

City Council Agenda

MEETING DATE: Tuesday, June 18, 2024, at 5:30 PM **MEETING PLACE**: Madison City Hall- Council Chambers

- A. Lord's Prayer/Pledge of Allegiance
- B. Calling of roll & notice of absentees
- C. Reading, approving, correcting, or disposing of minutes from prior meeting.
- D. Presentation of petitions, memorials, remonstrance's, introduction of motions and guests
- E. Resolution or Bills
- F. Reports, recommendations, other business from standing/select committees of the city council.
- G. Reports of city officials
 - Economic Development/Emily McKinney:
 - Riverfront Liquor License request for Vintage Lanes
 - Tax abatement compliance review
- H. Bills on third reading
- I. Bills on second reading
 - Ordinance 2024-5: Establishing the Indiana Destination Development Corporation Control Fund and approving the Grant Agreement Sp. Bartlett
- J. Miscellaneous
- K. Public comments
- L. Mayor's comments
- M. Next Council Meeting: Tuesday July 2, 2024, at 5:30 PM
- N. Motion to adjourn.



Common Council Minutes

MEETING DATE: June 4, 2024

MEETING PLACE: Madison City Hall - Council Chambers

The Common Council of the City of Madison, Indiana met in regular session at 5:30 P.M. at City Hall, 101 W. Main St.

Mayor Bob Courtney opened the meeting with the Lord's Prayer followed by the Pledge of Allegiance to the Flag.

Present: Wilber, Bartlett, Dattilo, Krebs, and Storm were present. Schafer attended the meeting via Zoom, and Thevenow was absent (6-1).

Minutes: Bartlett moved to approve May 8, 2024, minutes, seconded by Wilber. All in favor, motion carried (6-0).

Presentation of petitions, memorials, remonstrances, introduction of motion & guests: None.

Resolutions or bills: Ordinance 2024-5: Establishing the Indiana Destination Development Corporation Control Fund and Approving the Grant Agreement (Sp. Bartlett): The Indiana Development Corporation, a tourism development office that is dedicated to supporting and promoting Indiana's tourism and talent attraction efforts will be making restricted donations for various tourism-related initiatives within the City of Madison. The City of Madison wishes to establish a fund to deposit monies donated from the Indiana Destination Development Corporation to the City of Madison initiatives. A control fund is established to deposit monies donated by the Indiana Destination Development Corporation. The monies will come as restricted donations for a specified purpose through an agreement for each donation which will specify the accepted use of funds. The fund shall be named the Indiana Destination Development Corporation Grant Control Fund. All funds contained in the account shall be expended only for the exclusive purpose detailed in each restricted donation agreement. The Common Council of the City of Madison will review and agree to each donation agreement prior to accepting funds and no further appropriation is required. The express and written approval of the Board of Public Works and Safety shall be obtained prior to the expenditure of funds from the account. For each type of restricted donation, separate, individual accounts shall be monitored to reflect receipts, disbursements, and current balances. The fund shall be non-reverting and exist perpetually unless terminated by a subsequent ordinance enacted by the Common Council. If the fund is terminated by a subsequent ordinance enacted by the Common Council, the remaining balance of the terminated account shall revert to the general budget of the Common Council.

Resolution 2024-6C: Supporting JC Council Ordinance to Raise Innkeeper's Tax (Sp. Bartlett): In July 1987 Jefferson County Council "Council" increased the Jefferson County Innkeeper's Tax from 4% to 5%. In May 2019, Council adopted Ordinance 2019-1 setting forth procedures for local collection of the tax pursuant to IC 6-9-15-6. In September 2021, Council adopted Ordinance 2021-03 which identifies the composition of the seven-member board of managers whose role it is to invest the funds in a manner that promotes the development and growth of convention activity, tourism, and industry in Madison and Jefferson County. In March 2024 the General Assembly passed Senate Bill 238 which became Public Law 121 when signed by Governor Eric J. Holcomb on March 13, 2024. The legislation amends IC 6-9-15-6 to enable Jefferson County and other counties to impose a rate of up to 8% Innkeeper's Tax until December 31, 2045. The investment of innkeeper tax which is assessed on lodging and short-term rentals and supports the quality-of-life strategies,

drives business to our local economies, enhances workforce retention and development, supports small business, provides funding for arts and culture, and funds capital needs across the community. To increase this tax, Jefferson County Council must pass an ordinance adopting the increased amount. The City of Madison has representation on the Jefferson County Board of Tourism and supports Jefferson County Council's effort to pass an ordinance raising the Innkeeper's Tax from 5% to 8%, effective January 1, 2025.

Motion: Bartlett moved to approve Resolution 2024-6C, seconded by Dattilo. Roll Call: Dattilo – Y, Wilber – Y, Bartlett – Y, Schafer – Y, Krebs – Y, and Storm – Y. All in favor, resolution passes (6-0).

Reports, recommendations, and other business from standing/select committees of City Council: New Projects Committee: Josh Schafer, a member of the New Projects Committee, presented the committee's current progress to the public and council. They have started by reviewing the Council Rules and Procedures.

Report of city officials: MPD Chief Shawn Scudder: Chief Scudder briefed the council on police call statistics, staffing, the Community Watch Program, and preparations for street traffic calming solutions.

Bills on third reading: None.

Bills on second reading: None.

Miscellaneous: None.

Public comment: Deanna Shelley asked the council questions regarding capital planning, Main Street semi-traffic, street traffic calming solutions, the current road and sidewalk projects, TSO trash rates, and abandoned vehicle ordinances. Jaret Boyd, who lives at 111 East Third Street, congratulated the city on the opening of the Crystal Beach Aquatic Park and also expressed concerns regarding the traffic at the corner of West Street. Elyse Detmer, residing at 104 East Third Street, sought clarification on an abandoned vehicle ordinance.

Mayor's comments: A ribbon cutting will take place on June 11, 2024, to announce the Economic Development initiative with the City of Madison Port Authority. This initiative aims to attract new businesses and make use of railroad transportation. On June 8, 2024, there will be a swearing-in ceremony for Shirley Rynearson, the new Clerk-Treasurer. The city will be conducting a lead line survey, reaching out to each household in the city to assess homes that may have lead lines connecting to the city's water supply. An application will be sent to city residents soon, allowing them to choose the size of their new trash cans.

The next regular meeting will be Tuesday, June 18, 2024, @ 5:30 pm.

Adjourn: Bartlett moved to adjourn, seconded by Wilber. All in favor (6-0).

Attested:	
<u> </u>	
President Pro Tempore	
Shirley Rynearson, Clerk-Treasurer	



Riverfront Liquor License CHECK LIST – Application

Applicant: Vintage Lanes	
Application Contact Info	
Application Fee	
Business Plan	
Menu/Hours	
Number of Jobs/Nature of Jobs/Salary Ranges	
Owners Day-to-Day Involvement	
Collaboration and Support Growth	
Plan for Improvements	
Proof of Insurance	
ATC Application	
Signed Condition of Eligibility	
Meeting for Review of Application - Date: 5/28/24 Time: 10:30 am	
Notes/Questions	
Microsoft Communication (Communication Communication Communication Communication Communication Communication Co	÷



Riverfront Liquor License

Application
Obtaining a Liquor License within the Downtown Madison Riverfront Redevelopment District

Please turn in completed Application including Fee to: The Economic Development Department City Hall, 101 West Main Street		FOR OFFICE USE ONLY 5/28/24
Information Type: (Check All That Apply)		Date Received Why Emily Reviewed by
Application Type: (Check One) o Restaurant √ Cultural Experience Venue		5/28/24 Date of Review
Primary Owner Contact and Proof of Ownershi (State of Indiana – Secretary of State Request)	p (Please Attach)	Council Approved
Name: Matt & Daniel Chandler		Condition of Eligibility Letter
Address: 111 E 2nd St Madison, IN 47250	The managed as a con-	Sent Date
Phone No.: 8125841376 Fax No.:		Notes:
E-mail Address hello@vintagelanesmadison.com		
Business Classification (S Corp, LLC, Etc.): (Ple	ase Attach Proof)	
Other Owners/Percentages (if applicable)		
Matt Chandler	50 %	
Daniel Chandler	50 %	

Busine	ss/Property Inform	mation:	
Busine	ss Name: Vintage L	Lanes LLC	
Addres	s; 301 Jefferson S	t. Madison, IN 47250	
	y Parcel ID Numbers the planning office	er: 39-13-02-241-004.000-007	(Can be found online or
- Or Gen	eral location (if no	address has been assigned provi-	de a street corner):
Propert	y Size:	acres or	square feet 7000
Zoning	new zoning has	been assigned through city	
	of life of Madison a a. A detailed s exterior din	and support the growth of the Ri site plan that includes the size, flaing areas (identifying seat count to of operations (hours, menus, scl	hedule, etc.)
	c. Number of	jobs and nature of jobs to be add	ed to the community and salary range
	10+ - Bartende	er, Lead Bartender, Barback, Ma	nager
	\$12-15 hourly I	rate	

d. Provide a statement of the Owner's day-to-day involvement in the operations of the business

At Vintage Lanes, Owners Matt & Daniel Chandler will be committed to maintaining a hands-on approach and remain heavily invovied in the day-today operations of the business. As active leaders on-site, they oversee various aspets of the business including but not limited to

Customer Service, Operations Management, Staff & Traning Development Marking & Promtoin, Financial Oversight and Continuous Improvment

e. Provide a statement of how you plan to collaborate and support the growth of the Riverfront District while encouraging a healthy, safe, and fun atmosphere, which generally complements other redevelopment efforts.

We are dedicated to collaborating with the Riverfront District's stakeholders, fostering safety, fun, and growth. Through strategic partnerships and community engagement, we'll ensure a vibrant atmosphere that complements ongoing redevelopment efforts. Our focus on safety measures, sustainable practices, and local economic support will contribute to a thriving and enjoyable environment. By actively participating in civic initiatives and continuous improvement, we aim to be a positive force in the district's success story.

- 2. Submit a Plan for any improvements including a timetable for completion. (Building permits may be needed under separate application with the Planning Department) (Please attach approval letter from planning department)
 - a. The plan should include financial and owner strength for the financing of the venture. (Please attach either a letter from bank, or another form of financial information)
- 3. Proof of insurance (Please attach)
 - i. Business Liability
- 4. Submit one hard copy of the application, including a \$1,500 application fee
- 5. Submit the completed Application from the Indiana ATC

CONDITION OF ELIGIBILITY

All Madison Riverfront District Permit applications will be under review by the Economic Development Department, the Mayor, and City Council of the City of Madison.

If the application is approved the Mayor and the Common Council of the City of Madison will give the applicant a signed letter, to that effect. It is understood that the ATC will not take action on this, one, two, or three-way Riverfront District Liquor License without this letter of recommendation.

The applicant is responsible for contacting the City Planner, City Building Inspector and/or the City Zoning Board, to mutually identify any information, that is not applicable, needed for following City Ordinances and Permit Process. The applicant is required to provide any other information requested by the City of Madison, and the Economic Development Department to demonstrate compliance, with the requirements of the Riverfront District Permit.

Restaurants receiving one, two, or three-way licenses, within the District, will be required to sell a minimum of \$200,000 in gross food sales, for the first two years, and \$275,000 for the third year and beyond. The restaurant must be open a minimum of 240 days per year.

Cultural experience venues receiving one, two or three-way licenses within the District will be required to have a minimum performance capacity of 125 people and must adhere to the state minimum of food requirement under, 905 IAC 1-20-1, under the authority of IC 7.1-3-20-9.

As part of the yearly license renewal, applicants will have to demonstrate that these requirements have been met at the location for which the license has been granted, in addition to the requirements of the City of Madison application process.

Permits are not transferable, not portable within or without the district and any renewals are subject to compliance, with the terms of these local rules, and any agreement negotiated with the City of Madison. The permits shall not be pledged as collateral, or subject to any lien, judgment, property settlement agreement, or third-party claim.

The information included, in and with, this application, is completely true and correct to the best of my knowledge and belief.

(Applicant's Signature) (Date)

Property Owner's Signature (the "owner" does not include tenants or contract buyers): I authorize the filing of this application and will allow the City to enter this property for purpose of analyzing this request.

(Owner's Signature) (Date) 5/128/24

(Owner's Signature) (Date)

Phone (812) 274-0461 FAX (812) 265-3349 101 West Main

Economic Development Office

APPRESSED APPRISSED DE CO MOPALES DE CO MOPALES ENDEANA SECRETARY OF STACE 09:14/2025 0 LOZPM

ARTICLES OF ORGANIZATION

Learned pursuant to the provisions of the Indiana Code

ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS.

BUSINESS ID

202309141725007

BUSINESS TYPE

Domestic Limited Liability Company

BUSINESS NAME

VINTAGE LANES LTC

PRINCIPAL OFFICE ADDRESS

301 Jefferson St. Madison, IN, 47230, USA

ARTICLE II - REGISTERED OFFICE AND ADDRESS

REGISTERED AGENT TYPE

Individual

1111

Man Chandler

ADDRESS

111 E 2nd St. Madison, IN: 47250, USA

SERVICE OF PROCESS EMAIL

mant/a thechandlerhotel.com

Lacknowledge that the Service of Process small provided above is the small address at which electronic service of process may be accepted

ARTICLE III - PERIOD OF DURATION AND DEFECTIVE DATE

PERIOD OF DURATION

Perpetual

EFFECTIVE DATE

(79/14/2023

EFFICINE UME

0.248PM

ARTICLE IV - GOVERNING PERSON INFORMATION

Manager

NAME

Daniel Chandler

ADDRESS

111 E 2nd St, Madison, IN, 47250, USA

TITLE

Manager

NAME

Matt Chandler

ADDRESS :

111 E 2nd St. Madison, IN, 47250, USA

Vintage Lanes Sample Menu

2 charcuterie board options: a smaller option for 1-2 guests and a larger option to accommodate bigger parties

Hot sandwich

Hot soup

Coffee

Milk

Soft drinks

NEW

Renewal of Number
POLICY DECLARATIONS

Mount Vernon Fire Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

No. CP 2673648

A Member Company of United States Liability Insurance Group

Direct Bill Policy

NAMED INSURED AND ADDRESS:

MATTHEW CHANDLER AND DANIEL SELTER PO BOX 63 MADISON, IN 47250

POLICY PERIOD: (MO. DAY YR.) From: 09/26/2023 To: 09/26/2024

FORM OF BUSINESS:

Individual

BUSINESS DESCRIPTION: Vacant Building without Renovation

12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

Commercial Liability Coverage Part \$350.00
Commercial Property Coverage Part \$3,216.00

TOTAL:

\$3,566.00

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue

See Endorsement EOD (1/95)

Agent:

VOLDICO, LLC (2684) 420 S. Buckeye St Osgood, IN 47037 Issued: 09/21/2023 4:21 PM

Authorized Representative

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

FORMS AND ENDORSEMENTS

The following	forms apply to m	ultiple coverage parts	
Endt#	Revised	Description of Endorsements	
2110IN	10/19	Indiana Service of Suit	
CG2173	01/15	Exclusion Of Certified Acts Of Terrorism	•
CP0450	07/88	Vacancy Permit	
IL0017	11/98	Common Policy Conditions	
IL0021	09/08	Nuclear Energy Liability Exclusion Endorsement	
IL0156	09/07	Indiana Changes - Concealment, Misrepresentation Or	Fraud
IL0192	07/02	Indiana Changes - Pollution	
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal	
IL0935	07/02	Exclusion Of Certain Computer-Related Losses	
Jacket	07/19	Policy Jacket	
L-395	11/05	Vacant Building Protection Warranty	
L-610	11/04	Expanded Definition Of Bodily Injury	
LLQ100	07/06	Amendatory Endorsement	
LLQ368	08/10	Separation Of Insureds Clarification Endorsement	
P-247	12/20	Exclusion of Certified Acts of Terrorism	
TRIADN	12/20	Disclosure Notice of Terrorism Insurance Coverage	

