

## RESOLUTION NUMBER 15-113

### RESOLUTION OF THE COMMON COUNCIL OF THE CITY OF WESTFIELD, INDIANA FINDING THAT PROPERTY OWNERS ARE IN SUBSTANTIAL COMPLIANCE FOR TAX ABATEMENT PURPOSES

WHEREAS, pursuant to Indiana Code 6-1.1-12.1-1, *et. seq.* (the "Act"), the City of Westfield, Indiana (the "City") by and through its Common Council acting in its capacity as the fiscal body of the City and acting as the designating body identified in the Act (the "Council") has the right and opportunity to abate the payment of real property taxes for real estate located within an area declared by the Council to be an Economic Revitalization Area and to also abate the payment of personal property taxes within the Economic Revitalization Area;

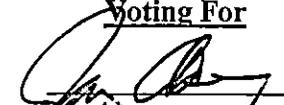
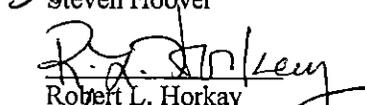
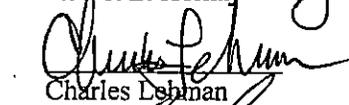
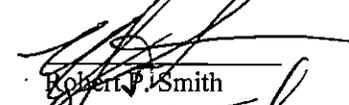
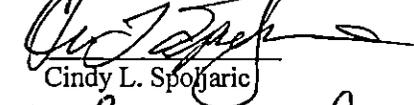
WHEREAS, pursuant to the Act, not later than forty-five (45) days after receipt of the Compliance with Statement of Benefits forms ("Form CF-1"), attached hereto as Exhibit A, the Council may determine whether the property owners have substantially complied with the Statement of Benefits forms ("Form SB-1") previously approved by the Council.

### NOW, THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF WESTFIELD, INDIANA AS FOLLOWS:

- SECTION I.** The Council has reviewed Exhibit A and has found that the property owners are in substantial compliance with their respective Form SB-1's.
- SECTION II.** The President of the Council is hereby authorized to certify compliance with the respective Form SB-1's.
- SECTION III.** The City's administrative staff is hereby directed to file the certified Form CF-1's with the appropriate Hamilton County office on behalf of the Council.
- SECTION IV.** This Resolution shall be in full force and effect immediately upon its adoption.

ADOPTED AND PASSED THIS 11<sup>TH</sup> DAY OF May 2015, BY THE  
WESTFIELD COMMON COUNCIL, HAMILTON COUNTY, INDIANA.

WESTFIELD COMMON COUNCIL

<u>Voting For</u>	<u>Voting Against</u>	<u>Abstain</u>
 Jim Ake	_____ Jim Ake	_____ Jim Ake
 Steven Hoover	_____ Steven Hoover	_____ Steven Hoover
 Robert L. Horkay	_____ Robert L. Horkay	_____ Robert L. Horkay
 Charles Lehman	_____ Charles Lehman	_____ Charles Lehman
 Robert J. Smith	_____ Robert J. Smith	_____ Robert J. Smith
 Cindy L. Spoljaric	_____ Cindy L. Spoljaric	_____ Cindy L. Spoljaric
 Robert W. Stokes	_____ Robert W. Stokes	_____ Robert W. Stokes

ATTEST:

  
\_\_\_\_\_  
Cindy J. Gossard, Clerk-Treasurer

THIS INSTRUMENT PREPARED BY Jeffrey Lauer, City of Westfield

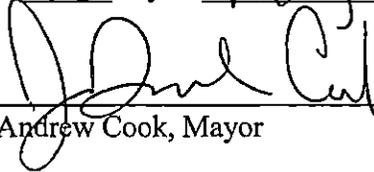
Return Document to: Cindy Gossard, City of Westfield, 130 Penn Street, Westfield, IN 46074

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each and every Social Security number from this document, unless it is required by law. Jeffrey Lauer.

I hereby certify that RESOLUTION 15-113 was delivered to the Mayor of Westfield  
on the 12 day of May, 2015, at 11:00 pm.

  
Cindy J. Gossard, Clerk-Treasurer

I hereby APPROVE Resolution 15-113  
this 13 day of May, 2015.

  
J. Andrew Cook, Mayor

I hereby VETO Resolution 15-113  
this \_\_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_  
J. Andrew Cook, Mayor

EXHIBIT A

Automatic Pool Covers, Inc.

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R2 / 5-13)

Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

- 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 March 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 March 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).

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer <b>Automatic Pool Covers, Inc.; Soul Provider, Inc.; Cover Care, LLC</b>	
Address of taxpayer (number and street, city, state, and ZIP code) <b>17397 Oak Ridge Road, Westfield, IN 46074</b>	
Name of contact person <b>Michael Shebek</b>	Telephone number <b>( 317 ) 579-2000</b>

SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY	
Name of designating body <b>Westfield Redevelopment Commission &amp; Westfield City Council</b>	Resolution number <b>11-01</b>
Location of property <b>NE Approx. 8.53 acres of Custom Commerce Park</b>	County <b>Hamilton</b>
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. <b>Manufacturing, logistic distribution and IT equipment for automatic pool cover manufacturing facility. See Exhibit B for full description of IT equipment purchases</b>	DLGF taxing district number <b>015</b>
	Estimated starting date (month, day, year) <b>1/1/2011</b>
	Estimated completion date (month, day, year) <b>12/31/2013</b>

SECTION 3 EMPLOYEES AND SALARIES			
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL	
Current number of employees	24.00	40.00	
Salaries	1,397,760.00	2,872,048.00	
Number of employees retained	24.00	24.00	
Salaries	1,397,760.00	1,397,760.00	
Number of additional employees	22.00	18.00	
Salaries	885,252.00	1,274,288.00	

