	City of Sout tition for In			SOUTH BERE
	st include a \$250 filing fee pay before processing can be	able to the City Clerk's Off	lice	PACC A
General Information	Project Name		Project Number	
Legal name as registered with Secretary of State				
Business structure				
Company website				
Proposed Project Information				
Proposed project address		Parent comp	oany name	
City, State, Zip		Legal owner		
Site acreage or acreage required		Is the real es or leased?	state owned	
Square feet of facility		If leased, by	whom?	
Primary Contact Information				
Primary company contact name		Title		
Address of company contact		Phone		
City, State, Zip		Email		
Senior Official Information				
Company senior official name		Title		
Address of company contact (if different from above)		Phone		
City, State, Zip		Email		
Consultant Information/Agent				
Hired business consultant/agent name		Consultant r	elease? (Y/N)	
Address			mic development partners	
City, State, Zip		approval? (Email		
Project Overview				
Brief description of your				
company, project, and why the property is necessary for economic growth				
Certified Technology Park appropriate Is the project in a Tax Incremental Financin (TIF) area? If so, which?	ng l			
Have Building Permits been issued? (Y/N) [Note-Not eligible for abatement if Yes]		Number of residential units project	created by	
If this is a petition for personal property to the equipment been installed?	ax abatement, has	P. 5000		

Investment Details			
Public Infrastructure needs	Has any 504 funding been	What is the value of any equipment being purchased in	What is the value of any equipment being
(Off-site of project in dollars)	received?	Indiana for the project?	purchased from out of state for the project?

New Project	Investments								
Calendar Yea	r	2022	2023	2024	2025	2026	2027	2028	2029
Land Acquisition									
Building Lease Pa	yments								
Building Purchase	e Costs								
New Building Cor	nstruction								
Existing Building	Improvements								
New Machinery 8	& Equipment								
Special Tooling/R	tetooling								
New Furniture/Fi	ixtures								
New Computer/I	T Hardware								
New Software									
On-site Rail Infra	structure								
On-site Fiber Infr	astructure								
TOTAL									
Full-Time Per	manent Indiana-Reside	nt Positions	by Calenda	r Year					
Calendar Year Jobs retained		Hourly <u>average</u> wage, w/o benefits or bonuses		ve # of net <u>NEW</u> nt jobs created	-	benefits or	<u>ge</u> wage, w/o bonuses, of net new jobs	Total training expenditure - not cumulative	Total # to be trained - not cumulative

			bonuses						cumulative	
2023										
2024										
2025										
2026										
2027										
2028										
2029										
2030										
2031										
2032										
2033										
2034										
	F	Provide ho			or new emp	loyees in th	-	-		
			Ful	l time			Part	time		
Labo	orers									
Tech	nical									
Mana	gerial									
Adminis										
Who will be the with WorkOne of	individual respon on recruiting?	nsible for coor	dinating							
Does your compa	any have an EEO I	hiring policy?			Are you ar	n EEO employer	?			
PI	ease list the			d part time following y		d/or female	!		cribe your comr d inclusion by de	
Ye	ar	1	-				10		ecruitment effo	
	ui	20 Full Time)23 Part Time	202 Full Time	2 Part Time	20: Full Time	19 Part Time	three years	as well as curre	ent policies.
		i un finne	rarennie	i un finte	i art fille	i un finte	i art fille			