The following forms apply to the Commercial Liability coverage part

Endt#	Revised	Description of Endorsements
CG0001	12/07	Commercial General Liability Coverage Form
CG0068	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2018	04/13	Additional Insured-Mortgagee, Assignee or Receiver
CG2104	11/85	Exclusion - Products-Completed Operations Hazard
CG2107	05/14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included
CG2109	06/15	Exclusion - Unmanned Aircraft
CG2136	03/05	Exclusion - New Entities
CG2139	10/93	Contractual Liability Limitation
CG2144	04/17	Limitation of Coverage to Designated Premises, Project or Operation
CG2147	12/07	Employment-Related Practices Exclusion
IL0117	12/10	Indiana Changes - Workers' Compensation Exclusion
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
L 278VAC	12/14	Independent Contractors/Subcontractors Exclusion
L-232s	09/05	Classification Limitation Endorsement
L-500	12/17	Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors and Subcontractors
L-532 VAC	12/14	Exclusion - Construction Operations

EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

		12.01 AM STANDARD TIME AT TOOK MALEING ADDRESS
FORMS AND ENDORSE	EMENTS	
L-540	11/09	Exclusion - Exterior Work Over 50 Feet
L-599	10/12	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
L-783	10/12	Amendment of Liquor Liability Exclusion
L-819	09/18	Swimming Pool, Hot Tub or Spa Exclusion
The following f	arma annly to the C	Commercial Property coverage part
Endt#	Revised	Commercial Property coverage part Description of Endorsements
LIIUIH	Neviseu	Description of Endorsements
CP 101	06/08	Maintenance Of Heat Condition
CP 109	06/09	Functional Building Valuation
CP 141 DEP	04/20	Changes - Actual Cash Value and Depreciation Definition
CP 142	04/14	Protective Devices Or Services Provisions
CP 224	10/21	Asbestos Material Exclusion
CP 225	02/11	Exclusion - Lead Contamination
CP 226	02/11	Absolute Pollution Exclusion - Property
CP 227	02/11	Mold, Fungus, Bacteria, Virus Or Organic Pathogen Exclusion
CP 238	04/15	Exclusion - Loss Or Damage - Copper
CP 245	09/15	Earth Movement Exclusion
CP0010	06/07	Building And Personal Property Coverage Form
CP0090	07/88	Commercial Property Conditions
CP0152	07/96	Indiana Changes - Rights Of Recovery
CP1030	06/07	Causes Of Loss - Special Form
CP1032	08/08	Water Exclusion Endorsement
CP1056	06/07	Sprinkler Leakage Exclusion
CP1075	12/20	Cyber Incident Exclusion
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
Notice-Cyber Incident Excl-C	10/20 Y	Cyber Incident Exclusion Endorsement Advisory Notice to Policyholders
P-247	12/20	Exclusion of Certified Acts of Terrorism

COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 STANDARD TIME

DESCRIPTION OF PREMISES

Prem Bldg Location, Construction, Occupancy and Other Information

Territory Fire Code

1 2012611

301 Jefferson St, Madison, IN 47250

006

1180

Description:

Vacant Building without Renovation

1

Covered Causes of Loss: Special Excluding Sprinkler Leakage

2000. Optolal Exolution

Protection Class

ection class 4

Construction:

Joisted Masonry

Number of Stories: 3

Square Footage:

5520

Special Deductible:

None

Special Deductible Type:

COVERAGES PROVIDED - INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN

Prem Bldg

Coverage

Limits of Insurance Coinsurance % or Deductible Monthly Indemnity

+ Valuation

Premium

1 1

Coverage Building

\$400.000

\$1,000

80%

FBV

\$3,216

MINIMUM PREMIUM FOR PROPERTY COVERAGE PART:

\$250

TOTAL PREMIUM FOR PROPERTY COVERAGE PART:

: \$3,216

MP - minimum premium
+ Valuation: ACV - Actual Cash Value; RC - Replacement Cost; RC/ACV - Replacement Cost/ACV Roof
FBV - Functional Building Value; AA - Agreed Amount; ALS - Actual Loss Sustained

LOSS PAYABLE(S): NONE

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

See Endorsement EOD (01/95)

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 STANDARD TIME

LIMITS OF INSURANCE

Each Occurrence Limit Personal & Advertising Injury Limit (Any One Person/Organization) \$1,000,000 \$1,000,000

Medical Expense (Any One Person)

Damages To Premises Rented To You (Any One Premises)

\$5,000 \$100,000

Products/Completed Operations Aggregate Limit

General Aggregate Limit

Excluded \$2,000,000

LIABILITY DEDUCTIBLE

\$0

LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

Location

Loc

Address

Territory

1 301 Jefferson St, Madison, IN 47250 006

PREMIUM COMPUTATION

Premium Basis

Rate Pr/Co

Advance Premium

1

Code No.

All Other Pr/Co All Other

Vacant Buildings - not factories - Other than Not-For-Profit

Classification

68606

5,520 Per 1,000 Total Excluded

24.192 Excluded

\$350

Area

MP Included

Additional Insured - Mortgagee, Assignee or Receiver 49950

1 Flat

TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART:

Excluded

0.000 Excluded

\$350

(This Premium may be subject to adjustment.) MP - minimum premium

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

See Form EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

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mailing address

1.13. What county is the proposed permit premises located in?

form. It is the permittee's responsibility to notify the ATC of any changes to the

Name

Matt Chandler

Address (number and street, city, state, and ZIP code)

111 E 2nd St. Madison, IN 47250

1.14. Is the proposed permit premises located inside the corporate limits of a city / town? Yes No 1.15. If yes, please name the incorporated city / town. 1.16. Is there at least 200 feet between this premises and any church or school? Yes □ No. If no please check the exception that applies: Church or school provided a written statement pursuant to IC 7.1-3-21-11 (Applies only to grocery store, drug store, restaurant, hotel, or catering hall.) (Copy of written statement must be attached to application.)

Jefferson

Wall of the premises and wall of the church or school are separated by at least eighty-five (85) feet, including a two-lane road of at least thirty (30) feet in width

Tri Ordina spirita	The application is for a retail restaurant permit located in a facility on the National Register of Historic Places (Include documentation of the historic designation.)	,		
Equation manufacture (Auto 1111)	The application is for a retail restaurant permit located within the bounds of an historic district established by (Include documentation of the historic designation and a district map indicating the location of the premises were also as a second control of the premises were also as a second control of the premises were also as a second control of the premises were also as a second control of the premises were also as a second control of the premises were also as a second control of the premises were also as a second control of the premise were also as a	ordinance pursua	nt to IC 36 listrict.)	-7-11-7
The state of the s	☐ The application is for one of the following permit types		and Andrews Programmy	
	a) Mall under IC 7.1-3-20-24.4:		/	
1	b) City market under IC 7 1-3-20-25,			
	c) Historic railway station under IC 7.1-3-20-16(e)(1),			
	d) Renovation under IC 7.1-3-20-16(e)(2); or e) Food hall master under IC 7.1-3-20-29 or food hall vendor under IC 7.1-3-20-30			
	An alcoholic beverage permit premises has continuously operated at the location since prior to the opening of	the church or sch	ool.	
1.1	7. Do any individuals, corporations, limited liability companies, limited liability partnerships, or stock owners members, or partners of any such entities have any interest, either directly or indirectly, in any distiller, vintner, farm winery, rectifier, brewer, primary source of supply, or wholesaler permit?	☐ Ye	s 🏿 No	VII. seema aande ja anastinsen Vasan suuriaa
1.1	3. As owner, do you manage the premises? If no, please complete Section 7, Manager's Questionnaire.	⊠ Ye	s 🗆 No	
1.1). Do you sell tobacco products? If yes, please provide the Tobacco Sales Certificate number	☐ Ye	s 📓 No	na mpakalo kuli na mana mpakaligi kuji kuji kuji kuji kuji kuji kuji kuj
1.20	Do you consent for the duration of the permit to inspection and search by an enforcement officer, without a warrant or other process, of your licensed premises and vehicles to determine compliance with the provisions of Indiana Code 7.1?	¥ Ye	s 🔲 No	and the second s
1.2	i. Do you have the right to possess (rent, lease, mortgage, or own) the permit premises for the term of the permit?	■ Ye	s □ Nc	
principal des	SECTION 2. QUALIFICATIONS			antaning gillinda an elifebration de la collection y antique (a construir de constr
ALL GATE OFFI	THE FOLLOWING QUESTIONS PERTAIN TO ALL INDIVIDUALS HAVING AN INTEREST IN T	LHS ADDI ICATIO	N.B	
ello (Trapo) pipo prisonino al Trapolo	NOTE: "Individuals" referred to in all questions in the below section include limited liability companies (LLCs), corporations, partnerships, and all other business entities recognized under Indiana law, as well as a	limited liability part	nerships (L	LPs), able.
2.1.	Are all individuals with an interest in this application citizens of the United States?		■ Yes	□ No
2.2.	Are all individuals with an interest in this application of sound mind and good repute in the community in which the	ey reside?	Yes	□ No
2.3.	Have any individuals with an interest in this permit been convicted of a felony or a misdemeanor? (If yes, please attach a letter detailing with conviction, court, date, and sentence information.)		☐ Yes	■ No
2.4.	Have any individuals with an interest in this application ever been convicted of and/or found to have committed at the Indiana Alcoholic Beverage laws, rules, regulations, or orders of the ATC? (If yes, please attach a letter detailing the conviction and/or violation, including permit number(s).)	violation of	☐ Yes	■ No
2.5.	Are any individuals with an interest in this application a law enforcement officer, a non-elected officer of a municion government subdivision, or an officer of the state of Indiana, charged with any duty or function in the enforcement of the Indiana Code?		□Yes	■ No
2.6.	Have any individuals with an interest in this application held a permit under Title 7.1 of the Indiana Code and had revoked within one (1) year prior to the date of this application? (If yes, please provide the permit number(s) and an explanation.)	I the permit	☐ Yes	⊡ No
2.7.	Have any individuals with an interest in this application made an application for an alcoholic beverage permit of a was denied less than one (1) year prior to this application for a permit (unless the application was denied by reas procedural or technical defect)?		☐ Yes	■ No
Megapoonal 400 Tarkerson	Do any individuals, corporations, limited liability companies, limited liability partnerships, partnerships, or stock own partners of such entities have any interest, either directly or indirectly, in any other permits or registrations of any kir Title 7.1 of the Indiana Code connected with, but not limited to, the production, distribution, transportation, or sale of alc If yes, list permits below (Attach additional sheet if necessary.)	id issued under	☐ Yes	■ No
Pern	nit number(s)		neme e redición (Madeiro e	
2.9.	Are you indebted to a person or an officer or agent of that person, who holds a brewer's permit or wholesale per secured by a lien, mortgage, or otherwise upon the premises for which the beer retailers permit is to be applicable of the property or fixtures in the premises, or used, or to be used in connection with the premises?		☐ Yes	■ No

(NOTE: IC 7.1-3	21-8 requires the disclo	sure of each pers	5017 6	who is a	DAVIT OF OWNERSH If will be, financially or b	reneficially Interes	sterf in the as	amit and the business
		The state of the s			ecame effective.)		s avera i sach mana	a at the asset when the
3.1 Complete name Matthew Cha		(Этехности тум отност «Соруши Логович этельного поведу горошего, дове	and the second second second	-	ecosity autope: * 19623	Date of both topoliti 01/19/1988	day, year)	Citizen of United States Yes No
	nd street, city, state, and ZIP	No.No.1		100,0	70020	0111011000	er en kanner er er er i haden antennika om i i i i dane .	Miles Dian
111 E 2nd St	. Madison, IN 47250							
	□ Corporate President	Stockholder						Percent of ownership 50%
Daniel Chanc				Social 6 40529	ecurity number*	Date of birth (2007)	. day. yee	Citizen of United States Yes No
	nd street, city, state and ZIP of Madison, IN 47250					* * * * * * * * * * * * * * * * * * *	THE BASE OF MINISTER AND PROPERTY OF THE	Section 1997 - Company of the Compan
Nature of interest	Corporate President	hermania anno a santantan an angle vitar man sangan		Partner	☐ Corporate Secretary	✓ ☐ Club Officer	☐ Member	Fercent of ownership
3.3 Complete name	and a profession of the profession and a state of the contract of the profession and the	ale - 10 pero (1981) (18 pero de minimo de antico	200.0	Social S	econty number *	Date of birth (month	, day, year	Citizen of United States
Address (number a	nd street, city, state, and ZIP o	ode)		North Carlotte Carlot			44 - Maria (1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 -	☐ Yes ☐ No
	BATTER IN HE HANDShirt I will read pay the control of the control							
Nature of interest Sole Owner		☐ Stockholder		Partner	☐ Corporate Secretary	☐ Club Officer	☐ Member	Percent of ownership
3.4 Complete name		eletti Mit eli mellendepe e mengapara apara apara apara araba araba araba araba araba	The second	Social S	ecurity number *	Date of birth (month	, day, year)	Citizen of United States ☐ Yes ☐ No
Address (number a	nd street, city, state, and टाए ट	cde)	1			Milliania di Albania ay sa citana - Amerikana guyagayaydayoo yoo oo oo	en alle en	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Nature of interest		en e	to this land, and supplies	- Almerton market of acres	er Properties of the Association to the State of the State of the Association of Special State of the State o	Montheydrodia glerroan proprietor, na morrida mana e transpersor, e registro de la compansa de la compansa de c	Ministration of the particular and the particular of the particula	Percent of ownership
Sole Owner 3.5 Complete name	☐ Corporate President	☐ Stockholder			☐ Corporate Secretary			
			6) for refer any consequent	Social S	ecurity number	Date of birth (month.	. da y, year)	Citizen of United States ☐ Yes ☐ No
Address (number ar	od stree: city. state, and ZiP c	oće)		TOTALITY (II) In global V In opposito A	PPOPERTENDING TO AN ARCHARDANCE COME MARKET STATE OF THE	WATER PARTY AND COMPANY AND CO	The state of the s	en ^{te} rreproprier saak te dat hydd dd ddon o me'n daennydd ei cyng ei cyng i'i chwy a b an o a'i b befei ac a a
Nature of interest Sole Owner	☐ Corporate President			Partner	☐ Corporate Secretary	☐ Club Officer	☐ Member	Percent of ownership
3.5 Complete name		t en transfer a south a selektrologic en en en en en en en elektrologic en ele		Social S	acurity number *	Date of birth (month,	day, year	Citizen of United States
Address (number ar	ed street, city state, and ZIP or	ode)		***************************************				∐Yes ∏No
Nature of interest	obych neglegi i kapita tempegiska si saka kana kapita a proposo ya w gasta sikiki ki ki tili siki kali kanabah gapur jang		namenamo a el a	me Mario a Mario de la colora del colora de la colora dela colora de la colora dela colora de la colora dela colora de				Percent of ownership
Sole Owner	☐ Corporate President	☐ Stockholder		-	☐ Corporate Secretary			recent of Ownership
3.7 Complete name			-	Social S	curity number *	Date of birth (month,	day. year)	Citizen of United States ☐ Yes ☐ No
Address (number an	c street, city state, and ZIP co	ode)		e againt the end of the end of the end	CONTRACTOR OF CO	t additionable following in communities with the set in the state and a second and a second and a second and a	TOOL TITLE IS AT AT A BEST SHAPE MAY AND A PROPERTY OF THE	Service Control of the Control of th
Nature of interest								Percent of ownership
☐ Sole Owner 3.8 Complete name	☐ Corporate President	∐ Stockholder	Ц	er er er en manne anne en en en	Corporate Secretary			
	d atra at atr		-	ovuidi di	namely restricted	Date of birth (month,	oay, year)	Citizen of United States Yes No
	d street, city state, and ZIP co	oue)		mana ahan bahar gar m <u>ayanga</u>				
Nature of interest Sole Owner	Corporate President	☐ Stockholder		Partner	☐ Corporate Secretary	Club Officer	☐ Member	Percent of ownership
3.9 Complete name			Tellespeller annual in	Social Se	curity number *	Date of birth (month,	day, year)	Citizen of United States ☐ Yes ☐ No
Address (number an	d street, city, state, and ZIP co	xie)		an anniana angangananya nggapaya) Takan dan dan dan dan dan dan dan dan dan d		and the state of t	Commence of the control of the contr
Nature of interest	Corporate President	☐ Stockholder		Partner	☐ Corporate Secretary	Club Office	[] Manha-	Percent of ownership
	_ vo.porene (represent		1200	en tilei	- oniborate serietary	C Cign Officel	LI merriber	

If you need more space, please attach additional sheets.