SECTION 4 COST AND VALUES								
AS ESTIMATED ON SB-1	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project	270,000.00				130,000.00		100,000.00	
Less: Values of any property being replaced								
Net values upon completion of project								
<b>ACTUAL</b>	<b>COST</b>	<b>ASSESSED VALUE</b>	<b>COST</b>	<b>ASSESSED VALUE</b>	<b>COST</b>	<b>ASSESSED VALUE</b>	<b>COST</b>	<b>ASSESSED VALUE</b>
Values before project								
Plus: Values of proposed project	101,649.00	48,908.00			5,106.00	2,041.00	12,168.00	4,866.00
Less: Values of any property being replaced								
Net values upon completion of project								

**NOTE:** The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER		
WASTE CONVERTED 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		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative <i>Michael Shebek</i>	Title <b>President</b>	Date signed (month, day, year) <b>3-12-15</b>

**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 Township 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.
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 Township 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: *Charles Johnson* Date signed (month, day, year): 5-11-15

Attested by: \_\_\_\_\_ Designating body: City Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of hearing:  AM  PM Date of hearing (month, day, year): \_\_\_\_\_ Location 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: *Charles Johnson* Date signed (month, day, year): 5-11-15

Attested by: \_\_\_\_\_ Designating body: City Council

**APPEAL RIGHTS (IC 6-1.1-12.1-6.9(e))**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Carrington Mortgage Services, LLC

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R2 / 5-13)  
Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

- 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 March 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 March 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).

**SECTION 1 TAXPAYER INFORMATION**

Name of taxpayer  
**Carrington Mortgage Services, LLC**

Address of taxpayer (number and street, city, state, and ZIP code)  
**25 Enterprise Drive, Suite 500, Aliso Viejo, CA 92656**

Name of contact person  
**Tim Richthammer, VP of Tax, 1700 East Putnam Ave, 5th Floor, Old Greenwich, CT 06870**

Telephone number  
**( 203 ) 661-6186**

**SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY**

Name of designating body  
**Common Council of the City of Westfield**

Resolution number  
**14-126**

Location of property  
**19845 US 31 North, Westfield, IN 46074**

County  
**Hamilton**

DLGF taxing district number  
**29-15**

Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired.  
**The company will install new cabling, IT equipment, and office equipment to establish a new regional service center.**

Estimated starting date (month, day, year)  
**1/01/2015**

Estimated completion date (month, day, year)  
**12/31/2019**

**SECTION 3 EMPLOYEES AND SALARIES**

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	180.00	289.00
Salaries	11,232,000.00	11,691,000.00
Number of employees retained	180.00	180.00
Salaries	11,232,000.00	11,232,000.00
Number of additional employees	360.00	109.00
Salaries	19,468,800.00	659,000.00

**SECTION 4 COST AND VALUES**

	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
<b>AS ESTIMATED ON SB-1</b>								
Values before project								
Plus: Values of proposed project							1,120,000.00	
Less: Values of any property being replaced								
Net values upon completion of project								
<b>ACTUAL</b>								
Values before project								
Plus: Values of proposed project							455,892.00	
Less: Values of any property being replaced								
Net values upon completion of project								

**NOTE:** The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).

**SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER**

WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted	0.00	0.00
Amount of hazardous waste converted	0.00	0.00
Other benefits:	0.00	0.00

**SECTION 6 TAXPAYER CERTIFICATION**

I hereby certify that the representations in this statement are true.

Signature of authorized representative  
*[Signature]*

Title  
**Vice President of Tax**

Date signed (month, day, year)  
**9/13/15**

**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 Township 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.
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 Township Assessor.

We have reviewed the CF-1 and find that:			
<input checked="" type="checkbox"/> the property owner IS in substantial compliance <input type="checkbox"/> the property owner IS NOT in substantial compliance <input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member <i>Shirley Johnson</i>			Date signed (month, day, year) 5-11-15
Attested by:		Designating body City Council	
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.			
Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed at or after hearing)</b>			
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Denied (see instruction 5 above)	
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member <i>Shirley Johnson</i>			Date signed (month, day, year) 5-11-15
Attested by:		Designating body City Council	
<b>APPEAL RIGHTS (IC 6-1.1-12.1-5.9(a))</b>			
A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			

CPS, Inc.

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R2 / 5-13)

Prescribed by the Department of Local Government Finance

FORM CF-1 / PP

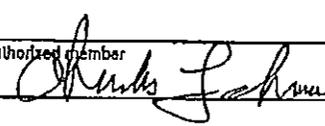
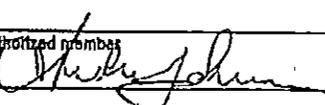
- INSTRUCTIONS:**
1. Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
  2. This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between March 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 March 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).

SECTION 1 TAXPAYER INFORMATION									
Name of taxpayer <b>CPS, Inc.</b>									
Address of taxpayer (number and street, city, state, and ZIP code) <b>17435 Tiller Court, Westfield, IN 46074</b>									
Name of contact person <b>Jason Ray</b>						Telephone number <b>( 317 ) 848-0000</b>			
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY									
Name of designating body <b>Westfield City Council</b>						Resolution number <b>10-07</b>			
Location of property <b>17435 Tiller Court</b>			County <b>Hamilton</b>			DLGF taxing district number <b>29015</b>			
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. <b>Shrink wrap machines, air compressor unit, tape machines, conveyors, cutting tables, inventory system, molds, etc.</b>						Estimated starting date (month, day, year) <b>6/1/2010</b>			
						Estimated completion date (month, day, year) <b>6/1/2012</b>			
SECTION 3 EMPLOYEES AND SALARIES									
EMPLOYEES AND SALARIES						AS ESTIMATED ON SB-1		ACTUAL	
Current number of employees						4.00		12.00	
Salaries						208,000.00		534,141.00	
Number of employees retained						4.00		4.00	
Salaries						208,000.00		208,000.00	
Number of additional employees						20.00		8.00	
Salaries						500,000.00		326,141.00	
SECTION 4 COST AND VALUES									
		MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1		COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project									
Plus: Values of proposed project		550,000.00							
Less: Values of any property being replaced									
Net values upon completion of project									
ACTUAL		COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project									
Plus: Values of proposed project		267,486.00	75,752.00						
Less: Values of any property being replaced									
Net values upon completion of project									
NOTE: The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).									
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER									
WASTE CONVERTED 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									
I hereby certify that the representations in this statement are true.									
Signature of authorized representative				Title			Date signed (month, day, year)		

**OPTIONAL - FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM OF-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 Township 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.
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 Township Assessor.