Black Hispanic Asian Indian Female Other

		Complete below for Real or Personal P Please sign for all reques	• •	•	
		Dublic Devefit I	.		
companies Please comp	s which will plete the ta	Public Benefit I d on both the construction companies and the I provide materials purchased for this project. ble below with the appropriate information. If ints, please enter the full amount of available	Qualify (Yes or No)	Earned Points	<u>Available Points</u>
1		points. Construction Related (Contractors):			
-	Α.	Employ Local Companies (75%)			20
	В.	Purchase Materials from Local Companies (75%)			20
	C.	Require Employees vs. Independent Contractors			19
	D.	Require Prevailing Wage (Davis Bacon)			22
	E.	Require Health Benefits			22
	F.	Require Retirement Benefits			18
	G.	Maintain Affirmative Action Plan			20
		Sub-total Construction Related:			141
2		Wage & Benefit Related (Owner):			
-	Α.	Pay Target Wage Levels			33
	В.	Provide Health Benefits			34
	C.	Provide Retirement Benefits			29
	D.	Provide Training			28
	E.	Provide Child Care			15
	F.	Provide Transportation Assistance			14
	G.	Provide Employer Assisted Housing program			9
		Sub-total Wage & Benefit Related:			162
3		Workforce Related:			
	Α.	Create New Jobs			42
	В.	Retain Existing Jobs			41
	с.	Maintain Affirmative Action Plan			35
	D.	Provide Targeted Hiring Preference			34
		Sub-total Workforce Related:			152
4		Support a Municipal Facility:			
	Α.	Support a SB Municipal Facility (donations to the zoo, conservatory, museum, etc.)			84
		Name of Facility			
		Sub-total Municipal Facility:	$\left \right $		84
		Sub-total from Above:			539

The undersigned owner(s) of real property, located within the City of South Bend, herby petition the Common Council of the City of South Bend for a real and/or personal property tax abatement consideration and pursuant to I.C., 6-1.1-12.1-1, <u>et seq</u>., and South Bend Municipal Code Sec. 2-76 <u>et seq</u>., for this petition state the above.

For Staff Use Only Below This Line								
What is the curre	ent assessed va	alue?	Real Property:				Personal Property:	
What is the proje	ected assessed	value?	Real Property:				Personal Property:	
What is the tax key number for this project?								
What is the six digit NAICS code?								
Please attach a Google map and street view of the location.								
Please list the amount of real and personal property taxes paid for the last five years when applicable.			Real Property	Taxes:		Personal Property Taxes:		
Year One								
Year Two								
	Year	Three						
	Year	Four						
	Year	Five						
							<u> </u>	
		Please fill out	the following	Public Benefi	t Summary I	nformation ar	nd add to total from above	•
						<u>(Y or N)</u>	<u>Points</u>	<u>Points</u>
		Public Ber	nefit Item:					
		Ē	Project Relate	<u>d:</u>				
5	Α.	Redevelop	a Site that ha	s Special Need	ls			49
	В.	Develop Ba	ased on Local I	University Res	earch			35
	C.	Achieve a l	Physical Eleme	ent of a Plan				36
			T					
			Sub-total Pro	oject Related:				120
						_		
6	<u>Sup</u>	er Size Projec	ts (point value	es are cumula	<u>tive):</u>			
	Α.	100% to 19	99%					25
	В.	200% to 29	99%			_		68
	C.	300% to 39						65
	D.	400% and	Over					52
			r					
7			•	per Size Proje	cts:			210
7			1unicipal Infra					
	A.		ersizing or Up			_		14
	B.		50% of Extens					26
	C.		75% of Extens					39
	D.	Pay for 76-	100% of Exter	ision Cost				52
			Sub-total Inf	rastructure R	elated:			131
				. astracture R				131
	т	otal from App	licant Section	:				539
		Total from S						461
Total Public Benefit Points:						1000		



STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51767 (R6 / 10-14) Prescribed by the Department of Local Government Finance

Redevelopment or rehabilitation of real estate improvements (IC 6-1.1-12.1-4)

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

This statement is being completed for real property that qualifies under the following Indiana Code (check one box):

20____ PAY 20__

FORM SB-1 / Real Property

PRIVACY NOTICE

Any information concerning the cost of the property and specific salaries paid to individual employees by the property owner is confidential per IC 6-1.1-12.1-5.1.

