CONFIDENTIAL

MAY 0 2 2016

FORM CF-1/PP

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R3 / 11-15)

Prescribed by the Department of Local Government Finance

CITY CLERK

INSTRUCTIONS:

- 1. Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
- 2. This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15 of each year, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.
- 3. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance (CF-1).

(CF-1).				• •				,	
SECTION 1		TAXPAYER	INFORMAT	ION					
Name of taxpayer							County		
JADCORE, LLC						VIGO			
Address of texpayer (number end street, city, state, and ZIP code)							DLGF texing district number		
300 NORTH FRUITRIDGE AVENUE, TERRE HAUTE, IN 47803							84002		
Name of contact person TERRY FRANDSEN							Telephone number		
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY									
Name of designating body	LOCATI	ON AND DESC							
COMMON COUNCIL OF CITY OF TERRE HAUTE, IN Resolution number 19, 2011					1	Estimated start date (month, day, year) 01/01/2012			
Location of property						Actual start date (month, day, year)			
300 NORTH FRUITRIDGE AVENUE TERRE HAUTE IN 47803						01/01/2012			
Description of new manufacturing equipment, or new research and development equipment or new locarchise technology.									
equipment, or new logistical distribution equipment to be acquired. PLASTIC SCRAP PELLETIZING LINE						05/31/2012			
						Actual completion date (month, day, year)			
	englika arangga akkadana	Control (1988) (Trumbo) programs and 25 (Williams)				0	5/31/201	2	
SECTION 3		EMPLOYEES	AND SALA	RIES	and decision in	- Control and Control of the Control	er maner it rafte understan	e en est a esta abandada de la	
Current number of employees								ACTUAL	
Salaries								258	
Number of employees retained								,934,179,00	
Salaries						186 186 6,570,000.00 7,356,229		,356,229.00	
Number of additional employees								72	
Salaries						270,000.00			
SECTION 4		COST A	ID VALUES			V			
	MANUF/ EQUI	ACTURING PMENT	R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQ	IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	
Values before project		2,134,880.00						- FALUE	
Plus: Values of proposed project	1	460,000,00							
Less: Values of any property being replaced	1								
Net values upon completion of project		2,594,880,00							
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	
Values before project		2,134,880.00							
Plus: Values of proposed project	_	498,087.00							
Less: Values of any property being replaced Net values upon completion of project				ļ					
		2,632,987.00				_11		<u> </u>	
NOTE: The COST of the property is confidential									
SECTION 5 WASTE CO	NVERTED A	ND OTHER BE	NEFITS PR	OMISED BY T					
WASTE CONVERTED AND OTHER BENEFITS AS ESTIN Amount of solid waste converted						IATED ON SB-1	AC	CTUAL	
Amount of hazardous waste converted						· · · · · · · · · · · · · · · · · · ·			
Other benefits:						<u></u>			
SECTION 6	ran (1995) - e e e e e e e e e e e e e e e e e e	TAXPAYER C	ERTIFICAT	ION	e at the said of the		er i provinci sileti i presinci	in endistantia pharesia	
I hereby certify that the representations in this st	atement are tr	ue.							
Signature of authorized representative	Title Date signed (month, day, year)								
(FO 04/28/2010					6				
4 .									

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1) THAT WAS APPROVED AFTER JUNE 30, 1991.

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

- 1. This page does not apply to a Statement of Benefits filed before July 1, 1991; that deduction may not be terminated for a failure to comply with the Statement of Benefits.
- 2. Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.
- 3. 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 and the date, time and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the County Assessor and the County Auditor.
- 4. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
- 5. If the designaling body determines that the property owner has NOT made reasonable effort to comply, then the designating body shall adopt a resolution terminaling the deduction. 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 have reviewed the CF-1 and find that:						
the property owner IS in substantial compliance						
the property owner IS NOT in substantial compliance						
Other (specify)						
Reasons for the determination (attach additional sheets if necessary)						
Signature of authorized member	Date signed (month, day, year) 5-12-16					
Atlested by Allested by Allest	Terre Haute City Council					
If the property owner is found not to be in substantial compliance, the pro- time has been set aside for the purpose of considering compliance.	perty owner shall receive the opportunity for a hearing. The following date and					
Time of hearing	of hearing					
HEARING RESULTS (to be completed after the hearing)						
Approved	Denied (see instruction 5 above)					
Reasons for the determination (attach additional sheets if necessary)						
Signature of authorized member						
	Date signed (month, day, year)					
Attested by:	Designating body					
APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]						
A properly owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property expense.						