We have reviewed the CF-1 and find that:			
<input checked="" type="checkbox"/> the property owner IS in substantial compliance <input type="checkbox"/> the property owner IS NOT in substantial compliance <input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member		Date signed (month, day, year)	
		5-11-15	
Attested by:		Designating body	
		City Council	
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.			
Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed after the hearing)</b>			
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Denied (see instruction 5 above)	
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member		Date signed (month, day, year)	
		5-11-15	
Attested by:		Designating body	
		City Council	
<b>APPEAL RIGHTS (IC 6-1.1-12.1-5.9(e))</b>			
A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			



**SCHEDULE OF DEDUCTION FROM ASSESSED VALUATION  
PERSONAL PROPERTY IN ECONOMIC REVITALIZATION AREA**

State Form 52503 (R11 / 11-14)  
Prescribed by the Department of Local Government Finance

MARCH 1, 2015

FORM 103-ERA

PRIVACY NOTICE: The records in this series are confidential according to IC 6-1-1-35-9

**INSTRUCTIONS:**

1. In order to receive a deduction, this schedule must be submitted with a timely filed Form 103-Long.
2. A separate schedule must be completed and attached to Form 103-Long for each approved Form SB-1/PP for that abatement.
3. Attach a copy of the applicable Form CF-1 to this schedule. First-time filers must also include the SB-1 and the Resolution from the designating body.
4. For any acquisitions included herein since the last assessment date, attach a list of the newly included equipment on Form 103-EL.

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer <b>CPS, Inc.</b>	Name of contact person <b>Jason Ray</b>
Full address (number and street, city, state, and ZIP code) <b>17435 Tiller Court, Westfield, IN 46074</b>	E-mail address of contact person <b>jason@cpsindy.com</b>
County <b>Hamilton</b>	Telephone number <b>( 317 ) 848-0000</b>
Township <b>Washington</b>	Taxing District <b>29015</b>
	Fax number <b>( )</b>

SECTION 2 ECONOMIC REVITALIZATION AREA INFORMATION		
Name of body designating the Economic Revitalization Area <b>Westfield City Council</b>	Resolution number <b>10-07</b>	Length of abatement (years) <b>10</b>
Date designat on approved (month, day, year) <b>5/24/2010</b>	Date designat on will term date (month, day, year) <b>5/24/2020</b>	Does resolution limit dollar amount of deduction? <input type="checkbox"/> Yes, and limit is based on equipment <input checked="" type="checkbox"/> No <input type="checkbox"/> Cost and/or <input type="checkbox"/> Assessed value

SECTION 3 ABATED EQUIPMENT POOLING SCHEDULE			
The total cost of depreciable assets is to be reported on Form 103-Long. This schedule includes only the values attributable to the new manufacturing, research and development, logistical distribution, and/or information technology equipment under abatement per the resolution and IC 6-1-1-12.1. Election to report cost of depreciable assets by federal tax year** <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
The Minimum Value Ratio applies if Line 57 is greater than Line 56D on page 2 of the Form 103-Long [IC 6-1-1-12.1-4.5(g)]	Box 1 - Enter amount shown on Line 57 of Form 103-Long	Box 2 - Enter amount shown on Line 56D of Form 103-Long	Box 3 - Divide Box 1 by Box 2 (carry ratio 5 decimal places)

POOL NUMBER 1 (1 TO 4 YEAR LIFE)									
13	From	to 3-1-15**	103 Schedule A, Column C, Adjusted Cost	TIV%	True Tax Value	Minimum Value Ratio (if applicable)	Abatement		Deduction Claimed
							Year	Percent	
13			\$	65%	\$		1	%	\$
14	3-2-14	to 3-1-15		65%			1		
15	3-2-13	to 3-1-14		50%			2		
16	3-2-12	to 3-1-13		35%			3		
17A	3-2-11	to 3-1-12		20%			4		
17B	3-2-10	to 3-1-11		20%			5		
17C	3-2-09	to 3-1-10		20%			6		
17D	3-2-08	to 3-1-09		20%			7		
17E	3-2-07	to 3-1-08		20%			8		
17F	3-2-06	to 3-1-07		20%			9		
17G	3-2-05	to 3-1-06		20%			10		
18	TOTAL POOL NUMBER 1			\$	--	\$	--	--	\$

POOL NUMBER 2 (5 TO 9 YEAR LIFE)									
19	From	to 3-1-15**	103 Schedule A, Column C, Adjusted Cost	TIV%	True Tax Value	Minimum Value Ratio (if applicable)	Abatement		Deduction Claimed
							Year	Percent	
19			\$	40%	\$		1	%	\$
20	3-2-14	to 3-1-15		40%			1		
21	3-2-13	to 3-1-14		56%			2		
22	3-2-12	to 3-1-13	14,082.00	42%	5,914.44		3	80.0	4,731.55
23	3-2-11	to 3-1-12	112,763.00	32%	38,084.16		4	70.0	25,258.91
24	3-2-10	to 3-1-11	140,641.00	24%	33,753.84		5	60.0	20,252.30
25	3-2-09	to 3-1-10		18%			6		
26A	3-2-08	to 3-1-09		15%			7		
26B	3-2-07	to 3-1-08		15%			8		
26C	3-2-06	to 3-1-07		15%			9		
26D	3-2-05	to 3-1-06		15%			10		
27	TOTAL POOL NUMBER 2			\$ 267,486.00	--	\$ 75,752.44	--	--	\$ 50,242.76

SUB-TOTAL - POOLS 1 AND 2 (Total Lines 18 and 27. Enter to the right and on Page 2.)									\$ 50,242.76
--	--	--	--	--	--	--	--	--	--------------