SECTION 4. ES	GROW REQUEST	
The permit application process may take up to ninety (90) days, including app beverage hearing in the county, commission meeting approval, and final floor approved and you will not be immediately ready to open to the public upon appoprational status pursuant to IC 7 1-3-1.1. All applicants must answer the following the process of the public and the	plan approval by the Indiana	State Evolge Online Hunor application in
4.1.1 When will the permit premises for which you are applying be ready to o	pen for business?	11/01/2024
		(mm/cld/yy)
4.1.2 If you will not be ready to open to the public within ninety (90) days, ple operational, and provide an estimated timeframe for when the permit will	ase explain the steps you are	taking to make the proposed permit
We plan to be operational and have construction of t	ne bowling and wind	e bar complete by October, we
will then take another 30 days to train staff and build	inventory, prior to d	pening to the public.
SECTION 5. RETAIL (Skip to next section if you are	PERMIT QUESTIONS not applying for a retail per	on the second control of the second control
5.1 MINORS (To be completed by ALL retail permit applicants.)	от на на при трубо на 1996 година (Строна) в вът пристипант в на применения община при на пристипант в на прист	
5.1.1. Will minors be present in the permit premises? (If no. move to next appl	icable section.)	■ Yes □ No
5.1.2. Check the exception to IC 7.1-5-7-10 that allows minors in your permit p	remises. (See IC 7.1-5-7-11	for additional information.)
☐ Civic center	☐ Convention center	
☐ Sports arena	Bowling center	
☐ Bona fide club	☐ Boat	
☐ Dining car	☐ Pullman car	
☐ Club car	 ☐ Passenger airplane	
Automobile racetrack	☐ Satellite facility (as defi	ned in IC 4-31-2-20.5)
Catering half under IC 7.1-3-20-24 that is not open to the public	☐ Entertainment complex	
☐ Indoor golf facility	☐ Indoor theater under IC	7.1-3-20-26
☐ Licensed premises owned or operated by a postsecondary educational institution as described in IC 21-17-6-1.	☐ Horse racetrack facility IC 4-31-5	holding a recognized meeting permit under
Recreational facility (such as a golf course, bowling center, or similar facility) whose principal purpose or function of the business is recreational activity and not the sale of food and beverages	Senior residence facility which alcoholic beverages 7.1-3-1-29	v campus (as defined in IC 7.1-3-1-29(c)) at are given or furnished as provide under IC
☐ Restaurant has full** separation between bar room and family room	☐ No alcoholic beverages accomplished by an emplo	are served across a bar and service is yee
A restaurant, the proprietor of which is the permit holder of a brewery permit issued under IC 7.1-3-2-2(b), that has limited separation***, but is not subject to the minimum gross food sales set forth in 905 IAC 1-41-2	winery permit, that has lim	etor of which is the permit holder of a farm ited separation***, but is not subject to the set forth in 905 IAC 1-41-2.
☐ A restaurant, the proprietor of which is the permit holder of an artisan distiller permit, that has limited separation***, but is not subject to the minimum gross food sales set forth in 905 IAC 1-41-2	☐ The licensed premises 20-29 or a food hall vendor under IC 7.1-5-7-11(a)(30)	of a food half master permit under IC 7.1-3- r permit under IC 7.1-3-20-30 that qualifies
A hotel other than a part of a hotel that is a room in a restaurant in which a bar is located over which alcoholic beverages are sold or dispensed by the drink*	room and has minimum gro	ited*** separation between bar room and family oss food sales of \$200,000 per year or 60% and alcoholic beverage sales
* Please note that you will be required to have full** or limited*** sej may be present in the restaurant and no other exception applies.	paration at any bar that is lo	ocated in a room in a restaurant if minors
** Full separation is a nontransparent wall at least seventy-two (72) feet in width separating the barroom and the family dining room.		or an open archway of no more than five (5)
*** Limited separation is a structure or barrier that reasonably deter	see the second second second	ithout requirement for doors or gates

5.3. BEER, WINE, AND LIQUOR RETAILER RESTAURANT (209) IN UNINCORPORATED AREA (Excluding recreational facilities such as golf courses and tennis clubs)	
5.3.1. For a beer, wine, and liquor retailer in an unincorporated area (also known as a type 209 permit), is your projection that annual gross food sales at the location will exceed not less than \$200,000 by the end of the first two (2) years of operations and annual gross food sales will be at least \$100,000 each year thereafter?	☐ Yes ☐ No
5.4. LIQUOR RETAILER IN INCORPORATED AREA (Does not include beer only, wine only, or beer and wine	retailers.)
5.4.1. Is the proposed permit premises located in an incorporated city having a population of less than 5,000?	☐ Yes ☐ No
5.4.2. If the answer is yes, have you attached to the application the enabling ordinance from the city consenting to the issuance of liquor retailer's permits?	☐ Yes ☐ No
5.5. RETAIL CARRYOUT OF ALCOHOLIC BEVERAGES (Please review State Form 56312 to determine if the applied for permit type qualifies for carryout.)	The internance of the contract section of the contract of the
5.5.1. Do you wish to sell alcoholic beverages for carryout? (If yes, please attach State Form 56312, Carry-out Supplement.) 5.6. CATERING HALL	☐ Yes ☐ No
5.6.1. Are you applying for a special three-way catering hall permit that will allow you to sell alcoholic beverages for on-premises consumption on a premises that is used only for private catered events and has accommodations for at least 250 individuals?	☐ Yes ☐ No
5.7. CLUBS	
5.7.1. If you are applying for a club permit, please check the appropriate box: Social Club Fratern	al Club
5.7.2. If a social club, does your association or organization meet the general requirements of IC 7.1-3-20-1?	☐ Yes ☐ No
5.7.3. If a fraternal club, does your association or corporation meet the general requirements of IC 7.1-3-20-1 and the specific requirements of IC 7.1-3-20-7?	☐ Yes ☐ No
5.7.4. If your club premises is outside the corporate limits, do you meet the requirements of IC 7.1-3-20-3?	☐ Yes ☐ No
5.8. HOTEL / RESORT HOTEL	
5.8.1. If you are applying as a hotel, do you meet the general requirements of IC 7.1-3-20-18?	☐ Yes ☐ No
5.8.2. If you are applying as a resort hotel, do you meet the requirements of 7.1-3-20-21?	☐ Yes ☐ No
5.9. HISTORIC DISTRICT	Alter come contract a state data section and contract the data of a contract of a cont
5.9.1. If you are applying for an historic district permit, is the restaurant located in a district that is on the National Register of Historic Places pursuant to IC 7.1-3-20-16(g) (includes a county courthouse, historic opera house, historic jail and sheriff's house)?	☐ Yes ☐ No
If yes, you must submit the appropriate verification, including a district map identifying the location of your restaurant, an approval letter from a city or town representative that indicates whether the city or town adopted an ordinance that requires a written commitment pursuant to IC 7.1-3-19-17, and a copy of the ordinance creating the district. If the city or town ordinance requires a written commitment, you must also submit a copy of the written commitment.	
5.10. AIRPORT, ECONOMIC REDEVELOPMENT, RIVERFRONT, RAILWAY STATION, MOTOR SPOI DISTRICT, LAKE FRONT, DEVELOPMENT DISTRICT, RENOVATION PROJECT	RTS
5.10.1. If you are applying for a permit authorized by IC 7.1-3-20-16 or IC 7.1-3-20-16.8, do you meet the requirements for the designated permit?	Yes No
5.10.2. Please specify the type of permit for which you are applying: Riverfront (Please see Section 11 for a full list of permit types)	
NOTE: If you are applying for a municipal riverfront/lakefront development permit (IC 7.1-3-20-16(d) and IC 7.1-3-20-16.1) or a lakefront development permit, motorsports development permit IC 7.1-3-20-16(k) or (I)), redevelopment permit (IC 7.1-3-20-16.8), or renovation project (IC 7.1-3-20-16(e)(2)), you must also submit a letter indicating that the statutory requirements have been met and the mayor's approval of the permit, a map of the district identifying the premises location, and a copy of the ordinance creating the district.	
If you are applying for a permit in a publicly owned airport (IC 7.1-3-20-16(b)), union railway station (IC 7.1-3-20-16(c)), railway station (IC 7.1-3-20-16(e)), cultural center (IC 7.1-3-20-16(f)), or redevelopment district (IC 7.1-3-20-16(h) and (i)), please submit supporting documentation showing that your premises is located in a district that meets the qualification of the section authorizing the permit	
If you are applying for a lakefront district permit pursuant to IC 7.1-3-20-16(j) and IC 7.1-3-20-16.2, please submit a map of the district identifying the location of your restaurant, detailed information concerning the expenditures of the state, local, and federal funds on the municipal lakefront development project, and a copy of the local ordinance or resolution authorizing the municipal lakefront development project.	

5.11.1. If you are applying for a boat pern	nit, do you engage in regular passenger service which makes	regular nine
an transferrencemental particularity of the second section of the section of	3-3	regular runs 1
		¢
Permit number(s)		
		Western and
Signature of manager		Date (mm/dd/yy)
	SECTION 8. FLOOR PLAN	
INSTRUCTIONS: All applicants must su	ubmit a floor plan drawing on letter size (8½" x 11") paper attac	
area(s), restrooms, si areas for all types of I NOTE: All drawings must be approved	tifications of any existing family room(s), seating arrangement(torage and office areas, entrances/exits, patios, beer gardens, permits. Please sign and date the drawing. by the Commission before the permit is issued. If you wish to e district office. Contact information for local excise district offi	service windows, and alcoholic beverage displa- receive preliminary approval before construction
	SECTION 9. CERTIFICATION OF APPLICAN	
FALSIFY ANY PORTION OF THIS APPL	ttachments is true and correct. I UNDERSTAND THAT IT IS A LICATION OR ATTACHED DOCUMENTS.	A I PTOLE MADELL THAT LO BUOLITLA POPILE
	ermit term to inspection and search by an enforcement officer,	
premises, any approved satellite facility, a Note: The applicant MUST sign this app	ermit term to inspection and search by an enforcement officer, approved storage facility, and vehicles to determine compliance plication unless the proper Power of Attorney forms are as	e with the provision of Indiana Code 7.1.
premises, any approved satellite facility, a Note: The applipant MUST sign this app Signature of applicant	approved storage facility, and vehicles to determine compliance plication unless the proper Power of Attorney forms are a	e with the provision of Indiana Code 7.1.
premises, any approved satellite facility, a Note: The applicant MUST sign this app Signature of applicant	approved storage facility, and vehicles to determine compliance plication unless the proper Power of Attorney forms are as Date sig	e with the provision of Indiana Code 7.1. ttached to this application. gned (month, day, year) 128124
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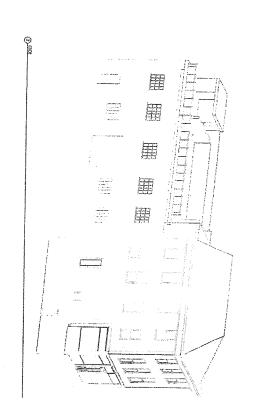
Polyment (1974) - the sufficiency of sciences, e.g. pr. 11		ON 12. PERMIT TYPES		
	Permit Type	The second secon	Fee	Fee Statute
		Beer	\$500	IC 7.1-4-4 1-12
		Beer and wine	\$750	IC 7.1-4-4.1-12
	200 000 000 000	Seer and liquor	\$750	IC 7 1-4-4 1-12
	Drug store (IC 7.1-1-3-15)	Beer and wine	\$750	IG 7 1-4-4 1-12
Dealer Permits		Beer, wine, and liquor	\$1000	IC 7 1-4-4 1-12
		Liquor	\$500	IC 7.1-4-4.1-12
	a characteristic for the annual control of the cont	Wine and liquor	\$750	IC 7.1-4-4.1-12
	Grocery store (IC 7.1-1-3-18.5)	Seer	\$500	IC 7.1-4-4.1-12
		Beer and wine	\$750	
	Package liguor store (IC 7.1-3-10-4)	Beer, wine and liquor	\$1000	IC 7.1-4-4.1-12
	A COMMISSION OF THE PARTY OF TH	Beer	\$500	IC 7 1-4-4 1-12
		Wine	 Sind to the office and on a contract and on a contract and of the contract and on the contrac	IC 7.1-4-4.1-9
		Beer and wine	\$500	IC 7.1-4-4.1-9
	Restaurant (IC 7 1-3-20-9)		\$750	IC 7.1-4-4.1-9
		Beer, wine and liquor unincorporated (209)	\$1000	IC 7 1-4-4 1-9
		Beer, wine, and liquor incorporated (210)	\$1000	IC 7 1-4-4:1-9
		Beer, wine and liquor incorporated – small	\$1000	IC 7.1-4-4.1-9
	Experience of the contract of	city (210-1)	and the same of th	10 1.1-4-1.1-9
	Social club (IC 7 1-3-20-1)	Beer	\$500	IC 7.1-4-4 1-9
		Beer and wine	\$750	IC 7.1-4-4 1-9
	The second secon	Beer, wine, and liquor	\$1000	IC 7.1-4-4 1-9
	Civic center (IC 7.1-3-1-25), malls (IC 7.1-3-20-	Beer	\$500	IC 7.1-4-4.1-9
	24.4), and market (IC 7.1-3-20-25)	Beer and wine	\$750	IC 7.1-4-4.1-9
	A CONTROL OF THE PARTY OF THE P	Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9
	Fraternal club	Beer	\$250	IC 7.4-4-4.1-10
	Fratemat Club	Beer and wine	\$250	IC 7.4-4-4.1-10
	The control of the state of the	Beer, wine, and liquor	\$250	IC 7.4-4-4.1-10
	Historic district (IC 7.1-3-20-16(g))	Beer and wine	\$750	IC 7.1-4-4.1-9
	The same of the sa	Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9
		Beer, wine, and liquor - Jeffersonville or	i	
	Economic redevelopment (IC 7.1-3-20-16(h) & (i))	Clarksville (IC 7.1-3-20-16(h))	\$1350	IC 7.1-3-20-16(h
	(10)	Beer, wine, and liquor - Portage (IC 7.1-3-		Control of the Contro
	And the same of th	20-16(i)	\$1000	IC 7.1-4-4.1-9
	Hotel (IC 7.1-3-20-18)	Beer and wine retailer	\$750	IC 7.1-4-4.1-9
		Beer, wine, and liquor retailer	\$1000	IC 7.1-4-4.1-9
	Motor sports district (IC 7.1-3-20-16(k) and (f))	Beer, wine, and liquor	\$1000	
	Airport / railway (IC 7.1-30-20-16(b), (c), and (e))	Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9
	State park	Beer, wine, and liquor	\$250	IC 7.4-4-4.1-9
	Dining car (IC 7.1-3-6-6, IC 7.1-3-16-1, IC 7.1-3-	Wine retailer	\$500	IC 7.1-4-4.1-9(d)
etail Permits	11-1)	Beer wine, and liquor	\$500	IC 7.1-4-4.1-11
, , , , , , , , , , , , , , , , , , ,	Fig. 4. (10 % 4.0.0.4%)	Beer		IC 7.1-4-4 1-11
	Race track (IC 7.1-3-6-16, IC 7.1-3-14-6)	Beer and wine	\$500	IC 7.1-4-4.1-9
	Excursion boat (IC 7.1-3-11-9, IC 7.1-3-6-11, IC	Deer are wine	\$750	IC 7.1-4-4.1-9
ry new house	7.1-3-16-3)	Beer, wine, and liquor	\$500	IC 7.1-4-4.1-11
}	Gaming site (IC 7.1-3-17.5)	Beer, wine, and liquor	\$25,000	905 IAC 1-43.1-2
}-	State fair (IC 7.1-3-21-14)	Beer, wine, and liquor	\$0	IG 7.1-3-21-14
ļ	Catering hall (IC 7.1-3-20-24)	Beer, wine, and tiquor	\$1000	IC 7.1-4-4.1-9
-	Horse track (IC 7.1-3-17.7)	Beer, wine, and liquor	\$4000	905 IAC 1-39-1
eront-	Horse track satellite facility (IC 7.1-3-17.7)	Beer, wine, and liquor	\$2000	905 IAC 1-39-1
	Development district (IC 7.1-3-20-16.8)	Beer, wine, and liquor	\$1000	
-	Riverfront (IC 7.1-30-20-16(d)) and lakefront (IC	Beer and wine	\$750	IC 7.1-4-4.1-9
į.	7.1-3-20-16(i))	Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9
Olevania Visitation		Food hall master permit beer, wine, and	\$5000 annual	IC 7.1-4-4.1-9
		liquor	renewal fee	IC 7.1-4-4.1-20
		Food hall vendor beer – less than 1000	\$1000 annual	IC 7.1-4-4.1-21
		square feet Food hall vendor beer and wine less than	renewal fee	100 / 100000 102
		1000 square feet	\$1000 annual renewal fee	IC 7.1-4-4.1-21
1	Food hall (IC 7.1-3-20-29 to 30)	Food hall vendor beer, wine, and liquor -	\$1000 annual	
about the same of	. 555 1160 (15 7.1-5-20-28 (0 30)	less than 1000 square feet	renewal fee	IC 7.1-4-4.1-21
1		Food hall vendor beer - 1000 to 2500	\$1000 annual	
		square feet	renewal fee	IC 7.1-4-4.1-21
	Videorocci	Food hall vendor beer and wine - 1000 to	\$1000 annual	IC 7.1-4-4.1-21
part livery,	a constant of the constant of	2500 square feet	renewal fee	· · · · · · · · · · · · · · · · · · ·
9	Army Army Army Army Army Army Army Army	Food half vendor beer, wine, and liquor -	\$1000 annual	10744440
ļ		1000 to 2500 square feet	renewal fee	IC 7.1-4-4.1-21
	Renovation (IS 7.4.2.20 accounts	Beer	\$500	IC 7 1-4-4.1-9
r capital con	Renovation (IC 7.1-3-20-16(e)(2))	Beer and wine	\$750	IC 7.1-4-4.1-9
		Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9