INSTRUCTIONS:

- This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise, this statement must be submitted to the designating body BEFORE the redevelopment or rehabilitation of real property for which the person wishes to claim a deduction.
- The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area before the initiation of the redevelopment or rehabilitation for which the person desires to claim a deduction.
- 3. To obtain a deduction, a Form 322/RE must be filed with the County Auditor before May 10 in the year in which the addition to assessed valuation is made or not later than thirty (30) days after the assessment notice is mailed to the property owner if it was mailed after April 10. A property owner who failed to file a deduction application within the prescribed deadline may file an application between March 1 and May 10 of a subsequent year.
- 4. A property owner who files for the deduction must provide the County Auditor and designating body with a Form CF-1/Real Property. The Form CF-1/Real Property should be attached to the Form 322/RE when the deduction is first claimed and then updated annually for each year the deduction is applicable. IC 6-1.1-12.1-5.1(b)
- 5. For a Form SB-1/Real Property that is approved after June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/Real Property that is approved prior to July 1, 2013, the abatement schedule approved by the designating body remains in effect. IC 6-1.1-12.1-17

SECTION 1			TAXPAY		TION			
Name of taxpayer								
Address of taxpayer (nul	nber and street, city, st	ate, and ZIP co	de)					
Name of contact person				Telephone	number		E-mail addres	S
				()				
SECTION 2		LOC	ATION AND DESCR	PTION OF PI	ROPOSED PROJ	ECT		
Name of designating boo	ly						Resolution nur	nber
Location of property			County	County			DLGF taxing district number	
Description of real prope	rty improvements, rede	rehabilitation (use additio	nal sheets if ne	cessary)		Estimated start	t date (<i>month, day, year</i>)	
							Estimated com	pletion date (<i>month, day, year</i>)
SECTION 3	ESTI	MATE OF E	VPLOYEES AND SA	LARIES AS R	ESULT OF PROP	POSED PR	OJECT	
Current number	Salaries		Number retained	Salaries		Number ad	ditional	Salaries
SECTION 4		ESTIM	ATED TOTAL COST	AND VALUE				
						ESTATE I	MPROVEMEN	
					COST		ASS	SESSED VALUE
Current values		4						
	les of proposed proj			1				
	property being repla es upon completion							
SECTION 5			NVERTED AND OTH		S PROMISED BY			
		MACTE CO						
Estimated solid was	ste converted (pound	ds)		Estimat	ed hazardous was	ste converte	ed (pounds)	
Other benefits								
SECTION 6				CERTIFICAT	ION			
•		ions in this :	statement are true.					
Signature of authorized r	epresentative						Date signed (m	nonth, day, year)
Printed name of authorize	ed representative				Title		ļ	

			FOR USE OF THE L	DESIGNATIN	аворт					
	nd that the applicant meets th IC 6-1.1-12.1, provides for th			pted or to be	adopted by this body. Said	resolution, passed or to be passed				
A.	The designated area has be expires is			ed	calendar years* <i>(see b</i>	<i>below).</i> The date this designation				
B.	The type of deduction that is 1. Redevelopment or rehabil 2. Residentially distressed a	litation of real estate	•	🗌 Yes 🛛] No] No					
C.	The amount of the deduction	n applicable is limited	d to \$	·						
D.	Other limitations or condition	ns (specify)								
E.	Number of years allowed:	☐ Year 1 ☐ Year 6	☐ Year 2 ☐ Year 7	☐ Year 3 ☐ Year 8	☐ Year 4 ☐ Year 9	☐ Year 5 (* see below) ☐ Year 10				
 F. 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 No If yes, attach a copy of the abatement schedule to this form. If no, the designating body is required to establish an abatement schedule before the deduction can be determined. We have also reviewed the information contained in the statement of benefits and find that the estimates and expectations are reasonable and have determined that the totality of benefits is sufficient to justify the deduction described above. 										
Approved	(signature and title of authorized	member of designating	body)	Telephone nu	mber	Date signed (month, day, year)				
Printed na	ame of authorized member of des	ignating body		Name of desig	lesignating body					
				Distant		1999 W. 197				
Attested	y (signature and title of attester)			Printed name	or attester					
IC 6-1 Abate Sec. 1	ver is entitled to receive a dec For residentially distressed a 6-1.1-12.1-4.1 remain in effe 2013, the designating body i (10) years. (See IC 6-1.1-12 For the redevelopment or rel schedule approved by the de body is required to establish .1-12.1-17 . (a) A designating body ma n 4 or 4.5 of this chapter an a (1) The total a (2) The numbe (3) The averag (4) The infrast (b) This subsection applie for each deduction all the deduction. An aba	Juction to a number areas where the Forr sct. The deduction per s required to establis 2.1-17 below.) habilitation of real pr esignating body reman an abatement schedule mount of the taxpay er of new full-time eq ge wage of the new of ructure requirements as to a statement of lo owed under this cha atement schedule man atement schedule man ate	of years that is less the n SB-1/Real Property period may not exceed shan abatement scho- operty where the For ains in effect. For a F dule for each deduction based on the followin er's investment in real uivalent jobs created employees compared s for the taxpayer's in penefits approved aft pter. An abatement s ay not exceed ten (10 articular taxpayer befor	han the numb v was approve five (5) years edule for each m SB-1/Real orm SB-1/Real orm SB-1/Re on allowed. (5 d in or relocat g factors: l and persona to the state n vestment. er June 30, 2 schedule mus)) years. ore July 1, 20	er of years designated und ad prior to July 1, 2013, the b. For a Form SB-1/Real Pro- n deduction allowed. The d Property was approved prio al Property that is approved See IC 6-1.1-12.1-17 below ed to a revitalization area a al property. ninimum wage. 013. A designating body sh t specify the percentage an	deductions established in IC roperty that is approved after June 30, leduction period may not exceed ten or to July 1, 2013, the abatement d after June 30, 2013, the designating				