SECTION 3 (continued)		ABATED EQUIPMENT POOLING SCHEDULE							
		POOL NUMBER 3 (9 TO 12 YEAR LIVES)							
	From	to 3-1-15**	103 Schedule A, Column C, Adjusted Cost	TTV%	True Tax Value	Minimum Value Ratio (if applicable)	Abatement		Deduction Claimed
							Year	Percent	
28			\$	40%	\$		1	%	\$
29	3-2-14	to 3-1-15		40%			1		
30	3-2-13	to 3-1-14		60%			2		
31	3-2-12	to 3-1-13		55%			3		
32	3-2-11	to 3-1-12		45%			4		
33	3-2-10	to 3-1-11		37%			5		
34	3-2-09	to 3-1-10		30%			6		
35	3-2-08	to 3-1-09		25%			7		
36	3-2-07	to 3-1-08		20%			8		
37	3-2-06	to 3-1-07		16%			9		
38	3-2-05	to 3-1-06		12%			10		
40	TOTAL POOL NUMBER 3		\$	--	\$	--	--	--	\$

		POOL NUMBER 4 (13 YEAR AND LONGER LIVES)							
	From	to 3-1-15**	103 Schedule A, Column C, Adjusted Cost	TTV%	True Tax Value	Minimum Value Ratio (if applicable)	Abatement		Deduction Claimed
							Year	Percent	
41			\$	40%	\$		1	%	\$
42	3-2-14	to 3-1-15		40%			1		
43	3-2-13	to 3-1-14		60%			2		
44	3-2-12	to 3-1-13		63%			3		
45	3-2-11	to 3-1-12		54%			4		
46	3-2-10	to 3-1-11		46%			5		
47	3-2-09	to 3-1-10		40%			6		
48	3-2-08	to 3-1-09		34%			7		
49	3-2-07	to 3-1-08		28%			8		
50	3-2-06	to 3-1-07		26%			9		
51	3-2-05	to 3-1-06		21%			10		
55	TOTAL POOL NUMBER 4		\$	--	\$	--	--	--	\$

SUB-TOTAL - POOLS 3 AND 4 (Total Lines 40 and 55. Enter to the right and below.) \$

		SPECIAL TOOLING						
Round all figures to the nearest \$1. Report only the cost of abated special tools, dies, jigs, etc. (50 IAC 4.2-6-2)			True Tax Value (Included on Form 103-T)			Abatement		Deduction Claimed
S1	From	to 3-1-15**	\$			Year	Percent	
S2	3-2-14	to 3-1-15		30%	The Minimum Value Ratio Is Not Applicable To Special Tooling	1	%	\$
S3	3-2-13	to 3-1-14		3%		2		
S4	3-2-12	to 3-1-13		3%		3		
S5	3-2-11	to 3-1-12		3%		4		
S6	3-2-10	to 3-1-11		3%		5		
S7	3-2-09	to 3-1-10		3%		6		
S8	3-2-08	to 3-1-09		3%		7		
S9	3-2-07	to 3-1-08		3%		8		
S10	3-2-06	to 3-1-07		3%		9		
S11	3-2-05	to 3-1-06		3%		10		
S12	TOTAL SPECIAL TOOLING		\$	--		--	--	\$

SUB-TOTAL POOLS 1 AND 2 (from Page 1)		\$	50,242.76
SUB-TOTAL POOLS 3 AND 4 (from above)			
SUB-TOTAL SPECIAL TOOLING (from above - Line S12)			
TOTAL ALL POOLS AND SPECIAL TOOLING		\$	50,242.76
LIMIT ON AMOUNT OF ABATEMENT STATED IN RESOLUTION		\$	
AMOUNT OF DEDUCTION CLAIMED - Lesser of resolution limit on abatement or total all pools. (Carry deduction forward to the Summary Section on Page 1 of the Form 103-Long.)		\$	50,242.76

Obsolescence claimed on Form 106?  Yes  No  
 NOTE: If obsolescence is claimed on depreciable assets, the applicable adjustment must be taken on the Abatement Deduction being claimed. Show calculations on Form 106.  
 Line numbers on this form match the line numbers on the Form 103-Long. Lines were added to Pools 1 and 2 and deleted from Pools 3 and 4 to reflect the ten (10) year abatement limitation.  
 \*\* If taxpayer elects to report cost on a federal tax year basis, assets acquired from the end of the prior federal tax year to March 1 are reported on the first line.



CPS, Inc.  
Abated Equipment List

Reference Number	Installation Date	Item	Cost	Line Number
94	03/02/12	L-Clipper Tape Machine	\$ 1,680	22
96	03/02/12	Four Cavity Mold	8,634	22
95	03/02/12	XL-24 Cutting Table Modifications	3,768	22
			<u>\$ 14,082</u>	
95	02/14/12	XL-24 Sample Cutting Table	\$ 92,500	23
93	02/03/12	60" Transportation Conveyor	6,350	23
86	08/24/11	Shrink Tunnel/Wrapper	7,085	23
83	05/24/11	Tables, Mats, Chairs - Plant/Production	6,828	23
			<u>\$ 112,763</u>	
72	11/22/10	Dual L Clip Station	\$ 1,500	24
68	11/01/10	Warehouse Fan	6,978	24
67	10/07/10	Clip Tape Machine w/Stand	2,500	24
64	09/22/10	L-Clipper Applicator/Head Table Stand	7,101	24
55	08/23/10	Universal 500 Shrink Wrap Machine	77,000	24
53	08/16/10	Computer for Warehouse	3,550	24
52	08/04/10	Electrical Improvements	3,920	24
51	08/01/10	Grainger - Misc Parts for Equipment	3,320	24
49	06/09/10	New Power Hook Up - MEC, Inc.	4,402	24
48	06/04/10	Automatic Taping Machine	5,000	24
47	05/17/10	Tables for Processing Boxes	769	24
46	05/13/10	Transformer	1,050	24
45	05/12/10	Tape Machine	3,500	24
44	05/11/10	Power Panel	3,095	24
43	05/07/10	Conveyor	2,810	24
41	05/06/10	Safety Switch, Transformer & Fuse	2,120	24
39	03/19/10	Computer System Install. - Warehouse	3,001	24
38	03/15/10	Stretch Wrap Machine - Unlsource	9,025	24
			<u>\$ 140,641</u>	

B. & K. Real Estate Investment, LLC (Custom Cast Stone)

Real Property



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

Slate Form 51766 (R3 / 2-13)  
Prescribed by the Department of Local Government Finance

20 \_\_\_ PAY 20 \_\_\_

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 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. 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 Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. 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 6-1.1-12.1-5.1(b))
5. 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).