<u>Vintage Lanes Improvement Plan</u>

Vintage Lanes is undergoing comprehensive rehabilitation to bring new life to these historic buildings. Our plans include modern updates such as HVAC, plumbing, electric, and insulation to ensure a comfortable and efficient space. Additionally, we're restoring each building's architectural integrity with window restoration, tuckpointing, and exterior repairs. The interior will feature two levels of duckpin bowling lanes and a chic wine bar, creating a vibrant and inviting atmosphere by November 2024. As we move forward, our focus will extend to constructing an apartment and rooftop terrace, adding luxurious amenities for our guests by Q1 2025. This phased approach ensures that each aspect of Vintage Lanes receives meticulous attention, culminating in a one-of-a-kind entertainment destination.

DRAWING LIST T1 TITLE SHEET LS1 LIFE SAFETY PLAN A1 FLOOR PLANS A2 FLOOR PLANS A3 RCP A4 ELEVATIONS A5 ELEVATIONS A6 ELEVATIONS A6 ELEVATIONS A7 BUILDING SECTIONS A8 BUILDING SECTIONS S0 ROOF DECK STRUCTURAL S1 ROOF DECK BEAM ELEVATION MEPO MEP PLANS MEP1 MEP PLANS (A) CHANGE OF OCCUPANCY & REMODEL OF AN EXISTING BUILDING LETTERSON STREET MADISON, INDIANA ARCHITECT: DONALD K BALL 823 WALNUT STREET MADISON, INDIANA 812 599 1998 (n)

8 5/28/24



JEFFERSON STREET

200

SECOND STREET

Title Sheet

MATT CHANDLER & DANIEL SELTER

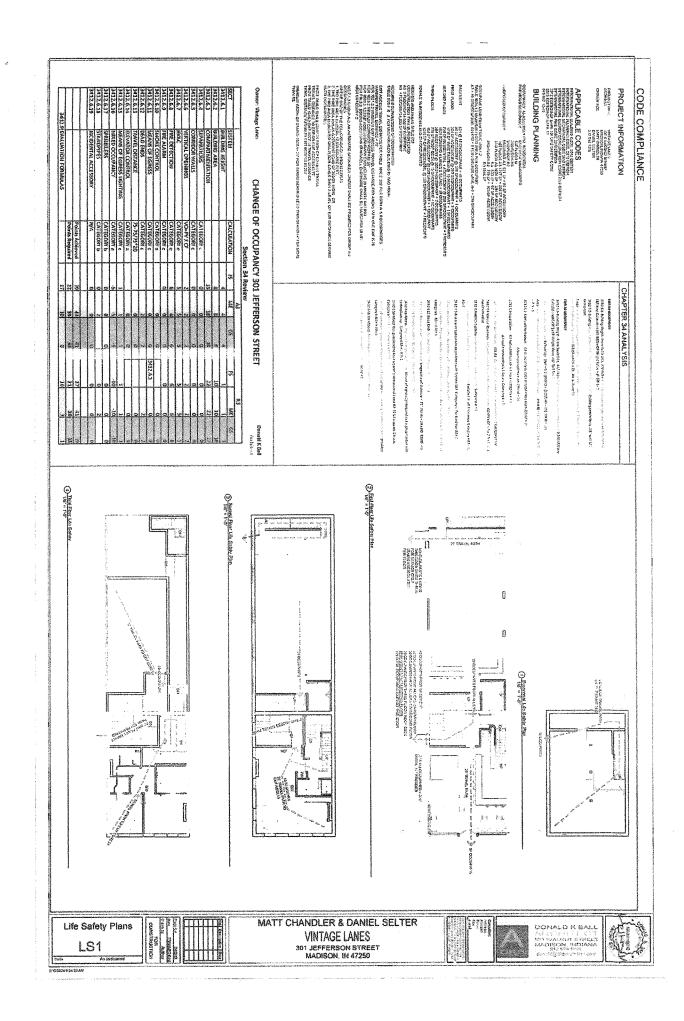
VINTAGE LANES 301 JEFFERSON STREET MADISON, IN 47250

