND S			STIMATED ON SB-1	ACTUAL	
	ALAINEO	113	STIMATED ON OD T	169	
Current Number of Employees					
Salaries		7,756,471		12,487,824	
Number of Employees Retained		113		113	
Salaries		7,756,471		7,756,471	
Number of Additional Employees		26		39	
Salaries		1,086,467	4,731,353		
SECTION 4	COST A	ND VALUES			
COST AND VALUES		REAL EST	ATE IMPROVEMENTS		
AS ESTIMATED ON SB-1	COST		AS	SSESSED VALUE	
Values Before Project			\$ 2,913,700		
Plus: Values of Proposed Project			\$ 1,372,500		
Less: Values of Any Property Being Replaced			\$		
Net Values Upon Completion of Project	2007	_	\$ 4,286,200	205005514145	
ACTUAL	COST			SSESSED VALUE	
Values Before Project	\$		\$		
Plus: Values of Proposed Project	\$		\$		
Less: Values of Any Property Being Replaced	\$		\$	\$	
Net Values Upon Completion of Project	\$		\$		
SECTION 5 WASTI	CONVERTED AND OTHER B	ENEFITS PROMIS	ED BY THE TAXPAYER		
WASTE CONVERTE	O AND OTHER BENEFITS		AS ESTIMATED ON SB	-1 ACTUAL	
Amount of Solid Waste Converted					
Amount of Hazardous Waste Converted					
Other Benefits:					
SECTION 6	TAXPAYER	CERTIFICATION		STATE PURPLE	
I hereby certify that the representations in					
Signature of Authorized Representative	Title Authorized A		Date Signed (month, day, year) 5/12/2023		



OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 and IC 6-1.1-12.1-5.9)

- 1. Not later than forty-five (45) days after receipt of this form, the designating body <u>may</u> determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
- 2. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination, including the date, time, and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
- 3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property), and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
- 4. If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

We h	nave reviewed the CF-1 and find that:					
The Property Owner IS in Substantial Compliance						
	The Property Owner IS NOT in Substantial Compliance					
Other (specify)						
Reaso	I ons for the Determination <i>(attach additional she</i>	ets if necessary)				
Signat	ture of Authorized Member				Date Signed (month, day, year)	
Attest	ed By	- 1	Desig	nating Body		
If the	property owner is found not to be in sub has been set aside for the purpose of co	stantial compliance, the proper	ty owne	r shall receive the opportunity for e held within thirty (30) days of th	a hearing. The following date and the date of mailing of this notice.)	
	of Hearing AA	Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Location of Hearing		
	□ PA					
		HEARING RESULTS (to be	compl	eted after the hearing)	The same of the state of the	
Approved			Denied (see Instruction 4 above)			
Reasons for the Determination (attach additional sheets if necessary)						
Signat	ture of Authorized Member	THE PROPERTY.			Date Signed (month, day, year)	
Attested By Des			Desig	Designating Body		
	(F)(Y)	APPEAL RIGHTS	[IC 6-1	1-12.1-5.9(e)]		
	perty owner whose deduction is denied by the coordinate to point together with a bond conditioned to p				in the office of the clerk of the Circuit or	



STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51767 (R6 / 10-14)

Prescribed by the Department of Local Government Finance

This statement is being completed for real property that qualifies under the following Indiana Code (check one box): Redevelopment or rehabilitation of real estate improvements (IC 6-1.1-12.1-4)

Residentially distressed area (IC 6-1.1-12.1-4.1)

INSTRUCTIONS: 1. This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise, this statement must be submitted to the designating body BEFORE the redevelopment or rehabilitation of real property for which the person wishes to claim a deduction.

PAY 20_

FORM SB-1 / Real Property

PRIVACY NOTICE Any information concerning the cost of the property and specific salaries paid to individual employees by the

property owner is confidential per IC 6-1.1-12.1-5.1.

2. The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area before the initiation of

the redevelopment or rehabilitation for which the person desires to claim a deduction.

3. To obtain a deduction, a Form 322/RE must be filed with the County Auditor before May 10 in the year in which the addition to assessed valuation is made or not later than thirty (30) days after the assessment notice is mailed to the property owner if it was mailed after April 10. A property owner who failed to file a deduction application within the prescribed deadline may file an application between March 1 and May 10 of a subsequent year.

4. A property owner who files for the deduction must provide the County Auditor and designating body with a Form CF-1/Real Property. The Form CF-1/Real Property should be attached to the Form 322/RE when the deduction is first claimed and then updated annually for each year the deduction is applicable.

IC 6-1, 1-12, 1-5, 1(b)

5. For a Form SB-1/Real Property that is approved after June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/Real Property that is approved prior to July 1, 2013, the abatement schedule approved by the designating body remains in effect. IC 6-1.1-12.1-17