**SECTION 1 TAXPAYER INFORMATION**

Name of taxpayer <b>B. &amp; K. REAL ESTATE INVESTMENT LLC</b>	County <b>HAMILTON</b>
Address of taxpayer (number and street, city, state, and ZIP code) <b>734 E. 169TH ST WESTFIELD, IN. 46074</b>	DLGF taxing district number <b>09</b>
Name of contact person <b>JAMES KEAT GAUBAUGH</b>	Telephone number <b>(317) 896-1700</b>

**SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY**

Name of designating body <b>COMMON COUNCIL of THE CITY of WESTFIELD</b>	Resolution number <b>08-30</b>	Estimated start date (month, day, year) <b>7-1-2008</b>
Location of property <b>734 E. 169TH ST - A.K.A. 17001 OAKRIDGE ROAD</b>		Actual start date (month, day, year) <b>7-1-2008</b>
Description of real property improvements <b>PAVING OF STORAGE YARD</b>		Estimated completion date (month, day, year) <b>10-1-2008</b>
		Actual completion date (month, day, year)

**SECTION 3 EMPLOYEES AND SALARIES**

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	<b>56</b>	<b>38</b>
Salaries	<b>2,030,000</b>	<b>1,320,000</b>
Number of employees retained	<b>56</b>	<b>38</b>
Salaries	<b>2,030,000</b>	<b>1,320,000</b>
Number of additional employees		
Salaries		

**SECTION 4 COST AND VALUES**

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values before project		
Plus: Values of proposed project	<b>264,000</b>	
Less: Values of any property being replaced		
Net values upon completion of project		<b>2,864,800</b>
ACTUAL	COST	ASSESSED VALUE
Values before project	<b>355,019</b>	
Plus: Values of proposed project		
Less: Values of any property being replaced		
Net values upon completion of project		

**SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER**

WASTE CONVERTED 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**

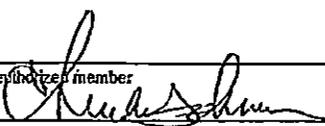
I hereby certify that the representations in this statement are true.

Signature of authorized representative 	Title <b>MEMOR</b>	Date signed (month, day, year) <b>3-19-2015</b>
--	-----------------------	--

**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 6-1.1-12.1-5.1 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 may 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 and 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, then 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 have reviewed the CF-1 and find that:			
<input checked="" type="checkbox"/> the property owner IS in substantial compliance			
<input type="checkbox"/> the property owner IS NOT in substantial compliance			
<input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member 		Date signed (month, day, year) 5-11-15	
Attested by:		Designating body City Council	
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)			
Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed after the hearing)</b>			
<input type="checkbox"/> Approved		<input type="checkbox"/> Denied (see instruction 4 above)	
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member 		Date signed (month, day, year) 5-11-15	
Attested by:		Designating body City Council	
<b>APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]</b>			
A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			

Oak Ridge Real Estate Development, LLC and Custom  
Concrete Co., Inc.

Real Property



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

State Form 51766 (R3 / 2-13)  
Prescribed by the Department of Local Government Finance

20 15 PAY 20 16

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 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. 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 Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. 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 6-1.1-12.1-5.1(b))
5. 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).

SECTION 1 TAXPAYER INFORMATION			
Name of taxpayer Oak Ridge Real Estate Development, LLC and Custom Concrete, Co., Inc.		County Hamilton	
Address of taxpayer (number and street, city, state, and ZIP code) 17241 Foundation Parkway, Westfield, IN 46074		DLGF taxing district number	
Name of contact person Douglas W Staebler		Telephone number ( 317 ) 399-2299	
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY			
Name of designating body Westfield City Council	Resolution number 03-09, 07-09	Estimated start date (month, day, year) 08/01/2003	
Location of property 17241 Foundation Parkway, Westfield, IN 46074		Actual start date (month, day, year) 08/01/2003	
Description of real property improvements New Construction of Commercial Building		Estimated completion date (month, day, year) 03/30/2005	
		Actual completion date (month, day, year) 03/30/2005	
SECTION 3 EMPLOYEES AND SALARIES			
EMPLOYEES AND SALARIES		AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		184	173
Salaries		7000000	8870112
Number of employees retained		184	173
Salaries		7000000	8870112
Number of additional employees		55	
Salaries		2035000	
SECTION 4 COST AND VALUES			
COST AND VALUES		REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		2500000	
Less: Values of any property being replaced			
Net values upon completion of project		2500000	
ACTUAL		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		4320688	3628900
Less: Values of any property being replaced			
Net values upon completion of project		4320688	3628900
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER			
WASTE CONVERTED 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			
I hereby certify that the representations in this statement are true.			
Signature of authorized representative <i>Douglas W Staebler</i>		Title CFO	Date signed (month, day, year) 3-12-15

**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 6-1.1-12.1-5.1 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 may 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 and 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, then 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 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) 5-11-15

Attested by: \_\_\_\_\_ Designating body City Council

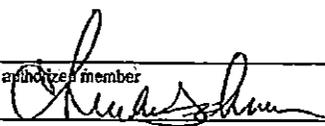
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing  AM  PM Date of hearing (month, day, year) \_\_\_\_\_ Location of hearing \_\_\_\_\_

**HEARING RESULTS (to be completed after the hearing)**

Approved  Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member  Date signed (month, day, year) 5-11-15

Attested by: \_\_\_\_\_ Designating body City Council

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

EGO Enterprises, LLC

Real Property



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

State Form 51766 (R3 / 2-13)  
Prescribed by the Department of Local Government Finance

20\_15\_PAY 20\_16

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 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. 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 Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. 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 6-1.1-12.1-5.1(b))
5. 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).