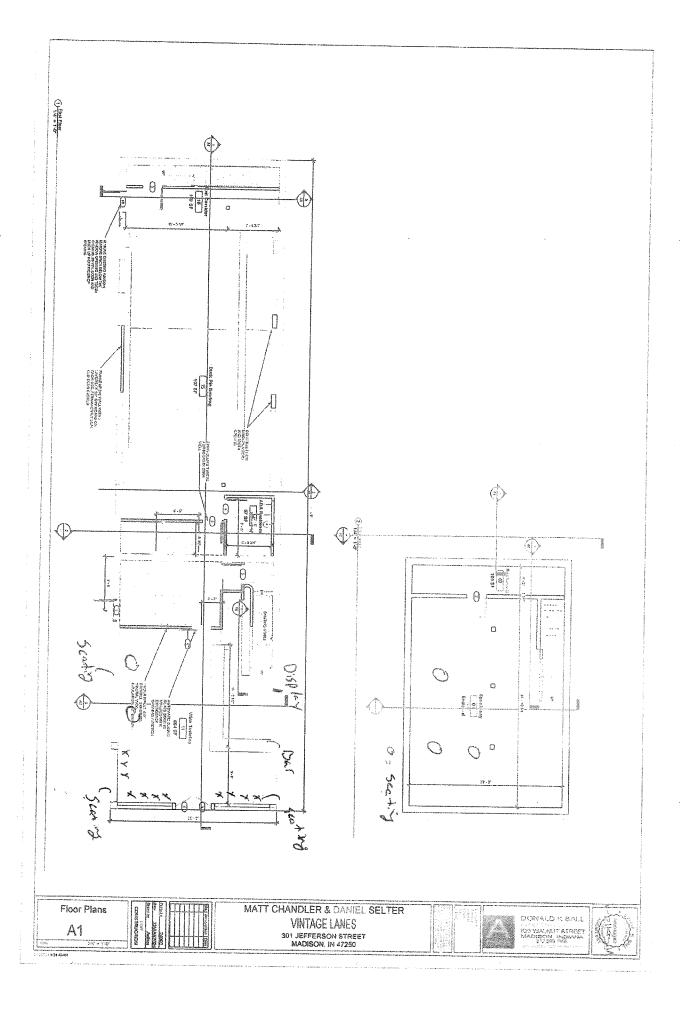


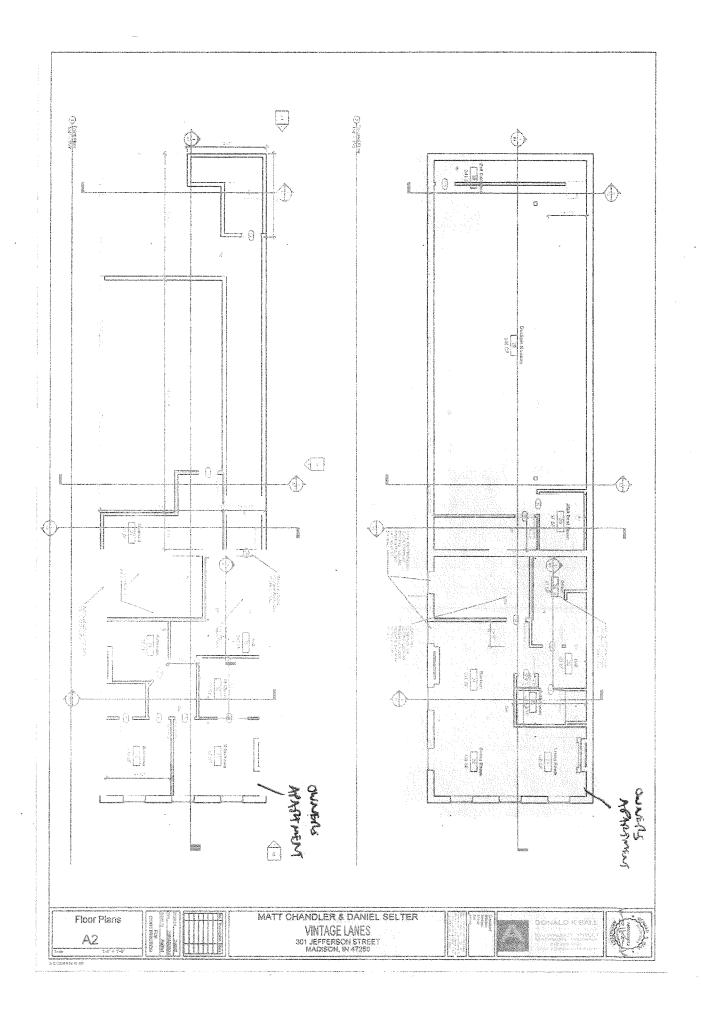


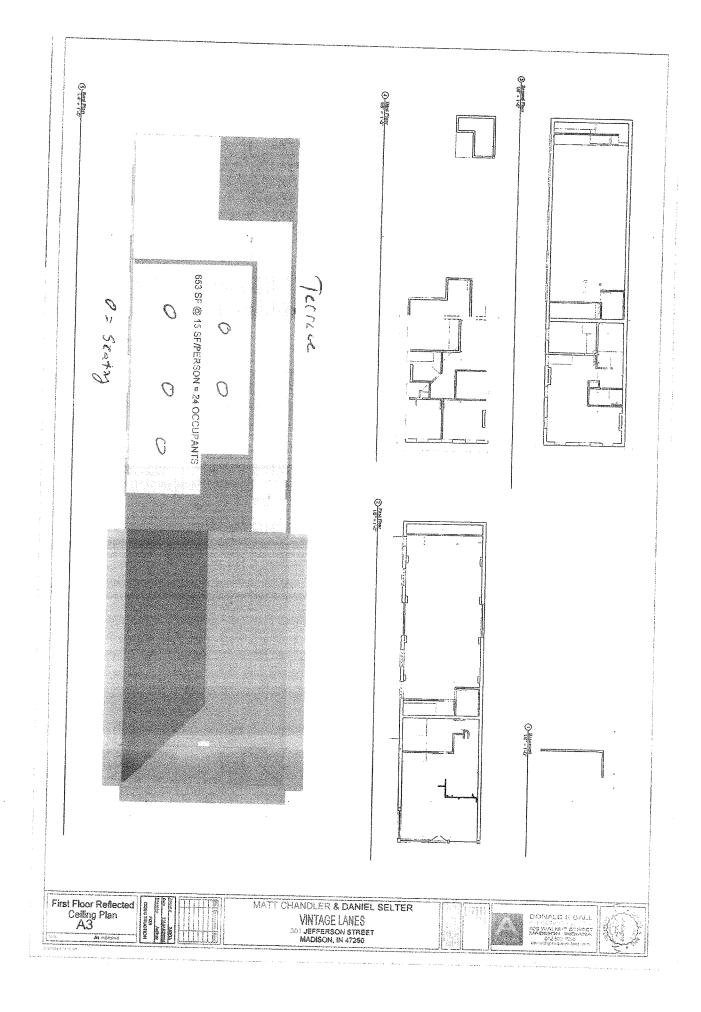


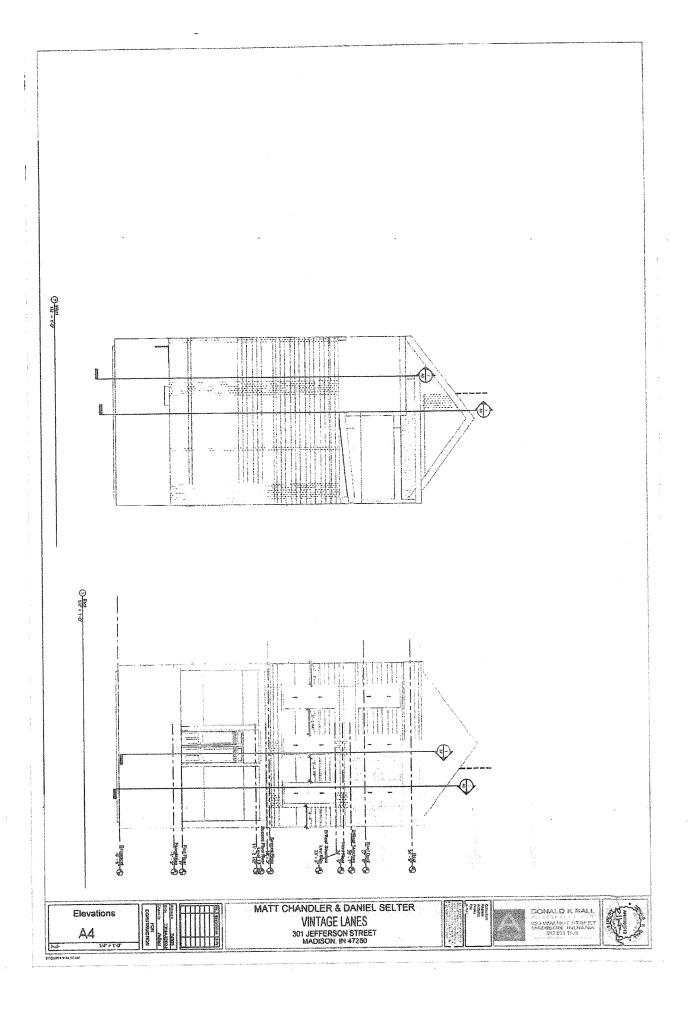


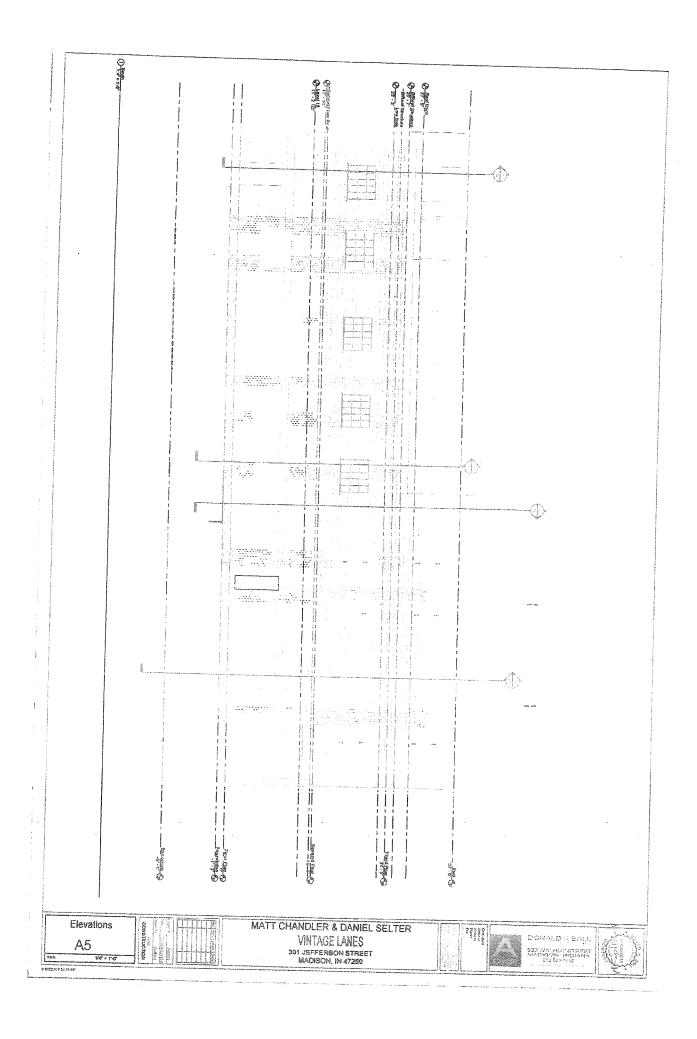


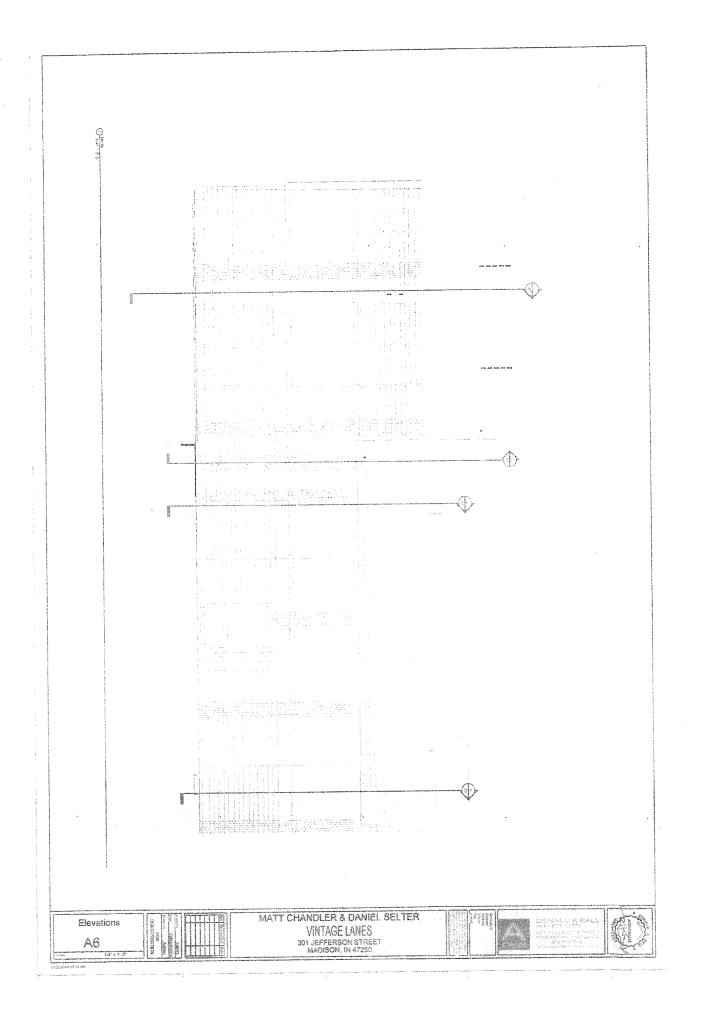


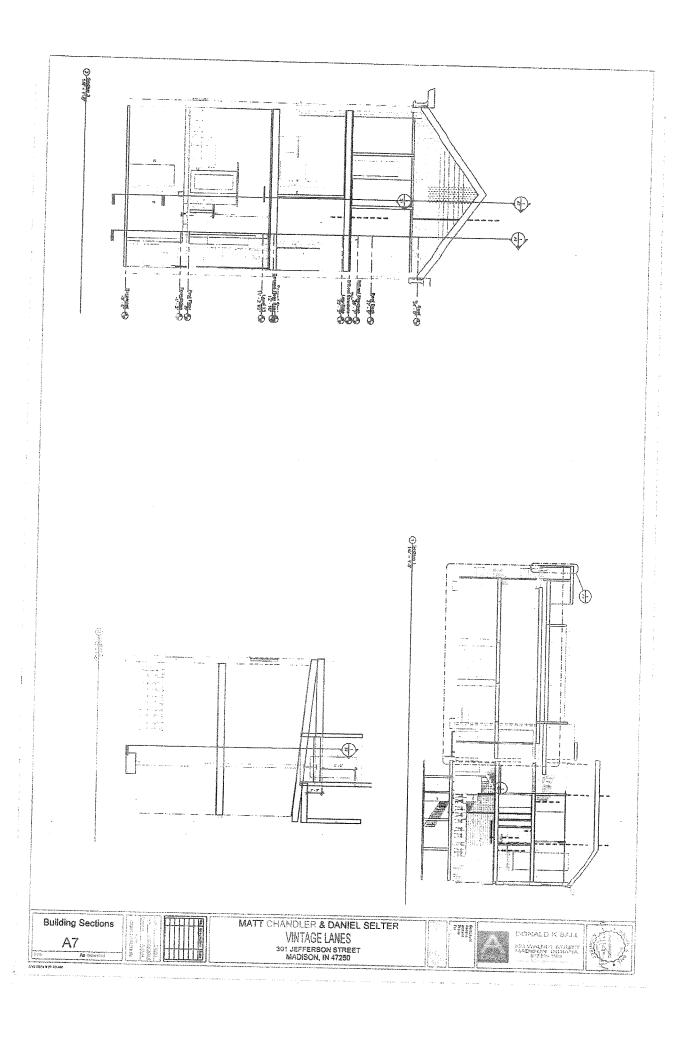


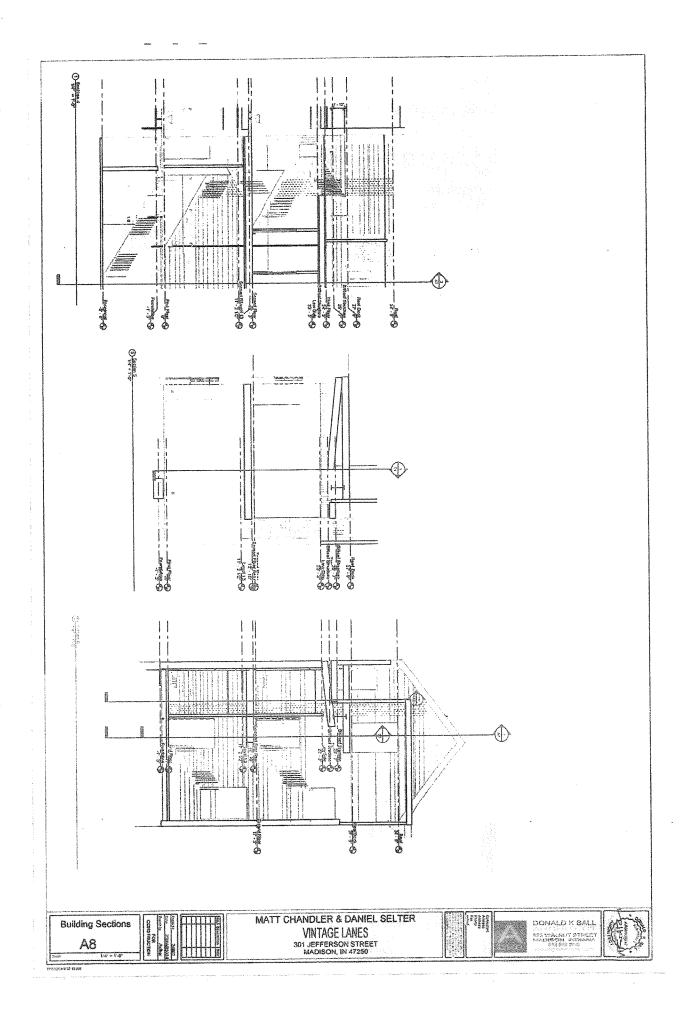






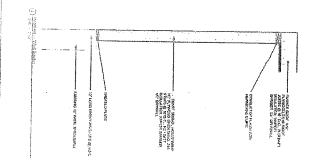






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VANDERS AND PRAME & COCKE PRAME ENCODE PRAME	-	٥	Ĭ		-	*	-	F		G	m	7	×	ľ	-	Ī	G			Ì	1	7	٥	1		Σ	7	ń	Mardu	-
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Wall Sections

FOR COMETRUCTION

MATT CHANDLER & DANIEL SELTER
VINTAGE LANES
301 JEFFERSON STREET
MADISON, IN 47250

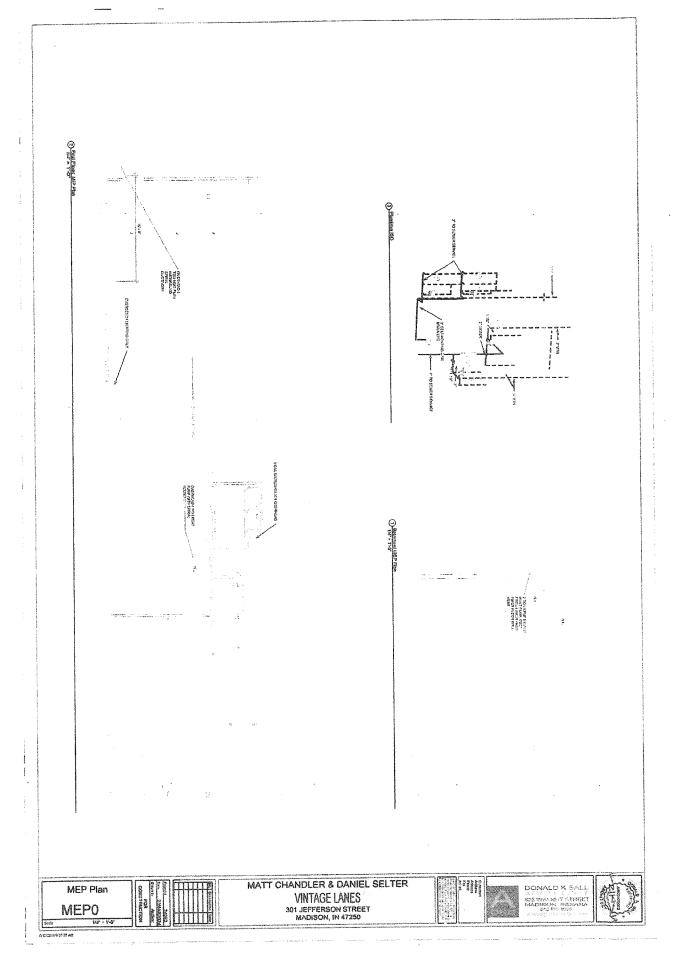


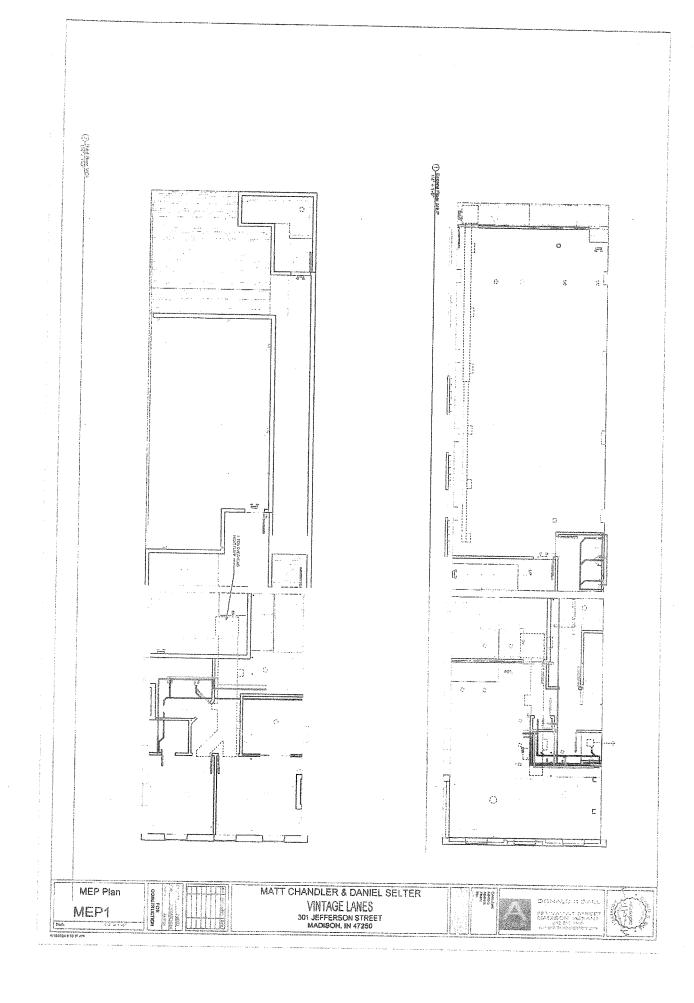
DONALD K BALL (1000) 023 WAS NOT STREET MADINDS INCHAMA S1886 BA



MATT CHANDLER & DANIEL SELTER VINTAGE LANES 301 JEFFERSON STREET MACHSON, IN 47256 Roof Deck Structural

Roof Deck Beam Elevation S1 MATT CHANDLER & DANIEL SELTER VINTAGE LANES 301 JEFFERSON STREET MADISON, IN 47250







2024 Tax Abatements

All six of our tax abatements have been reviewed by the Economic & Redevelopment Office and are in substantial compliance for 2024.