SECTION 1		TAXPAYER	INFORMATION			
Name of taxpayer						
Fitesa Indiana LL						
Address of taxpayer (number	and street, city, state, ar	nd ZIP code)				
	ison Road, Terro	e Haute, Indiana 47804			E-mail addr	roos
Name of contact person			Telephone number ((864)) 967-56	35	E-man addr	1622
Hal Singley		LOCATION AND DECORID		THE RESIDENCE OF THE PARTY OF T		STREET, STREET
SECTION 2 Name of designating body	第 2位 2年 2月 2日 1日	LOCATION AND DESCRIPT	HOW OF PROPUSED	PROJECT	Resolution	number
	of the City of Te	erre Haute Indiana				
Location of property			County		DLGF taxing district number	
3400-A Fort Harris	son Road, Terre	e Haute, Indiana 47804	Vigo		84-002	
	mprovements, redevelop	oment, or rehabilitation (use additional	I sheets if necessary)			start date (month, day, year)
See attached					June 1	
						completion date (month, day, year)
		V-0-2-2-2-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3	entre en following en	-	STATISTICS.	0, 2021
SECTION 3		TE OF EMPLOYEES AND SALA				
Current number	Salaries	Number retained	Salaries	Number add	ditional	Salaries 1086467
113	7756471	113 ESTIMATED TOTAL COST AN	7756471		S HARRISON S	1000407
SECTION 4	AND ADVACABLE OF STREET	ESTIMATED TOTAL COST AN	ND VALUE OF PROP	REAL ESTATE	MDDOVEN	JENTS.
			COS			ASSESSED VALUE
Current values				~ ·		2913700.00
Plus estimated values of proposed project						1372500.00
	Less values of any property being replaced					0
Net estimated values upon completion of project						4286200
SECTION 5	WA	STE CONVERTED AND OTHE	R BENEFITS PROMI	SED BY THE TAX	PAYER	學之一的學術學學
Estimated solid waste	converted (pounds)		Estimated hazard	dous waste convert	ed (nounds	e)
	converted (pourtus)		Latinated nazate	Jours Waste Colliver	.ca (pourida	
Other benefits						
SECTION 6	四個 基础 有语		ERTIFICATION			的思想是自己的
I hereby certify that	the representations	s in this statement are true.				
Signature of authorized repr	resentative				Date signe	ed (month, day, year)
()X\					04/	14/2021
Printed name of authorized	representative		Title	Es / Nie	ator	
Hall Sing	ley			FO / DIK	901	
		Page	1 of 2			

			FOR USE OF TH	E DESIGNATING BO	DDY	and the same of the same of the
	nd that the applicant meets the IC 6-1.1-12.1, provides for the			dopted or to be adop	oted by this body. Sa	aid resolution, passed or to be passed
Α.	The designated area has be expires is	en limited to a pe	riod of time not to ex	ceed	calendar years* (se	e below). The date this designation
В.	The type of deduction that is 1. Redevelopment or rehabit 2. Residentially distressed a	ilitation of real esta		ted to: Yes N		
C.	The amount of the deductio	n applicable is lim	ited to \$			
D.	Other limitations or condition	ns (specify)				
E.	Number of years allowed:	Year 1 Year 6	Year 2 Year 7	☐ Year 3 ☐ Year 8	☐ Year 4 ☐ Year 9	☐ Year 5 (* see below) ☑ Year 10
	Yes ☐ No If yes, attach a copy of the a If no, the designating body if ave also reviewed the informationed that the totality of bene	s required to esta ation contained in	blish an abatement s the statement of ben	efits and find that the		ermined. ectations are reasonable and have
Approved (signature and title of authorized member of designating body)			ating body)	Telephone number		Date signed (month, day, year)
Printed n	ame of authorized member of de	signating body		Name of designati	ng body	
Attested	by (signature and title of attester)			Printed name of a	ttester	
	e designating body limits the yer is entitled to receive a de					ion does not limit the length of time a under IC 6-1,1-12.1-17.
	6-1.1-12.1-4,1 remain in eff 2013, the designating body (10) years. (See IC 6-1.1-1 For the redevelopment or re	ect. The deduction is required to esta 2.1-17 below.) chabilitation of realesignating body r	n period may not exo ablish an abatement : al property where the remains in effect. For	eed five (5) years. F schedule for each de Form SB-1/Real Pro a Form SB-1/Real P	or a Form SB-1/Rea duction allowed. The perty was approved roperty that is appro	the deductions established in IC I Property that is approved after June 30, the deduction period may not exceed ten prior to July 1, 2013, the abatement wed after June 30, 2013, the designating low.)
IC 6-	1.1-12.1-17					
Sec	on 4 or 4.5 of this chapter an (1) The total (2) The numb (3) The avera	abatement sched amount of the tax per of new full-time age wage of the ne	ule based on the folk payer's investment in a equivalent jobs crea ew employees compa	owing factors: real and personal prated. ared to the state mini	roperty.	ea and that receives a deduction under
	(b) This subsection appl for each deduction a the deduction. An ab	ies to a statement llowed under this patement schedule fule approved for	chapter. An abateme e may not exceed ter a particular taxpayer	d after June 30, 2013 ent schedule must sp n (10) years. before July 1, 2013,	ecify the percentage	y shall establish an abatement schedule amount of the deduction for each year of til the abatement schedule expires under

Exhibit A Real Property Tax Abatement Fitesa, Indiana, LLC

Real estate description 3400 E. Fort Harrison Rd., Terre Haute, IN 47804 Parcel Number 84-06-01-300-006.000-002 S-1/2 SW ALL E OF RR EX 2.50A & EX 6A (3400 E FT HARRISON RD) D-445/8160 1 -12-9 57.140 AC

Project Description:

Ceiling modification and reinforcement, slab concrete flooring pour, relocation of office and laboratory office spaces. Quality Control lab established.

Exhibit B Real Property Tax Abatement Fitesa Indiana, LLC Abatement Schedule

YEAR OF DEDUCTION	ABATEMENT PERCENTAGE
1st	100%
2nd	95%
3 rd	80%
4th	65%
5th	50%
6th	40%
7th	30%
8th	20%
9th	10%
10th	5%