SECTION 1 TAXPAYER INFORMATION			
Name of taxpayer EGO Enterprises		County Hamilton	
Address of taxpayer (number and street, city, state, and ZIP code) 17397 Oak Ridge Road, Westfield, IN 46074		DLGF taxing district number 015	
Name of contact person Michael Shebek		Telephone number ( 317 ) 579-2000	
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY			
Name of designating body Westfield, Redevelopment Commission/City Council		Resolution number 11-02	Estimated start date (month, day, year) 1/1/2011
Location of property NE approx. 8.53 acres of Custom Commerce Park, Westfield		Actual start date (month, day, year) 1/1/2011	
Description of real property improvements Construct a fifty-thousand foot building		Estimated completion date (month, day, year) 12/31/2013	
		Actual completion date (month, day, year) 12/31/2013	
SECTION 3 EMPLOYEES AND SALARIES			
EMPLOYEES AND SALARIES		AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		24	40
Salaries		\$1,397,760	\$2,672,046
Number of employees retained		24	24
Salaries		\$1,397,760	\$1,397,760
Number of additional employees		22	16
Salaries		\$885,252	\$1,274,286
SECTION 4 COST AND VALUES			
COST AND VALUES		REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		\$2,500,000	
Less: Values of any property being replaced			
Net values upon completion of project			
ACTUAL		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		\$3,253,367	
Less: Values of any property being replaced			
Net values upon completion of project			
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER			
WASTE CONVERTED 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			
I hereby certify that the representations in this statement are true.			
Signature of authorized representative 		Title President	Date signed (month, day, year) 3-12-15

**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 6-1.1-12.1-5.1 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 may 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 and 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, then 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 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

*Chuck Lehman*

Date signed (month, day, year)

5-11-15

Attested by:

Designating body

City Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing

AM  
 PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

Approved

Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

*Chuck Lehman*

Date signed (month, day, year)

5-11-15

Attested by:

Designating body

City Council

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

HADAH II, LLC

Real Property



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

State Form 51768 (R3 / 2-13)  
Prescribed by the Department of Local Government Finance

20 15 PAY 20 16

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 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. 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 Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. 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 6-1.1-12.1-5.1(b))
5. 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).

SECTION 1 TAXPAYER INFORMATION			
Name of taxpayer <b>HADAH II LLC</b>	County <b>Hamilton</b>		
Address of taxpayer (number and street, city, state, and ZIP code) <b>4848 Deer Ridge Dr N, Carmel, IN 46033</b>	DLGF taxing district number <b>015</b>		
Name of contact person <b>Andy Weas</b>	Telephone number <b>( 317 ) 867-4477</b>		
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY			
Name of designating body <b>Westfield Common Council</b>	Resolution number <b>13-107</b>	Estimated start date (month, day, year)	
Location of property <b>17297 Oak Ridge Road, Westfield, IN 46074</b>		Actual start date (month, day, year)	
Description of real property improvements <b>Construct a 35,000 SF Building</b>		Estimated completion date (month, day, year)	
		Actual completion date (month, day, year)	
SECTION 3 EMPLOYEES AND SALARIES			
EMPLOYEES AND SALARIES		AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		25	32
Salaries		\$1,300,000	\$2,296,866
Number of employees retained		25	25
Salaries		\$1,300,000	\$1,300,000
Number of additional employees		20	7
Salaries		\$915,200	\$996,866
SECTION 4 COST AND VALUES			
COST AND VALUES		REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		\$2,800,000	
Less: Values of any property being replaced			
Net values upon completion of project			
ACTUAL		COST	ASSESSED VALUE
Values before project			
Plus: Values of proposed project		\$3,468,451	
Less: Values of any property being replaced			
Net values upon completion of project			
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER			
WASTE CONVERTED 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			
I hereby certify that the representations in this statement are true.			
Signature of authorized representative 	Title <b>Manager</b>	Date signed (month, day, year) <b>3-11-15</b>	

**OPTIONAL - FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM GF-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 Township 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.
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 Township Assessor.

We have reviewed the GF-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 <i>Shirley Johnson</i>	Date signed (month, day, year) 5-11-15
Attested by:	Designating body City Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location 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 <i>Shirley Johnson</i>	Date signed (month, day, year) 5-11-15
Attested by:	Designating body City Council

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Indiana Mills & Manufacturing, Inc

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R2 / 5-13)  
Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

- 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 March 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 March 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).

SECTION 1 TAXPAYER INFORMATION								
Name of taxpayer Indiana Mills & Manufacturing, Inc. d/b/a IMMI								
Address of taxpayer (number and street, city, state, and ZIP code) 18881 IMMI Way Westfield, Indiana 46074								
Name of contact person Kevin Boen						Telephone number ( 317 ) 896-9531		
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY								
Name of designating body Westfield Common Council						Resolution number 11-06		
Location of property CAPE Facility, 18881 IMMI Way, Westfield, Indiana 46074				County Hamilton		DLGF taxing district number 015		
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. R&D and support equipment for expansion of research and testing facilities						Estimated starting date (month, day, year) 2/11/2012		
						Estimated completion date (month, day, year) 2/31/2012		
SECTION 3 EMPLOYEES AND SALARIES								
EMPLOYEES AND SALARIES						AS ESTIMATED ON SB-1		ACTUAL
Current number of employees						20.00		20.00
Salaries						1,018,671.00		1,858,158.00
Number of employees retained						20.00		23.00
Salaries						1,018,671.00		1,535,265.00
Number of additional employees						10.00		5.00
Salaries						500,000.00		322,871.00
SECTION 4 COST AND VALUES								
AS ESTIMATED ON SB-1	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project			8,129,249.00	1,478,587.50				
Plus: Values of proposed project			2,800,000.00	1,120,000.00				
Less: Values of any property being replaced			0.00	0.00				
Net values upon completion of project			10,929,249.00	2,598,587.50				
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project			8,129,249.00	1,478,587.50				
Plus: Values of proposed project			3,767,148.00	1,506,858.50				
Less: Values of any property being replaced			0.00	0.00				
Net values upon completion of project			11,896,395.00	2,985,446.00				
NOTE: The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).								
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER								
WASTE CONVERTED 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								
I hereby certify that the representations in this statement are true.								
Signature of authorized representative <i>Kevin Boen</i>				Title CFO		Date signed (month, day, year) 03/02/2015		

**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 Township 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.
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 Township Assessor.

