FILED

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY State Form 51765 (R4 / 11-16)

Prescribed by the Department of Local Government Finance

MAY 2 2 2018

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:

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

With the approval of the de.	agriding bod;	/			0.0 11127 150		,,, o (1) oo	יו יפון טטווטיונקו		
SECTION 1		TAXPAYER	INFORMAT	ØN						
Name of taxpayer							County			
HARRISON MANUFACTURING INC							VIGO			
Address of taxpayer (number and street, city, state, and a	DLGF taxing district number									
4141 2ND PARKWAY, TERRE HAUTE	, IN 47804	1					84002			
Name of contact person							Telephone number			
JENNY MEARS						(317)37	6-1298			
SECTION 2	LOCATIO	ON AND DES		FIRKOPERTY tion number			بيلارب			
Name of designating body	Estimated start date (month, day, year)									
COUNCIL OF THE CITY OF TERRE H	10/15/15 Actual start date (month, day, year)									
Location of property 4141 2ND PARKWAY, TERRE HAUTE							monin, day, 10/15/15	year)		
Description of new manufacturing equipment, or new res	earch and dave	lopment equipn	nent, or new in	formation techno	ogy	Estimated comple	tion date (m	onth, day, year)		
equipment, or new logistical distribution equipment to be NEW EQUIPMENT AND MACHINERY WITH AN	acquired. ESTIMATED	COST OF \$6	63,821,00 To	O SUPPORT L	OCAL		12/15/15			
INDUSTRY AND EXPAND EXISTING PRODUCT						Actual completion date (month, day, year)				
							12/15/15			
SECTION 3		EMPLOYEE	S AND SALA	RIES						
EMPLOYEE	S AND SALA	ARIES			AS ES	TIMATED ON SB-1 ACTUAL				
Current number of employees					- 1	7 15				
Salaries						416,000.00		901,985.00		
Number of employees retained						7 6		6		
Salaries						416,000.00 412,246.49		412,246,49		
Number of additional employees				4				2		
Salaries		10 1000	VIRSONAL OCK			457,600.00		54,809.59		
SECTION 4			ND VALUES							
	MANUFA	MANUFACTURING R & D EQUIPMENT EQ				JIST DIST	IT EQ	IT EQUIPMENT		
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ACCECCEN		ASSESSED VALUE		
Values before project		0.00								
		0.00								
Plus: Values of proposed project		293,104.00								
Plus: Values of proposed project		293,104.00 0.00 293,104.00						4000000		
Plus: Values of proposed project Less: Values of any property being replaced	COST	293,104.00 0.00		ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE		
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project	соѕт	293,104.00 0.00 293,104.00 ASSESSED	cost		COST		COST			
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL	соѕт	293,104.00 0.00 293,104.00 ASSESSED VALUE	COST		COST		COST			
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL Values before project	cost	293,104.00 0.00 293,104.00 ASSESSED VALUE 0.00	COST		COST		COST			
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL Values before project Plus: Values of proposed project	соѕт	293,104.00 293,104.00 ASSESSED VALUE 0.00 265,528,40	COST		COST		COST	ASSESSEC		
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL Values before project Plus: Values of proposed project Less: Values of any property being replaced		293,104.00 0.00 293,104.00 ASSESSED VALUE 0.00 265,528.40 0.00 265,528.40	COST		COST		COST			
Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL Values before project Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project NOTE: The COST of the property is confidential	pursuant to I	293,104.00 0.00 293,104.00 ASSESSED VALUE 0.00 265,528,40 0.00 285,528.40 C 6-1.1-12.1-5	COST			VALUE	COST			
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Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project ACTUAL Values before project Plus: Values of proposed project Less: Values of any property being replaced Net values upon completion of project NOTE: The COST of the property is confidential SECTION S WASTE CONVERTED Amount of solid waste converted Amount of hazardous waste converted Other benefits:	pursuant to long the pursuant	293,104.00 293,104.00 293,104.00 ASSESSED VALUE 0.00 265,528.40 0.00 265,528.40 C 6-1.1-12.1-5 ND OTHER E R BENEFITS TAXPAYER true.	COST D.6(c). CERTIFICAT	VALUE	THE WAXIPA	VALUE VIER NATED ON SB-1 Date signed (mon	A	CTUAL		