ς.



STATEMENT OF BENEFITS PERSONAL PROPERTY State Form 51764 (R4 / 11-15) Prescribed by the Department of Local Government Finance

FORM SB-1 / PP

PRIVACY NOTICE

Any information concerning the cost of the property and specific salaries paid to individual employees by the property owner is confidential per IC 6-1.1-12.1-5.1.

INSTRUCTIONS

- . 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 manufacturing equipment and/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 103-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 103-ERA must be filed between January 1 and May 15 of the assessment year in which new manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment is installed and fully functional, unless a filing extension has been obtained. A person who obtains a filing extension must file the form between January 1 and the extended due date of that year.
- 4. Property owners whose Statement of Benefits was approved, must submit Form CF-1/PP 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 June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/PP that is approved prior to July 1, 2013, the abatement schedule approved by the designating body remains in effect. (IC 6-1.1-12.1-17)

SECTION 1			TAXPAYER								
Name of taxpayer				Name of co	ntact person						
Address of taxpayer (number ar	nd street city state and 715	(code)					Telephone nur	mher			
Address of taxpayer (number an	ia sireer, ony, state, and zir	0008)					()	TIDEI			
SECTION 2	1.00	CATION AN	ID DESCRIPTI	ON OF PRO	POSED PRO.	ECT	\/				
Name of designating body		Resolution nur	mber (s)								
Location of property		DLGF taxing d	listrict numbe	r							
Description of manufacturing and/or logistical distribution			ESTIMATE								
(Use additional sheets if neo	cessary.)	Iditon tech	lology equipting	5111.			START DA	TE CON	IPLETION DATE		
					Manufacturin	g Equipment					
					R & D Equipr	ment					
					Logist Dist Ed	quipment					
					IT Equipment	t					
SECTION 3	ESTIMATE OF E		S AND SALAR	IES AS RES		POSED PRO	JECT				
	alaries		retained	Salaries		Number ad		Salaries			
SECTION 4	ESTIMA	TED TOTA	L COST AND	VALUE OF F	ROPOSED P	ROJECT					
NOTE: Pursuant to IC 6-1.1				R & D EQ	UIPMENT		T DIST MENT	IT EQ	IT EQUIPMENT		
COST of the property is cor	nfidential.	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE		
Current values											
Plus estimated values of pro	pposed project										
Less values of any property	being replaced										
Net estimated values upon completion of project											
SECTION 5	completion of project WASTE CON	ERTED A	ND OTHER BE								
	WASTE CON	/ERTED AI	ND OTHER BE		DMISED BY T						
SECTION 5	WASTE CON	/ERTED AI	ND OTHER BE								
SECTION 5 Estimated solid waste conve	WASTE CON	/ERTED AI	ND OTHER BE								
SECTION 5 Estimated solid waste conve Other benefits:	WASTE CON	/ERTED AI		Estimated h	azardous wast						
SECTION 5 Estimated solid waste conve Other benefits: SECTION 6	WASTE CON		TAXPAYER C	Estimated h	azardous wast						
SECTION 5 Estimated solid waste convert Other benefits: SECTION 6 I hereby certify that the repr	WASTE CONV erted (pounds)		TAXPAYER C	Estimated h	azardous wast	e converted ((pounds)	h day year)			
SECTION 5 Estimated solid waste conve Other benefits: SECTION 6	WASTE CONV erted (pounds)		TAXPAYER C	Estimated h	azardous wast	e converted (h, day, year)			
SECTION 5 Estimated solid waste convert Other benefits: SECTION 6 I hereby certify that the repr	WASTE CONV erted (pounds)		TAXPAYER C	Estimated h	azardous wast	e converted ((pounds)	h, day, year)			