Personal Property

Grote:

Employees and Salaries	As Estimated on SB-1	Actual
Current Number of	477	480
Employees		Epilotefroni i mirrulatiri
Salaries	\$32,082,098	\$36,895,700
Number of Employees	477	477
Retained	Feli ne lamentia al	Statute and Behaviores
Salaries	\$32,082,098	\$32,082,098
Number of Additional	15	15
Employees	and thinks	PARTIE .
Salaries	\$780,000	\$4,813,602
Cost and Values	As Estimated on SB-1	Actual
Value of Proposed Project	\$210,000	\$851,057
(Manufacturing	CARLES THE LAND OF	STATE OF THE PARTY
Equipment)	Sat Proper	
Net Value upon Project	\$210,000	\$851,057
Completion		
Value of Proposed Project	\$350,000	\$86,683
(IT Equipment)		
Net Value upon Project	\$350,000	\$86,683
Completion		The parameter and the parameter of the p
Employees and Salaries	As Estimated on SB-1	Actual



Current Number of	426	480
Employees		
Salaries	\$27,592,559	\$36,895,700
Number of Additional	35	30
Employees		
Salaries	\$1,670,032	\$1,207,972
Cost and Values	As Estimated on SB-1	Actual
Net Value upon project	\$4,087,022	\$4,581,477
completion		
(Manufacturing		
Equipment)		
Net Value upon project	\$548,940	\$326,384
completion (Logistical		
Equipment)		i-mailment to many 14
Employees and Salaries	As Estimated on SB-1	Actual
Current Number of	405	480
Employees		
Salaries	\$18,061,056	\$36,895,700
Number of Additional	30	5
Employees		
Salaries	\$1,277,952	\$240,717
Cost and Values	As Estimated on SB-1	Actual
Net Value Upon Project	\$2,054,305	\$90,832
Completion	NORTH PARTY I	Augland

US Premier Tube:

Employees and Salaries	As Estimated on SB-1	Actual
Current Number of	88	116
Employees		
Salaries	\$4,200,000	\$7,707,451



Number of Employees	88	82
Retained		
Salaries	\$4,200,000	\$6,537,096
Number of Additional	19	34
Employees	00.4	The section of the section of
Salaries	\$578,000	\$1,170,355
Cost and Values	As Estimated on SB-1	Actual
Value of Proposed Project	\$1,818,446	\$2,704,082
(Manufacturing	VERDERAL 2	toward etailed node.
Equipment)	CO 000, 16, 67 C	Peresion (Translate)

Vehicle Service Group:

Employees and Salaries	As Estimated on SB-1	Actual
Current Number of	410	471
Employees	And regularing the bear	demand and fill married with
Salaries	\$22,539,122	\$26,740,83
Number of Employees	410	471
Retained		
Salaries	\$22,539,122	\$26,740,830
Number of Additional	15	61
Employees		amprolipped y
Salaries	\$584,250	\$4,201,708
Cost and Values	As Estimated on SB-1	Actual
Value of Proposed Project	\$2,800,000	\$2,994,171



Real Property

Fairfield Inn & Suites (Cotton Mill):

Employees and Salaries	As Estimated on SB-1	Actual
Current number of	40	43
employees	000;8787	28100182
Salaries*	\$800,000.00	\$609,511.00
Cost and Values	As Estimated on SB-1	Actual
Values before project	\$1,450,000.00	\$1,450,000.00
Values of proposed	\$14,550,000.00	\$13,800,000.00
project		
Values of any property		\$450,000.00
being replaced		
Net values upon project	\$16,000,000.00	\$13,800,000.00
completion	X	

^{*}The Cotton Mill has more part-time employees than full-time, so that accounts for the discrepancy with the salary numbers.

Riverside Tower:

Employees and Salaries	As Estimated on SB-1	Actual
Number of Additional	1	1
Employees		
Salaries	\$40,420.00	\$40,420.00
Cost and Values	As Estimated on SB-1	Actual Zaulav hmrigo
Values of proposed	\$8,445,303.00	\$8,445,303.00
project		
Net values upon project	\$8,445,303.00	\$8,445,303.00
completion		



Trilogy-Riverside Terrace:

Employees and Salaries	As Estimated on SB-1	Actual
Number of Additional	100	107
Employees		
Salaries	\$2,700,000.00	\$2,800,408.62
Cost and Values	As Estimated on SB-1	Actual
Value of proposed project	\$15,100,000.00	\$15,020,367.22
Net Value upon project	\$15,100,000.00	\$15,020,367.22
completion		



May 15, 2024

CERTIFIED MAIL # 7020181000232434856
Return Receipt Requested

Common Countil of the City of Madison 101 West Main Street Madison, IN 47250

RE:

Annual Filings - Compliance with Statement of Benefits

Grote Industries, LLC

2600 Lanier Dr, Madison IN

Dear Members of the County Council:

Please find enclosed the 24p25 Form CF-1 for the real property abatement for 2600 Lanier Drive in Madison IN. I have attached the SB-1 that was filed when the abatement was originally granted. We are also submitting this filing to the Jefferson County Auditor.

Please call if you have any questions or require additional information.

Cordially

Steve Brunson
Vice President, Credits & Incentives
(317)596-3260 ext. 2437
sbrunson@dmainc.com

Enclosures



COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

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

PRIVACY NOTICE

FORM CF-1 / PP

2024 PAY 2025

- State Form 51765 (R7 / 12-22)
 Prescribed by the Department of Local Government Finance
 - Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which
 - Property owners wrose statement of benefits was approved must me true form with the roll besignating door to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
 This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date

of each year. 3. With the approval of the	e designating b	ody, compliance	information fo	r multiple project	s may be con	solidated on one (1) compliance	form (CF-I).
SECTION 1		TAX	PAYER INFO	DRMATION				
Name of taxpayer Grote Industries, LLC						County Jeffer	son	
Address of Taxpayer (street and number, city, s	tate and ZIP co	ode)				DLGF Taxin	g District Num	ber
2600 Lanier Dr Madison IN 47250						39007		
Name of Contact Person	······································		T	elephone Numbe	ır	Email Addre	SS	
Brian Blanton				(812) 273-	8604	1	blanton@gr	ote.com
SECTION 2	LO	CATION AND D	ESCRIPTION	OF PROPERTY				
Name of Designating Body Common Council of the Cit	y of Mad	dison		Resolution Number 024-3C	er	Estimated Sta 12/31/2	art Date (mont 2023	h, day, year)
Location of Property 2600 Lanier Dr Madison IN	ive 17250					Actual Start [ate (month, da	ay, year)
Description of new manufacturing equipment, or technology equipment, or new logistical distribution	new research a on equipment t	and development o be acquired.	equipment, o	r new information		Estimated Co	mpletion Date	(month, day, ye
						Actual Compl	etion Date (mo	onth, day, year)
SECTION 3		EMPLOY	EES AND SA	LARIES				
ЕМР	LOYEES AND	SALARIES			AS	ESTIMATED ON SB	-1 A	CTUAL
Current Number of Employees						47	7	480
Salaries						32,082,098	3 :	36,895,700
Number of Employees Retained		· · · · · · · · · · · · · · · · · · ·				477		477
Salaries		~~~	·····			32,082,098	3 :	32,082,098
Number of Additional Employees						15	·	3
Salaries ·						780,000)	4,813,602
SECTION 4			AND VALUE	S				
		CTURING	R & D EC	DUIPMENT	LOGI: EQUI	ST DIST PMENT	IT EQU	IPMENT
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSEI VALUE
Values Before Project								
Plus: Values of Proposed Project	210,000		700,000				350,000	
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	210,000		700,000				350,000	
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	cost	ASSESSED VALUE
Values Before Project								
Plus: Values of Proposed Project	851,057	479,138					86,683	48,80
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	851,057	479,138					86,583	48,80
NOTE: The COST of the property is confidential								
		ED AND OTHER		PROMISED BY	THE TAXPAY	ER		
	ERTED AND	OTHER BENEFI	TS		AS	STIMATED ON SB	1 A	CTUAL
Amount of Solid Waste Converted					<u> </u> .			
Amount of Hazardous Waste Converted								
Other Benefits:								
SECTION 6			ER CERTIFIC	ATION				
boroby partify that the serves stations in this state	amont are true							
hereby certify that the representations in this states Signature of Authorized Representative Such Blanton	ement are true		Title				***************************************	

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12-5.9)

- 1. 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.
- 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 compy 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 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.

	ave reviewed the CF-1 and find that	d:			
	The property owner IS in substa	antial compliance			
\neg	The property owner IS NOT in:		······		
-	me property owner to see a ser-	audamia compiance	<u> </u>		
믜	Other (specify)				
Reaso	ons for the Determination (attach a	additional sheets if necessa	ury)		
one seeds					
Signat	ure of Authorized Member				Date Signed (month, day, year)
Atteste	ad By:		 	Designating Body	
If the	property owner is found not to	be in substantial comm	oliance the pror	party owner shall receive the o	
follow	ring date and time has been se	et aside for the purpose	of considering	compliance.	pportunity for a nearing. The
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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

- 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 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.

 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.

 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. 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. 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)
- 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) 5.

Name of taxpayer Grote Industries, LLC Address of taxpayer (street and number, city, state, ZIP code) 2600 Lanier Dr Madison IN 47250 SECTION 2 LOCATION AND DESCRIPTION OF PROPOSED PROJECT Name of designating body Common Council of the City of Madison Location of property 2600 Lanier Drive Madison IN 47250 Description of manufacturing equipment and/or information technology equipment and/or logistical distribution equipment and/or information technology equipment (Use additional sheets if necessary) SECTION 3 ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT Current number 477 Salaries 32,082,098 Number retained And Proposed P	Grote Industries, LLC Address of taxpayer (street and number		TAX	PAYER INF	ORMA	TION					
Address of taxpayer (street and number, city, state, ZIP code) 2600 Lanier Dr Madison IN 47250 Telephone number (812) 273-8604	Address of taxpayer (street and number						าก				
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Name of designating body Common Council of the City of Madison Location of property 2600 Lanier Drive Madison IN 47250 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) Manufacturing Equipment 12/31/2023 12/31/2026	SECTION 2	LOG	CATION AND DES	CRIPTION	OF PE	OPOSED PRO	JECT	, , , -			
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and/or logistical distribution equipment and/or information technology equipment (Use additional sheets if necessary) Manufacturing Equipment 12/31/2023 12/31/2026 R & D Equipment 12/31/2023 12/31/2026 Logist Dist Equipment 12/31/2023 12/31/2026 T Equipment 12/31/2023 12/31/2026 SECTION 3	1 1 2	dison IN	J 47250		1	,			strict number		
Start Date Completion Date	Description of manufacturing equipment	and/or research a	ınd development ed	quipment			*****		ESTIMATED		
Manufacturing Equipment 12/31/2023 12/31/2026 R & D Equipment 12/31/2023 12/31/2026 Logist Dist Equipment 12/31/2023 12/31/2026 Logist Dist Equipment 12/31/2023 12/31/2026 IT Equipment 32/31/2023 12/31/2026 IT Equipment 32/31/2026 IT Equipment 32/31/2023 12/31/2026 IT Equipment 32/31/2023 32/31/2026 IT Equipment	(Use additional sheets if necessary)	id/or information t	technology equipme	ent				Start Date	Corr	pletion Date	
Logist Dist Equipment 12/31/2023 12/31/2026 TF Equipment 12/31/2023 12/31/2026 SECTION 3						Manufacturing	g Equipment			· · · · · · · · · · · · · · · · · · ·	
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SECTION 3 Current number 477 Salaries 32,082,098 Number retained 477 Salaries 32,082,098 Number retained 477 Salaries 32,082,098 Number additional 581						Logist Dist Ed	uipment *	12/31/202	23 12/3	31/2026	
Current number 477 Salaries 32,082,098 Number retained 477 Salaries 32,082,098 Number additional 15 Salaries 780,000 SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. Cost Assessed Value Cost Assessed Value Cost Value C						IT Equipment	•	12/31/202	23 12/3	31/2026	
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SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. MANUFACTURING EQUIPMENT Cost Assessed Value Cost Assessed Value Cost Assessed Value Cost Value Cost Assessed Value Cost Assessed Value Cost Value Cost Assessed Value Cost Value	Current number Salaries					es	Numb	er additional	1		
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COST of the property is confidential. Cost Assessed Value Cost Assessed Value Cost Valu											
Current values Value Cost Value Value Value Value Value			QUIPMENT		EQ			IPMENT	IT EQU		
Plus estimated values of proposed project		Cost		Cos	t	Assessed Value	Cost		Cost		
Plus estimated values of proposed project 210,000 700,000 350,000											
	Plus estimated values of proposed project	210	0,000	70	000,00				350,000		
Less values of any property being replaced											
Net estimated values upon completion of project 210,000 700,000 350,000	Net estimated values upon completion of p	project 210	0,000	76	0,000				350,000		
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER	SECTION 5	WASTE CONV	VERTED AND OT	HER BENEI	ITS P	ROMISED BY	THE TAXPA	/ER			
Estimated solid waste converted (pounds) Estimated hazardous waste converted (pounds)		-1		Fetima	ted ha	zardous waste	converted (p	ounds)			
Other benefits:		り		Louina							
	Estimated solid waste converted (pounds	5/		LStilla							
	Estimated solid waste converted (pounds	5/		Louina				750005100510050000000000000000000000000			
TAN ATEN CENTIFICATION	Estimated solid waste converted (pounds Other benefits:	5)									
	Estimated solid waste converted (pounds Other benefits: SECTION 6				TIFICA	TION			-		
Signature of authorized representative Date signed (month, day, year) 5/15/2024	Estimated solid waste converted (pounds Other benefits: SECTION 6 I hereby certify that the representation				TIFICA	TION		I Date simed			
Printed name of authorized representative Title	Estimated solid waste converted (pounds) Other benefits: SECTION 6 I hereby certify that the representation Signature of authorized representative				TIFICA	TION		_		vear)	
Brian Blanton CFO	Estimated solid waste converted (pounds) Other benefits: SECTION 6 I hereby certify that the representative Signature of authorized representative Bush Blanton	ons in this state						_		vear)	