We have reviewed the CF-1 and find that:			
<input checked="" type="checkbox"/> the property owner IS in substantial compliance <input type="checkbox"/> the property owner IS NOT in substantial compliance <input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member <i>Shirley Johnson</i>			Date signed (month, day, year) 5-11-15
Attested by:		Designating body City Council	
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.			
Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed after the hearing)</b>			
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied (see instruction 5 above)			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member <i>Shirley Johnson</i>			Date signed (month, day, year) 5-11-15
Attested by:		Designating body City Council	
<b>APPEAL RIGHTS (IC 6-1.1-12.1-5.9(e))</b>			
A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			

**Indiana Mills & Manufacturing, Inc.**  
**Attachment to Form CF-1/PP**  
**March 2015**

**CAPE Salaries**

To date, IMMI CAPE has increased its total employee headcount to 28, which is less than the target of 30. In general, these are technical and/or professional positions and their average base pay is notably higher than IMMI's overall average base pay. As a result, as of February 2015 base pay for the 28 positions exceeds the entire base pay commitment for the targeted 30 positions by \$339,485.

**CAPE R&D Equipment**

To date, IMMI CAPE has acquired R&D equipment costing \$967,146 more than its original commitment.

**Additional Relevant Information**

In addition to the total number of employees reported on this Form CF-1/PP, IMMI's CAPE unit has three open positions that it will fill once economic conditions and IMMI CAPE business levels warrant doing so.

IMMI's CAPE revenue increased by 176% from 2011 through 2014. IMMI management foresees continued growth in its existing and new CAPE business lines. In the last year, IMMI CAPE has experienced the following positive developments:

1. IMMI CAPE achieved its highest annual external customer testing revenue since inception while maintaining its historical level of IMMI internal research & testing services.
2. IMMI CAPE was awarded several new military testing contracts by US government agencies and private defense contractors.
3. IMMI CAPE performed testing services for more than a dozen new customers from the following business sectors: military, child restraints, truck, recreational vehicles, racing, bus and defense litigation.
4. IMMI CAPE continued its investment in Westfield-based technical infrastructure, including:
  - Increased onboard high speed cameras by 25%
  - Added 48 channels for crash data channels and 36 data channels for non-crash programmable recording yielding a 30% increase in capability
  - Added a vehicle rotisserie fixture to support fuel tank integrity crash testing
5. IMMI CAPE performed multiple crash demonstrations for computer aided design, racing, bus and truck industry events dramatically increasing awareness of IMMI and IMMI CAPE in those industries.
6. The ABC television network aired on its Good Morning America and Nightline programs a segment addressing school bus seatbelt safety issues that included substantial footage videotaped at the IMMI CAPE facility in Westfield. The coverage included interviews with IMMI senior management and scenes of school bus crash tests performed by IMMI CAPE. These segments provided national exposure to the IMMI and IMMI CAPE Westfield facilities.

Finally, although many of IMMI CAPE's activities do not result in increased IMMI CAPE revenues they do lead to increased business for IMMI's other operations. This results in increased employment levels in IMMI's other engineering and technical departments. Most of these positions are at an average base pay that is notably higher than IMMI's overall average base pay. While it is difficult to quantify exactly how many of these additional employees are attributable to IMMI CAPE activities, it is certainly a significant portion.

I.B.C. Real Estate Investment, LLC

Real Property



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

State Form 51766 (R2 / 1-07)  
Prescribed by the Department of Local Government Finance

20 15 PAY 20 16  
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 6-1.1-12.1-5.1 (c) and (d).

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)  
 Eligible vacant building (IC 6-1.1-12.1-4.8)

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area. (IC 6-1.1-12.1-2 (b))
2. 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 (SB-1 / Real Property).
3. This form must accompany the initial deduction application that is filed with the County Auditor.
4. Property owners whose Statement of Benefits was approved after June 30, 1991, must file an updated form with the County Auditor and the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.1)
5. The updated form must be filed annually by May 15, or by the due date for the real property owner's personal property return that is filed in the township where the project is located, whichever is later. (IC 6-1.1-12.1-5.1 (b))
6. With the approval of the Designating Body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-1 / Real Property).

**SECTION 1 TAXPAYER INFORMATION**

Name of taxpayer  
**I.B.C. Real Estate Investments, LLC**

Address of taxpayer (number and street, city, state, and ZIP code)  
**734 E. 169th St. Westfield, IN 46074**

Name of contact person  
**Bruce Lyon**

Telephone number  
**317-896-1600**

**SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY**

Name of designating body  
**Common Council of the City of Westfield**

Resolution number  
**08-31**

Location of property  
**Approx 171st + Oak Ridge Road**

County  
**Hamilton**

DLGF taxing district number  
**09**

Description of real property improvements:

Estimated starting date (month, day, year)  
**07-01-2008**

Estimated completion date (month, day, year)  
**10-01-2008**

**SECTION 3 EMPLOYEES AND SALARIES**

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	12	9
Salaries	700,000	498,624
Number of employees retained	12	9
Salaries	700,000	498,624
Number of additional employees		
Salaries		

**SECTION 4 COST AND VALUES**

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
	COST	ASSESSED VALUE
AS ESTIMATED ON SB-1		
Values before project	228,480	278,500
Plus: Values of proposed project	136,000	81,800
Less: Values of any property being replaced		
Net values upon completion of project	364,480	360,300
ACTUAL		
Values before project	343,200	
Plus: Values of proposed project	143,527	
Less: Values of any property being replaced		
Net values upon completion of project	486,727	

**SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER**

WASTE CONVERTED 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**

I hereby certify that the representations in this statement are true.

