

## COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

Prescribed by the Department of Local Government Finance

FILED

MAY 2 4 2019

## FORM CF-1/PP

PRIVACY NOTICE
This form contains information
confidential pursuant to
IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

INSTRUCTIONS:

State Form 51765 (R4 / 11-16)

- 1. Property owners whose Statement of Benefits was approved must file the form with the boat designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 5-1, 1-12, 1-5-6)
- 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.

<ol><li>With the approval of the des</li></ol>	signating body	, compliance	information fo	r multiple projec	ols may be d	onsolidated on	one (1) comp	oliance (CF-1).	
SECTION 1		TAXPAYER	INFORMATI	ON					
arne of taxpayer						County			
Harrison Manufacturing, Inc.						Vigo			
Address of taxpayer (number and street, city, state, and ZIP code)  DLGF taxing dis									
4141 2nd Parkway Terre Haute, IN 47804							84002		
Name of contact person						Telephone number			
Jenny Mears	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA		TI FET I PROPERTY AND LOCATION OF THE PROPERT			(317) .	376 - 1a	298	
SECTION 2	LOCATIO	ON AND DES	namenangunasan sasasan sas	FPROPERTY				Zindir Kirki ka	
Name of designating body			Resolut	ion number	l l	Estimated start date (month, day, year)			
Common Council of the City				27,2015		10/15/2015			
Location of property						Actual start date	(month, day, y	rear)	
4141 2nd Parkway Terre Haute, IN	and days		ant as now inf	a constitue ta abasela		F-::	· · · · · · · · · · · · · · · · · · ·		
Description of new manufacturing equipment, or new resequipment, or new logistical distribution equipment to be	earch and deve acquired.	opment equipi	ent, or new inc	ormation technolo	ygy	Estimated compl	evon date (mo	nin, day, year)	
New machinery and equipment to expand capacit		product lines t	o meet mark	et demands.		Actual completion date (month, day, year)			
							n date (month, day, year) 2/15/2015		
						L	2/10/2013	)	
SECTION 3		EMPLOYEE	SAND SALA	RIES	1				
	S AND SALA	ARIES			AS EST	IMATED ON S	B-1 A	CTUAL	
Current number of employees						7 416,000.00			
	Salaries								
Number of employees retained						7			
Salaries						416,000,00			
Number of additional employees					+	11			
Salaries						457,600.00			
	COST AND VALUES								
SECTION 4	MANUEA	***************************************	O		1.00	OFFICE			
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AS ESTIMATED ON SB-1  Values before project	EQUI	CTURING MENT ASSESSED	R&DE	QUIPMENT ASSESSED	EQU	PMENT ASSESSED		ASSESSED	
AS ESTIMATED ON SB-1  Values before project  Plus: Values of proposed project	EQUI	CTURING MENT ASSESSED	R&DE	QUIPMENT ASSESSED	EQU	PMENT ASSESSED		ASSESSED	
AS ESTIMATED ON SB-1  Values before project  Plus: Values of proposed project  Less: Values of any property being replaced	EQUI	CTURING MENT ASSESSED	R&DE	QUIPMENT ASSESSED	EQU	PMENT ASSESSED		ASSESSED	
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## 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)

- 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 designating body determines that the property owner has **NOT** made reasonable effort to comply, then the designating body shall adopt a resolution terminating 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 C	F-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	n (allach	additional sheets if necessary)							
	, <b>(</b> ==.,	<b>,</b> ,							
Signature of authorized member			Date signed (month, day, year)						
Attested by:				Designating body					
		ot to be in substantial compliance purpose of considering complian		ty owner shall receive the opportunity f	or a hearing. The following date and				
	□ AM □ PM	Date of hearing (month, day, year)	Location of h	nearing					
HEARING RESULTS (to be completed after the hearing)									
		☐ Approved		Denied (see instruction 5 above)					
Reasons for the determination	n (attach	additional sheets if necessary)							
Signature of authorized mem	ber				Date signed (month, day, year)				
Attested by:			Designating body						
APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]									
					by filing a complaint in the office of the etermined against the property owner.				