	FOR USE OF THE DESIGNATING BODY
ad	e have reviewed our prior actions relating to the designation of this economic revitalization area and find that the applicant meets the general standards topted in the resolution previously approved by this body. Said resolution, passed under IC 6-1.1-12.1-2.5, provides for the following limitations as thorized under IC 6-1.1-12.1-2.
A.	The designated area has been limited to a period of time not to exceedcalendar years * (see below). The date this designation expires is NOTE: This question addresses whether the resolution contains an expiration date for the designated area.
В.	The type of deduction that is allowed in the designated area is limited to:
	 Installation of new manufacturing equipment; Installation of new research and development equipment; Installation of new logistical distribution equipment. Installation of new logistical distribution equipment. Installation of new information technology equipment; Yes No Approved for one or more of these types.
C.	The amount of deduction applicable to new manufacturing equipment is limited to \$ cost with an assessed value of \$ (One or both lines may be filled out to establish a limit, if desired.)
D.	The amount of deduction applicable to new research and development equipment is limited to \$ cost with an assessed value of \$ (One or both lines may be filled out to establish a limit, if desired.)
Ε.	The amount of deduction applicable to new logistical distribution equipment is limited to \$cost with an assessed value of \$(One or both lines may be filled out to establish a limit, if desired.)
F.	The amount of deduction applicable to new information technology equipment is limited to \$ cost with an assessed value of \$ (One or both lines may be filled out to establish a limit, if desired.)
G.	Other limitations or conditions (specify)
H.	The deduction for new manufacturing equipment and/or new research and development equipment and/or new logistical distribution equipment and/or new information technology equipment installed and first claimed eligible for deduction is allowed for:
	☐ Year 1 ☐ Year 2 ☐ Year 3 ☐ Year 4 ☐ Year 5 ☐ Enhanced Abatement per IC 6-1.1-12.1-18 ☐ Year 6 ☐ Year 7 ☐ Year 8 ☐ Year 9 ☐ Year 10 Number of years approved: (Enter one to twenty (1-20) years; may not exceed twenty (20) years.)
	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.
Als	o we have reviewed the information contained in the statement of benefits and find that the estimates and expectations are reasonable and have ermined that the totality of benefits is sufficient to justify the deduction described above.
oprove	d: (signature and title of authorized member of designating body) Telphone number Date signed (month, day, year)
rinted	name of authorized member of designating body Name of designating body
tested	by: (signature and title of attester) Printed name of attester
mm.j	'If the designating body limits the time period during which an area is an economic revitalization area, it does not limit the length of time a taxpayer is entitled to receive a deduction to a number of years designated 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.

(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.



COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

PRIVACY NOTICE

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

FORM CF-1 / PP

2024 PAY 2025

INSTRUCTIONS:

State Form 51765 (R7 / 12-22)
Prescribed by the Department of Local Government Finance

- 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)
- This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, 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.

With the approval of the SECTION 1	- Josephannig L				s may be cons	ondated on one	(1) compilant	e ioitti (GF-I).
Name of taxpayer		TAX	(PAYER IN	FORMATION				
Grote Industries, LLC						County Jeffer	son	
Address of Taxpayer (street and number, city, so	tate and ZIP co	ode)	***				g District Nu	mber
Madison IN 47250						39007		
Name of Contact Person				Telephone Number	-	F		
Brian Blanton				(812) 273-		Email Addre	: ss .blanton@g	rote.com
SECTION 2	LC	CATION AND D	ESCRIPTIO	N OF PROPERTY		_1		
Name of Designating Body Common Council of the Cit				Resolution Number 5-2018		Estimated St	art Date (mo 2018	nth, day, year)
Location of Property 2600 Lanier Dr Madison IN 4	rive 17250					Actual Start (Date (month,	day. year)
Description of new manufacturing equipment, or	new research a	and development	equipment.	or new information				te(month, day, ye
technology equipment, or new logistical distribution See attached	on equipment t	to be acquired.	1. 1.			12/31/	2019	
						Actual Comp 12/31/	letion Date <i>(n</i> 2019	nonth, day, year)
SECTION 3			EES AND S	ALARIES				
·	LOYEES AND	SALARIES			AS E	STIMATED ON SE	3-1	ACTUAL
Current Number of Employees			····			42	6	480
Salaries	****					27,592,55	9	36,895,700
Number of Employees Retained				****				
Salaries								
Number of Additional Employees						3.	5	30
Salaries						1,670,03	2	1,207,972
SECTION 4		COST	AND VAL	JES				
		CTURING PMENT	R&DE	QUIPMENT	LOGIS' EQUIP		IT EQ	UIPMENT
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSE VALUE
Values Before Project								
Plus: Values of Proposed Project	4,087,022				548,940			
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	4,087,022				548,940			
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSEI VALUE
Values Before Project	4,581,477	908,781			326,384	84,145		
Plus: Values of Proposed Project			~····					
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	4,581,477	908,781	·		326,384	84,145		
NOTE: The COST of the property is confidential	pursuant to IC	6-1.1-12.1-5.6 (c).	•				
SECTION 5 WAS	TE CONVERT	ED AND OTHER	BENEFITS	PROMISED BY	HE TAXPAYE	R		
WASTE CONV	ERTED AND	OTHER BENEFI	rs		AS ES	TIMATED ON SB	-1 /	CTUAL
Amount of Solid Waste Converted								
Amount of Hazardous Waste Converted								
Other Benefits:								
					1		-	
SECTION 6			R CERTIFI	CATION				
IECTION 6 hereby certify that the representations in this state lignartyre of Authorized Representative	ement are true		R CERTIFI	CATION				

ATTACHMENT TO FORM CF-1, page 1, Section 2

Name of taxpayer

Grote Industries, LLC

	LOCATION AND DESCRIPTION OF PROPERTY ad/or new manufacturing equipment to be acquired	
	ications of existing facility to allow high	volume production
of the headlamp New Ger	neration Manufacturing Center	

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12-5.9)

- 1. 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.
- 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 compy 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 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.

The property owner IS NOT in substantial compliance							
The property owner IS NOT in substantial compliance Other (specify) Reasons for the Determination (attach additional sheets it necessary) Signature of Authorized Member Date Signed (month, day, year) Designating Body 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	Weh	ave reviewed the CF-1 and find that:					
Reasons for the Determination (attach additional sheets it necessary) Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body 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 Det of Hearing (month, day, year) Location of Hearing HEARING RESULTS (to be completed after the hearing) HEARING RESULTS (to be completed after the hearing) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Date of Authorized Member Date Signed (month, day, year) Designating Body Attested By: Designating Body		The property owner IS in substar	itial compliance				
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Signature of Authorized Member Designating Body 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		Other (specify)					
Attested By: Designating Body 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	Reaso	ons for the Determination (attach ad	ditional sheets if necessary)	1			
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Attested By: Designating Body 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							
Attested By: Designating Body 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							
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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							date digited (mornin, day) your
Time of Hearing AM PM Date of Hearing (month, day, year) Location of Hearing Approved Denied (see insruction 5 above) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Designating Body Altested By: Designating Body	Atteste	ed By:			Desig	nating Body	
Time of Hearing AM PM Date of Hearing (month, day, year) Location of Hearing Approved Denied (see insruction 5 above) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Designating Body Altested By: Designating Body	16 41				<u> </u>		
Time of Hearing AM PAM Date of Hearing (month, day, year) Location of Hearing HEARING RESULTS (to be completed after the hearing) Approved Denied (see insruction 5 above) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body	follow	property owner is found not to t ing date and time has been set	e in substantial complia aside for the purpose of	nce, the prop considering	erty ow	mer shall receive the opp	ortunity for a hearing. The
HEARING RESULTS (to be completed after the hearing) Approved Denied (see insruction 5 above) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body		of Hearing AM			·		
Approved Denied (see insruction 5 above) Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body		□РМ					
Reasons for the Determination (attach additional sheets if necessary) Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body			HEARING RES	ULTS (to be c	omplete	d after the hearing)	
Signature of Authorized Member Date Signed (month, day, year) Attested By: Designating Body	2	- Could Barrier K. (III.)			Denied	(see insruction 5 above)	
Attested By: Designating Body	Heaso	ns for the Determination (attach add	litional sheets if necessary)				
Attested By: Designating Body							
Attested By: Designating Body							
Attested By: Designating Body							
Attested By: Designating Body							
Attested By: Designating Body	Signati	re of Authorized Member					Date Signed (month, day, year)
Designating body							
APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]	Atteste	d By:			Design	nating Body	
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 clerk 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.	A prope Circuit	arty owner whose deduction is denied or Superior Court together with a bor	j by the designating body mand conditioned to pay the cor	ay appeal the d	esignatir	ng body's decision by filing a	complaint in the office of the clerk of the



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.

- 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 to the designating body BEFORE a person installs the new manufacturing equipment and/or research and development equipment and/or information technology equipment 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 installation of qualifying abatable equipment for which the person desires to claim a deduction. To obtain a deduction, a person must file a certified deduction schedule with the 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. Property owners whose Statement of Benefits was approved, must submit Form CF-1/PP annually to show compliance with the Statement of Benefits.

 (For a Form SB-1/PP that is approved after June 30, 2013, the designation body is required to establish an abatement schedule for each deduction allowed. 3
- 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					a salayaya i	salviael, 2860 i	18,1416	
Name of taxpayer		TAXPAY	ER INFORM					·
Grote Industries, LLC				of contact personan Blanto				
Address of taxpayer (street and number, city, sta	ite, ZIP code)	M. C. T	1	<u> </u>	<u> </u>	Telephone num	her	
2600 Lanier Dr Madison	IN 4725	50				(812)273		
SECTION 2	LOCATIO	ON AND DESCRI	PTION OF P	ROPOSED PRO	JECT		<u> </u>	
Name of designating body Common Council of the City	y of Mac	dison				Resolution numl 5-2018	ber (s)	-3
Location of property 2600 Lanier Drive Madison	n IN 4	17250		unty efferson		DLFG taxing dis	trict number	See St. 3
Description of manufacturing equipment and/or re	search and de	evelopment equipr	ment	T			ESTIMATED	1
and/or logistical distribution equipment and/or info	rmation techni	ology equipment				Start Date		mpletion Date
1		gradient bestellt				100	30 3 3 3	
Improvements and modificat	cions of	existing	9	Manufacturing	Equipment	10/31/201	8 12/	31/2019
facility to allow high vol Headlamp New Generation Ma	ume pro	pauction o	of the	R & D Equipm	ent	gara garanta		A STATE OF THE STA
Trought New Scholacton Me	inulacco	iring cent	-er	Logist Dist Eq	uipment *	10/31/201	18 12/	31/2019
				IT Equipment	•			
SECTION 3 ESTIMA	TE OF EMPL	OYEES AND SA	LARIES AS	RESULT OF PRO	DPOSED PE	OJECT		
Current number Salaries		nber retained		ries		er additional	Salaries	
426 27,592	,559	and the second s	1999.00			7,48,448,90.5	35	1,670,032
SECTION 4	ESTIMATED	TOTAL COST A	ND VALUE	OF PROPOSED	PROJECT			
NOTE: Pureupot to IC 6.1.1.10.1.5.1.70.10.11	******							
NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential.	EQUIP	CTURING MENT	R & D EC	DUIPMENT		IST DIST IIPMENT	ITEC	DUIPMENT
	EQUIP Cost	CTURING PMENT Assessed Value	R & D EC	OUIPMENT Assessed Value		IPMENT Assessed	IT EC	Assessed
	EQUIP	MENT	e de la companya de	Assessed	EQU	IPMENT		
COST of the property is confidential.	EQUIP	MENT	e de la companya de	Assessed	EQU	Assessed Value		Assessed
COST of the property is confidential. Current values	Cost	MENT	e de la companya de	Assessed	Cost	Assessed Value		Assessed
Current values Plus estimated values of proposed project	Cost	MENT	e de la companya de	Assessed	Cost	Assessed Value		Assessed
COST of the property is confidential. Current values Plus estimated values of proposed project Less values of any property being replaced Net estimated values upon completion of project	EQUIF Cost 4,087,022 4,087,022	Assessed Value	Cost	Assessed Value	EQL Cost 548,9	Assessed Value		Assessed
COST of the property is confidential. Current values Plus estimated values of proposed project Less values of any property being replaced Net estimated values upon completion of project	EQUIF Cost 4,087,022 4,087,022	MENT	Cost	Assessed Value	548, 9. 548, 9. 548, 9.	Assessed Value		Assessed
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			FOR I	JSE OF THE (DESIGNATING	BODY				
add	have reviewed our popted in the resolution horized under IC 6-1.	n previously approve	to the designation of the design	of this economic red resolution, passed	vitalization area an d under IC 6-1.1-12	d find that the 2.1-2.5, provid	e applica des for th	nt meets the general standards ne following limitations as		
A.	The designated are	a has been limited to	a period of time no .NOTE: This quest	ot to exceed ion addresses whe	calend	lar years * (s contains an	ee below expiration	v).The date this designation expires n date for the designated area.	3	
В.	 Installation of no Installation of no 	on that is allowed in t ew manufacturing eq ew research and dev ew logistical distribut ew information techn	uipment; elopment equipme ion equipment.		to: Yes					
C.	The amount of dedu	ction applicable to n	ew manufacturing e s may be filled out	equipment is limited to establish a limit,	i to \$ if desired.)	cost w	rith an as	sessed value of		
D.	The amount of dedu	ction applicable to note to the contract of th	ew research and de s may be filled out i	evelopment equipm to establish a limit,	ent is limited to \$ if desired.)		co	st with an assessed value of		
E.	The amount of dedu	ection applicable to no	ew logistical distribu s may be filled out t	ution equipment is lo establish a limit,	limited to \$ if desired.)	(cost with	an assessed value of		
F.	The amount of dedu	ction applicable to no	ew information tech s may be filled out t	nology equipment to establish a limit,	is limited to \$ if desired.)	***************************************	cost wi	ith an assessed value of		
	and/or new informati Year 1 Year 6	ion technology equip	ment installed and	first claimed eligibl	e for deduction is a	allowed for:] Enhar	al distribution equipment need Abatement per IC 6-1.1-12.1-1er of years approved:	18	
	□ Year 6	☐ Year7	☐ Year 8	☐ Year 9	☐ Year 10		(Enter	one to twenty (1-20) years; may creed twenty (20) years.)	ALAUA	
Also	For a Statement of B If yes, attach a copy If no, the designating we have reviewed the rmined that the totali	of the abatement sch body is required to ne information contai	nedule to this form. establish an abaten ned in the statemer	nent schedule befo	re the deduction cond that the estimate	an be determ	ined.	IC 6-1.1-12.1-17? Yes	□ No	
	: (signature and title				phone number		· · · · · · · · · · · · · · · · · · ·	Date signed (month, day, year)		
nted n	ame of authorized m	ember of designating	body	Na	ame of designating	body				
ested b	y: (signature and title	e of attester)	-	Pr	inted name of atte	ster				
* !	If the designating boo	dy limits the time per deduction to a number	iod during which an	area is an econon	nic revitalization ar	ea, it does no	ot limit the	e length of time a taxpayer is		

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.