FOR USE OF THE DESIGNATING BODY

We have reviewed our adopted in the resolut authorized under IC 6-	ion previously ap	iting to the design oproved by this bo	ation of this econ ody. Said resolu	omic revita tion, passe	lization are d under IC	ea and find C 6-1.1-12	d that the applicant meets the general standards 2.1-2.5, provides for the following limitations as
							* (see below). The date this designation expires tains an expiration date for the designated area.
 B. The type of deduction 1. Installation of ne 2. Installation of ne 3. Installation of ne 4. Installation of ne 	w manufacturing w research and c w logistical distrib	equipment; levelopment equip pution equipment.	oment;	:	☐ Yes ☐ Yes ☐ Yes ☐ Yes	□ No □ No	Enhanced Abatement per IC 6-1.1-12.1-18 Check box if an enhanced abatement was approved for one or more of these types.
C . The amount of dedu \$							_ cost with an assessed value of
D. The amount of dedu \$	iction applicable t	o new research ai both lines may be	nd development e filled out to estai	equipment i b <i>lish a limit,</i>	s limited to <i>if_desired.</i>	\$)	cost with an assessed value of
E. The amount of dedu \$	ction applicable t	o new logistical di both lines may be	stribution equipm filled out to estai	ent is limite b <i>lish a limit,</i>	ed to \$)	cost with an assessed value of
		o new information both lines may be					cost with an assessed value of
G. Other limitations or o	conditions (specif	y)			······		
H. The deduction for ne new information tech							/or new logistical distribution equipment and/or
🗌 Year 1	Year 2	🗌 Year 3	🗌 Year 4	ΠY	ear 5		hanced Abatement per IC 6-1.1-12.1-18 Imber of years approved:
🗌 Year 6	🗌 Year 7	🗌 Year 8	🗌 Year 9	ΠY	ear 10	(E	nter one to twenty (1-20) years; may not ceed twenty (20) years.)
If yes, attach a copy If no, the designating	of the abatement body is required the information c	schedule to this fo to establish an aba ontained in the sta	rm. atement schedule atement of benefi	before the	deduction of the the dest	can be de	cchedule per IC 6-1.1-12.1-17? Yes No termined.
Approved by: (signature and ti	tle of authorized me	ember of designating	body)	Telephone ()	number		Date signed (month, day, year)
Printed name of authorized mo	ember of designatin	g body		Name of de	esignating bo	ody	
Attested by: <i>(signature and titl</i>	e of attester)			Printed nar	ne of atteste	PL	
* If the designating body taxpayer is entitled to	r limits the time p receive a deducti	eriod during which on to a number of	an area is an ec years that is less	onomic revi than the n	italization a	area, that ears desig	limitation does not limit the length of time a gnated under IC 6-1.1-12.1-17.

IC 6-1.1-12.1-17

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 taxpayer's investment 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 taxpayer's investment.

(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 amount of the deduction for each year of the deduction. An abatement schedule may not exceed ten (10) years.

(c) An abatement schedule approved for a particular taxpayer 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.