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.
- 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.
- 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 CF-1 and	find that:					
the property owner IS in su	bstantial compliance					
☐ the property owner IS NOT	in substantial compliance					
other (specify)						
Reasons for the determination (attach	additional sheets if necessary)					
Signature of authorized member				D	Date signed (month, day, year)	
			Designating body			
Attested by:		Designating body				
If the property owner is found r time has been set aside for the	not to be in substantial compliance purpose of considering complian	e, the property	y owner shall receive the	opportunity for	a hearing. The following date and	
Time of hearing AM	Date of hearing (month, day, year)	Location of he	earing			
	HEARING RESU	ILTS (to be c	ompleted after the heari	ing)		
	Approved		Denied (see instruction	n 5 above)		
Reasons for the determination (attach	additional sheets if necessary)					
Cianatura of culhodred mamber				In	Date signed (month, day, year)	
Signature of authorized member						
Attested by:		Designating body				
	APPEA	L RIGHTS [I	C 6-1.1-12.1-5.9(e)]			
A property owner whose deductions of Circuit or Superior Con	ction is denied by the designating urt together with a bond condition	body may ap red to pay the	ppeal the designating body costs of the appeal if the	y's decision by e appeal is dete	filing a complaint in the office of the ermined against the property owner.	

CONFIDENTIAL



FORM SB-1/PP

PRIVACY NOTICE

Any information concerning the cost of the property and specific solaries paid to individual employees by the property owner is confidential per IC 6-1.1-12.1-6.1.

INSTRUCTIONS

- 1. This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise this statement must be submitted to the designating body BEFORE a person installs the new manufactoring equipment end/or research and development equipment, and/or logistical distribution equipment and/or information technology equipment for which the person wishes to claim a deduction.
- 2 The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area before the installation of qualifying abatable equipment for which the person desires to claim a deduction
- 3. To obtain a deduction, a person must file a certified deduction schedule with the person's personal property return on a certified deduction schedule (Form 10.3-ERA) with the township assessor of the township where the property is situated or with the county assessor if there is no township assessor for the township. The 10.3-ERA must be filed between March 1 and May 15 of the assessment year in which nerr manufacturing equipment end/or research and development equipment and/or togistical distribution equipment and/or information technology equipment is installed and felly functional, unless a filing extension has been obtained. A person who obtains a filing extension must file the form between March 1 and the extended due date of that year.
- Property owners whose Statement of Benefits was approved, must submit Form CF-MPP annually to show compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
- 5. For a Form SB-1/PP that is approved after Juno 30, 2013, the designating body is required to establish an abalament schedule for each deduction allowed. For a Form SB-1/PP that is approved prior to July 1, 2013, the abalament schedule approved by the designating body remains in effect. (IC 6-1.1-12.1-17)

SECTIONA		0.001	YAMPAYER!			9.98				
Name of texpayer				1	mest person					
Harrison Manufacturing				Ron Har	rison, Preside	nl				
Address of texpayer (number and street, city, state, and ZIP code)							Telephone number			
4141 2nd Parkway, Te	the state of the s					armente Sannés	(812) 20	18-4682	THE AMERICAN SELECTION OF THE PERSON OF THE	
SECTIONS	real designation of the	DATIONAL	(D)DESCRIPTI	oltra mate	po platan	K(t)	AD LEAST TO		SERVICE IN CITY	
Namo of designating body							Resolution num			
Common Council of Ci	ly of Terre Haule			and the later and the				27		
Lotalion of property County								OLGF tering district number Harrison		
4141 2nd Parkway, Te					Vigo					
Description of manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment. (Use additional sheets if necessary.)							ESTIMATED			
and/or logistical distribution equipment and/or information technology equipment /Use additional sheets if necessary.)						START DA	TE GON	GOMPLETION DATE		
New Machinery and equi	New Machinery and equipment with an estimated cost of \$732,759.00 to expand				Manufacturing	10/15/201	15	12/15/2015		
capacity of existing product lines to meet market demands.					R & D Equipment					
					Logist Dist Eq	Logist Dist Equipment				
	IT Equipment									
SECTION 3	ESTIMATE OF E	MPLOVER	S AND GALAR	IES AS RE	BUJA OF FROM	OSED PRO	(EO)			
Current number	Selerios	Numbe.	r retained	Salades		I Number ad	ditional	Salaries		
7	\$418,000.00		7	\$	416,000.00		11	\$45	7,600.00	
SECTION 4	ESTIM	ATED/TOT	AL COST AND	VALUE OF	PROPOSED PE	CHEOL	WAY SING			
NOTE: Pursuant to IC 6-	1.1-12.1-5.1 (d) (2) the	MANUF	ACTURING PMENT	R&DE	DEQUIPMENT LOGIS		T DIST			
COST of the property is o	confidential.	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE:	
Current values										
Plus estimated values of	proposéd project									
Less values of any proper										
Nel estimated values upo				1000000						
REOTION 6	WASTE CO	VERTEDY	NEOTHERE	ENEGITS TO	MMISED BY T	HE TAXPAY	A.			
Estimated solid waste converted (pounds) Estimated hezardous waste converted (po						(pounds)				
Other benefits;										
1										
SECTION 5	W. 18 W. 19 W.	NAME OF STREET	TA/PAYER 6	a Egylpunka	13(6)	90天然后	10000			
the party of the p	epresentations in this stat	ement are t	tue.				*			
Signature of a principle of 1990	cuitolive					De (to signed (mmill	i, day year)		
Printed Time of authanization	Max motologo			Tille						
Ron Harrison President										