Signature of authorized representative

Title  
**Member**

Date signed (month, day, year)  
**03/03/2015**

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

**INSTRUCTIONS: (IC 6-1.1-12-5.1)**

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. A copy of the notice will be sent to 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.
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 and (2) the County Auditor.

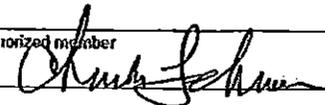
We have reviewed the CF-1 and find that:

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) 5-11-15
Attested by:	Designating body City Council

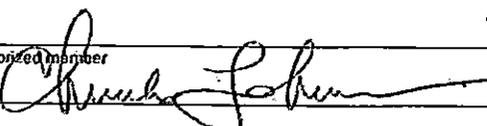
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location 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) 5-11-15
Attested by:	Designating body City Council

**APPEAL RIGHTS (IC 6-1.1-12.1-5.9(e))**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Standard Locknut LLC

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51785 (R / 1-06)  
Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

- 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 March 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 March 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).

SECTION 1 TAXPAYER INFORMATION										
Name of taxpayer Standard Locknut LLC										
Address of taxpayer (number and street, city, state, and ZIP code) 1045 East 169th Street, Westfield IN 46074-0780										
Name of contact person Edward Wetzel						Telephone number (317) 753-3809				
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY										
Name of designating body Westfield City Council						Resolution number 08-54				
Location of property 1045 East 169th Street, Westfield IN 46074-0780				County Hamilton		DLGF taxing district number 2901				
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired.  Inverted Vertical CNC Machine 48" CNC Turning Machine						Estimated starting date (month, day, year) 11/11/2008				
						Estimated completion date (month, day, year) 05/01/2009				
SECTION 3 EMPLOYEES AND SALARIES										
EMPLOYEES AND SALARIES						AS ESTIMATED ON SB-1		ACTUAL		
Current number of employees						178.00		162		
Salaries						7,922,000.00		7,523,000.00		
Number of employees retained						178.00		162		
Salaries						7,922,000.00		7,523,000.00		
Number of additional employees						8.00		0		
Salaries						300,000.00		0.00		
SECTION 4 COST AND VALUES										
			MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1			COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project			6,144,318.00	3,268,347.00						
Plus: Values of proposed project			1,600,000.00	840,000.00						
Less: Values of any property being replaced										
Net values upon completion of project			7,744,318.00	3,908,347.00						
ACTUAL			COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project			7,548,784.00	2,834,844.00						
Plus: Values of proposed project			1,574,631.00	913,228.00						
Less: Values of any property being replaced										
Net values upon completion of project			9,123,315.00	3,748,172.00						
NOTE: The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).										
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER										
WASTE CONVERTED 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										
I hereby certify that the representations in this statement are true.										
Signature of authorized representative <i>Edward Wetzel CFO</i>					Title Chief Financial Officer			Date signed (month, day, year) 04/07/2015		

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM GF-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 Township 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.
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 Township Assessor.

We have reviewed the GF-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 <i>Charles Johnson</i>	Date signed (month, day, year) 5-11-15
Attested by:	Designating body City Council

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location 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 <i>Charles Johnson</i>	Date signed (month, day, year) 5-11-15
Attested by:	Designating body City Council

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

Weas Engineering, Inc.

Personal Property



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R2 / 5-13)

Prescribed by the Department of Local Government Finance

FORM CF-1 / PP

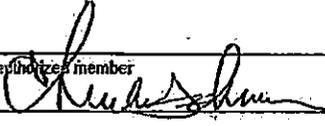
- INSTRUCTIONS:**
1. Properly owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
  2. This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between March 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 March 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).

SECTION 1 TAXPAYER INFORMATION								
Name of taxpayer Weas Engineering, Inc.								
Address of taxpayer (number and street, city, state, and ZIP code) 17819 Commerce Drive, Westfield, IN 46074								
Name of contact person Andy Weas						Telephone number ( 317 ) 867-4477		
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY								
Name of designating body Westfield Common Council						Resolution number 13-106		
Location of property 17297 Oak Ridge Road, Westfield				County Hamilton		DLGF taxing district number 015		
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. Manufacturing, R&D, logistical distribution and information technology equipment including but not limited to the items listed in Exhibit A						Estimated starting date (month, day, year)		
						Estimated completion date (month, day, year)		
SECTION 3 EMPLOYEES AND SALARIES								
EMPLOYEES AND SALARIES						AS ESTIMATED ON SB-1		ACTUAL
Current number of employees						25.00		32.00
Salaries						1,300,000.00		2,298,868.00
Number of employees retained						25.00		25.00
Salaries						1,300,000.00		1,300,000.00
Number of additional employees						20.00		7.00
Salaries						915,200.00		998,868.00
SECTION 4 COST AND VALUES								
	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project	199,000.00						42,000.00	
Less: Values of any property being replaced								
Net values upon completion of project								
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project	199,331.00						51,945.00	
Less: Values of any property being replaced								
Net values upon completion of project								
NOTE: The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6 (d).								
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER								
WASTE CONVERTED 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								
I hereby certify that the representations in this statement are true.								
Signature of authorized representative 				Title VICE PRESIDENT			Date signed (month, day, year) 03/12/2015	

**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 6-1.1-12.1-5.1 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 may 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 and 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, then 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 have reviewed the CF-1 and find that:			
<input checked="" type="checkbox"/> the property owner IS in substantial compliance			
<input type="checkbox"/> the property owner IS NOT in substantial compliance			
<input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member 		Date signed (month, day, year) 5-11-15	
Attested by:		Designating body City Council	
If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)			
Time of hearing	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed after the hearing)</b>			
<input type="checkbox"/> Approved		<input type="checkbox"/> Denied (see instruction 4 above)	
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member 		Date signed (month, day, year) 5-11-15	
Attested by:		Designating body City Council	
<b>APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]</b>			
A property 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 Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			