		FORU	SE(OF THE D)	SKERFATING E(0)	DY			
adopted in the resolut	on previously app 1,1-12.1-2. 3 has been limited	toked by this bon	à gain teannn	II, prastu unut 10	7 G 1[7 (21) W.I.I.	applicent meets the general standards (ovides for the following failtations as long). The dote this designation expires		
B. The type of deduction in the latest and the latest and the latest and the latest and	w manufacturing e w research and de w logistical distribu w information tech	quipment; volopment equipm xion equipment, xology oquipment;	ent,	∏Yes ☐ Yes ☐ Yes ☐ Yes	1340 1340 1340			
C. The amount of deduction applicable to new manufacturing equipment is limited to \$								
now information te	thnology equipmen	it installed and firs	naw research an I cleimed eligible	for deduction is alfor	wed for: (see below *)	logistica) distribution equ\्रात्मारा आर्थार		
☐ Year 1 ☐ Year 6	☐ Year 2 ☐ Year 7	☐ Year3 ☐ Yoar8	∐ Year 9	Year 10	(and datasis)			
 For a Statement of Benefits approved after June 30, 2013, did this designating body adopt an abatement schedule per IC 6-1.1-12.1-17? Yes If yes, attach a copy of the obstement schedule to this form. If no, the designating body is required to establish an abatement schedule before the deduction can be determined. Also we have reviewed the information contained in the statement of benefits and find that the totality of benefits is sufficient to justify the deduction described above. 								
Approved by: (signature and				Telephone number (812)2323	१२१८	Date signed (nronth, day, year)		
Printed name of authorized		g body		Name of designating	hody	TY Council		
TO OLD NO Allested by: (signature and	Wepla agestari			Terre H	itor			
Maln !	1/100	Cy which which	an area le un Are	Charle	area that limitatio	on does not limit the length of time a under IC 6-1.1-121-17.		
		enos omino vinca	All Sind to our ow	MOUNT INVESTIGATION	Strong and the street	under IC 6-1, 1-12.1-17.		

10 8-1.1-12.1-17

Abatement schedules

Sec. 17. (a) A designating body may provide to a business that is established in or relocated to a revitalization area and that receives a deduction under section 4 or 4.5 of this chapter an abatement schedule based on the following factors:

(1) The total amount of the taxpayor's investment in real and personal property.

(1) The total amount of the texpayor's invasiment in real and personal property.
(2) The number of new full-time equivalent jobs created.
(3) The average wage of the new employees compared to the state minimum wage.
(4) The infrastructure requirements for the texpayor's invastment.
(b) This subsection applies to a statement of benefits approved after June 30, 2013. A designating body shall establish an abatement schedule for each deduction allowed under this chapter. An abatement schedule must specify the percentage emount of the deduction for each year of the deduction. An abatement schedule must specify the percentage emount of the deduction for each year of the deduction.

(c) An abatement schedule approved for a particular texpayer before July 1, 2013, remains in effect until the abatement schedule expires under the terms of the resolution approving the taxpayer's statement of benefits.