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

PRIVACY NOTICE

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

FORM CF-1 / PP

2024 PAY 2025

INSTRUCTIONS:

Prescribed by the Department of Local Government Finance

State Form 51765 (R7 / 12-22)

- 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)
- This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing
 extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date
 of each year.
- 3. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (CF-I).

SECTION 1		TAX	KPAYER INF	ORMATION				Azer Seradi
Name of taxpayer Grote Industries, LLC				*:	5 V .	County Jeffer	son	
Address of Taxpayer (street and number, city, s 2600 Lanier Dr	tate and ZIP co	de)				DLGF Taxir	ng District Numb	per
Madison IN 47250						39007		
Name of Contact Person Brian Blanton			ľ	Telephone Number (812) 273-		Email Addre	ess .blanton@gr	ote.com
SECTION 2	LO	CATION AND D	ESCRIPTIO	N OF PROPERTY	,			
Name of Designating Body Common Council of the Cit	y of Mac	lison		Resolution Numb 7-2011	er	Estimated St 05/15/	tart Date (mont/ 2011	i, day, year)
	47250					Actual Start 05/15/	Date (month, da 2011	y. year)
Description of new manufacturing equipment, or technology equipment, or new logistical distribut Improvements and modification	ion equipment to	be acquired				Estimated Co 12/31/	ompletion Date 2014	month, day, yea
high volume production of	LightFo	orm produ	ict.	rity to a	TIOM	Actual Comp 12/31/	eletion Date (mo 2014	nth, day, year)
SECTION 3		EMPLOY	EES AND S	ALARIES				
	LOYEES AND	SALARIES			AS	ESTIMATED ON SI		CTUAL
Current Number of Employees						40		480
Salaries		***************************************				18,061,05	6 3	6,895,700
Number of Employees Retained								· · · · · · · · · · · · · · · · · · ·
Salaries	····							
Number of Additional Employees Salaries	****		***************************************				0	5
SECTION 4		COS:	TANDMALL	IRC		1,277,95	4	240,717
	COST AND VALUES MANUFACTURING EQUIPMENT R & D EQUIPMENT EQUIPM						IT EQU	PMENT
AS ESTIMATED ON SB-1	соѕт	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project			·~···					
Plus: Values of Proposed Project	2,054,305						20,500	
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	2,054,305	ACCECCED		40050050			20,500	
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	90,832	1,024						
Plus: Values of Proposed Project								
Less: Values of Any Property Being Replaced								
Net Values Upon Completion of Project	90,832	1,024						
NOTE: The COST of the property is confidential								agent of
				PROMISED BY				
Amount of Solid Waste Converted	VERTED AND	OTHER BENEF	115		AS	ESTIMATED ON SI	B-1 A	CTUAL
Amount of Hazardous Waste Converted								
Other Benefits:	·····			and the same of th				
SECTION 6 I hereby certify that the representations in this st	atament are true		ER CERTIFI	CATION		gen nag de dogê Asil. Typinana		gar A.
Signature of Authorized Representative	acment are file		Title CFO	***************************************		Date Signed	i (month, day,)	rear)

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12-5.9)

- 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.
- 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 compy 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 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 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 (mo	onth day year)
	Jacob Signos (m.	min, day, year)
Attested By:	Designating Body	
If the expect, and if the desired in the second in the sec		
If the property owner is found not to be in substantial compliance, the pro- following date and time has been set aside for the purpose of considering	perty owner shall receive the opportunity for a hearing compliance.	g. The
Time of Hearing	Location of Hearing	
□PM		
HEARING RESULTS (to be	completed after the hearing)	
	Denied (see insruction 5 above)	
Reasons for the Determination (attach additional sheets if necessary)		
Signature of Authorized Member	Date Signed (mo	nth day year)
		mi, day, youly
Attested By:	Designating Body	
	'S [IC 6-1.1-12.1-5.9(e)]	
A property owner whose deduction is denied by the designating body may appeal the Circuit or Superior Court together with a bond conditioned to pay the costs of the appe	designating body's decision by filing a complaint in the office of all if the appeal is determined against the property owner.	of the clerk of the

FORM SB-1 / PP

PRIVACY NOTICE

Any information concerning the cost of the property and specific salaries paid to individual employees by the properly owner is confidential per IC 6-1.1-12.1-5

- 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 to the designating body BEFORE a person installs the new manufacturing equipment and/or research and development equipment and/or information technology equipment 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 installation of qualifying abatable equipment for which the person desires to claim a deduction.

 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. 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. 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)
- 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)

Name of taxpayer Grote Industries, LLC Address of taxpayer (street and number, city, state, ZIP code) 2600 Lanier Dr Madison IN 47250 SECTION 2 Name of designating body Common Council of the City of Madison Location of property 2600 Lanier Drive Madison IN 47250 Description of manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or logistical distribution equipment and/or sesearch and development equipment and/or logistical distribution equipment and/or sesearch and development equipment (Use additional sheets if necessary) Improvements and modifications of existing facility to allow high volume production of LightForm product. SECTION 3 SECTION 3 SETIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT Current number Salaries Number retained Salaries Number additional Salaries Number additional Salaries Number additional Salaries Number additional Salaries Number additional Salaries Number additional Salaries Number additional Salaries 1, 277, 95 SECTION 4 SECTION 4 SECTION 4 SECTION 4 SESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is conflidential COST of the property is conflidential COST of the property being replaced Net estimated values of proposed project Less values of any property being replaced Net estimated values upon completion of project 20,500 Value Net estimated values upon completion of project 20,500 Value Net estimated values upon completion of project 20,500	SECTION 1		TAXPA	YER INFOR	RMA	TION				
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SECTION 2 LOCATION AND DESCRIPTION OF PROPOSED PROJECT										
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Common Council of the City of Madison T-2011		LOCAT	ION AND DESCR	RIPTION OF	FPA	OPOSED PROJ	ECT			
Description of manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment (Use additional sheets it necessary) Improvements and modifications of existing facility to allow high volume production of LightForm product. Siart Date Completion Date Manufacturing Equipment 05/15/2011 12/31/2014 R & D Equipment 05/15/2011 12/31/2014 IT Equipment 05/15/2011 12/31/2014 IT Equipment 05/15/2011 12/31/2014 SECTION 3 SECTION 3 SESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT Current number Salaries Number additional Salaries Number additional 30 1,277,95 SECTION 4 SECTION 4 SESTIMATED Cost AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. Cost Assessed Value Cost Assessed Value Cost Value Cost Value Cost Value Value Cost Value Cos		y of Ma	dison					1	er (s)	
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Start Date Completion Date	Description of manufacturing equipment and/or res	search and d	levelopment equip	pment			***************************************		STIMATED	
Improvements and modifications of existing facility to allow high volume production of LightForm product. R & D Equipment 05/15/2011 12/31/2014	and/or logistical distribution equipment and/or infor	rmation tech	nology equipment	t						
Facility to allow high volume production of LightForm product. LightForm product. Logist Dist Equipment 05/15/2011 12/31/2014		tions o	of existin	ıa		Manufacturing	Equipment	to the last district of		***************************************
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SECTION 3 ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT Current number 405 Salaries 18,061,056 Number retained Salaries Number additional Salaries Number additional Salaries Number additional 1,277,95 SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. Cost Assessed Value Cost Assessed Value Cost Current values Plus estimated values of proposed project Less values of any property being replaced Note estimated values upon correlation of project and property is confidential. Section 3 ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT Number additional Salaries Number additional Salaries 1,277,95 Trequipment Cost Assessed Value Cost Assessed Value Cost Assessed Value Note estimated values of proposed project Less values of any property being replaced Note estimated values upon correlation of project and project	LightForm product.					Logist Dist For	inment *	05/15/201		
SECTION 3 Current number Salaries 18,061,056 Number retained Salaries Number additional Salaries Number additional Salaries 18,061,056 SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. MANUFACTURING EQUIPMENT Cost Assessed Value Cost Assessed Value Cost Assessed Value Cost Value Cost Assessed Value Cost Value Note setimated values of proposed project Less values of any property being replaced Note setimated values upon completion of project and property is confidential.										***************************************
Current number Salaries Number retained Salaries Number additional Salaries Number additional 30 1,277, 95 SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST Of the property is confidential. MANUFACTURING R & DEQUIPMENT LOGIST DIST EQUIPMENT Cost Assessed Value Cost Assessed Value Cost Value Cost Value Cost Value Plus estimated values of proposed project 2.034,305 Less values of any property being replaced Net estimated values upon completion of costed.	SECTION 3 ESTIMA	TE OF EMB	LOVEES AND S	AL ADIED A	0.0				+ +2/	31/2014
SECTION 4 NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. Cost Assessed Value Current values Plus estimated values of proposed project Less values of any property being replaced Note estimated values upon correlation of cost of the property is confidential. ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT MANUFACTURING R & D EQUIPMENT EQUIPMENT Cost Assessed Value Cost Value Cost Assessed Value Cost Value Cost Value Note estimated values upon correlation of costs of	Current number Salaries	Nu						er additional	Salaries	1 222 000
NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. COST Assessed Cost Assessed Cost Assessed Value Cost Cos			D TOTAL COST	AND VALU	F 0	C DEADAGED 6		173.43	0	1,271,952
COST of the property is confidential. Cost			171							
Cost Assessed Value Cost Assessed Value Cost Assessed Value Cost Assessed Value Cost Value Cost Assessed Value Cost Value		EQUI	PMENT	R & D	EQI	JIPMENT			IT EC	UIPMENT
Current values Plus estimated values of proposed project 2,054,305 Less values of any property being replaced Net estimated values upon completion of project		Cost		Cost	T		Cost		Cost	Assessed
Less values of any property being replaced Net estimated values upon completion of excitety.	Current values									
Net estimated values upon completion of excited	Plus estimated values of proposed project	2,054,30	5				***************************************		20,5	00
Net estimated values upon completion of project 2,054,305	Less values of any property being replaced				\dashv					
	Net estimated values upon completion of project	2,054,30	5		1		***************************************	i fa	20,5	00
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER	SECTION 5 WAST	E CONVER	TED AND OTHE	R BENEFI	S P	ROMISED BY T	НЕ ТАХРА	YER		
Estimated solid waste converted (pounds) Estimated hazardous waste converted (pounds)				21111		14 . T	1000	n Again can a 194		
Other benefits:	Other benefits:									
and the second of the second o										
A CONTROL OF THE CONT	100000000000000000000000000000000000000	masar sahanya	n dan at at Xalanti a la			State of Fig. 1 was			ing and a second se Second second	wi 1914
SECTION 6 TAXPAYER CERTIFICATION	SECTION 6		TAXPAY	ER CERTIF	ICA	TION				
I hereby certify that the representations in this statement are true.	I hereby certify that the representations in the	nis stateme							····	
Signature of authorized representative Date signed (month, day, year)	Signature of authorized representative	***************************************						Date signed	(month, day	, year)
Beion Blanton 5/15/2024	Sian Blanton							5/15/20	24	-
Printed name of authorized representative Title	Printed name of authorized representative			Time Time	Titl	е				
Brian Blanton CFO 55/15/020	Brian Blanton				CF	°0		5/15/020		

			FOR I	JSE OF TH	E DESIGNATING	BODY		
á	Ve have reviewed our padopted in the resolution the resolution that the resolution is the resolution to the resolution to the resolution is the resolution to the resolution is the resolution to the resolution t	n previously approved	o the designation of the designa	of this economi fresolution, pa	c revitalization area and ssed under IC 6-1.1-12	d find that the applica .1-2.5, provides for th	nt meets the general standards ne following limitations as	
A	A. The designated are is	ea has been limited to	a period of time no NOTE: This quest	ot to exceed ion addresses	calenda whether the resolution	ar years * (see belov contains an expiratio	v).The date this designation expires n date for the designated area.	
Ε	Installation of n Installation of n	on that is allowed in the manufacturing equew research and deview logistical distribution in the comment of the matter of the ma	uipment; elopment equipme on equipment.		☐ Yes ☐ Yes ☐ Yes ☐ Yes	□ No Ch	nhanced Abatement per IC 6-1.1-12, neck box if an enhanced abatement proved for one or more of these typ.	was
C	The amount of dedu	uction applicable to ne (One or both line:	ew manufacturing e s may be filled out	equipment is lir to establish a l	nited to \$	cost with an as	ssessed value of	
Ξ	The amount of dedu	action applicable to ne	ew research and de s may be filled out	evelopment equito establish a li	uipment is limited to \$ _ imit, if desired.)	co	st with an assessed value of	
E	. The amount of dedu	uction applicable to ne (One or both lines	ew logistical distribi may be filled out	ution equipmer to establish a li	it is limited to \$init, if desired.)	cost with	an assessed value of	
F	The amount of dedu	uction applicable to ne (One or both lines	ew information tech s may be filled out i	inology equipm to establish a li	ent is limited to \$	cost w	ith an assessed value of	
G	. Other limitations or	conditions (specify)						
Н					development equipme gible for deduction is a		al distribution equipment	
	☐ Year 1	☐ Year 2	☐ Year 3	☐ Year	4 🔲 Year 5	☐ Enhar	nced Abatement per IC 6-1.1-12.1-1	8
	☐ Year 6	☐ Year7	☐ Year 8	☐ Year	9 🔲 Year 10	(Ente	per of years approved:	_
I.	If yes, attach a copy If no, the designating	of the abatement sch g body is required to e	edule to this form. establish an abater	nent schedule	ting body adopt an aba	an be determined.	IC 6-1.1-12.1-17? ☐ Yes	□ No
de	etermined that the total	ity of benefits is suffic	ient to justify the d	eduction descr	ibed above.	es and expediations i	are reasonable and have	
pprov	ed: (signature and title	of authorized membe	er of designating bo	ody)	Telphone number		Date signed (month, day, year)	
Printe	d name of authorized m	nember of designating	body		Name of designating	body		
tteste	d by: (signature and titl	le of attester)			Printed name of attes	ster		
	* If the designating bo entitled to receive a	dy limits the time peri deduction to a numbe	od during which ar er of years designa	narea is an eco ted under IC 6-	onomic revitalization are	ea, it does not limit th	e length of time a taxpayer is	***************************************

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.

5/15

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

PRIVACY NOTICE This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6. FORM CF-1 / PP

Pay 20

State Form 51765 (R7 / 12-22)

Prescribed by the Department of Local Government Finance.

- 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 6-1.1-12.1-5.8)

 2. This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between Jahlan 1 and that 13 funder 10 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 way.

With the approval of the SECTION 1 Name of Taxpayer		TAXPAY	YER INFORM	ATION				
US Premier Tube Mills LLC						County Jeffer	son	
Address of Taxpayer (number and street, city, sta 2855 Michigan Road, Madisc	le, and ZIP code on, IN 472	9) 150			Mariant, Van Van de de	DLGF Tab 39007	ing District Nur '	iber
Name of Contact Person Taka Hanaki			Teleph (972	one Number 2) 714-735	 i1	Email Add thanaki	ress @masterha	lo.com
SECTION 2	LO	CATION AND		N OF PROPER	TY T			
Name of Designating Body City Council of Madison, Indi	ana		Resolu 9-20	lion Number 107	V	Estimated 04/01	State Date (mo /2017	nth, day, year)
Location of Property 2855 Michigan Road, Madiso						06/01		
Description of new manufacturing equipment, new new logistical distribution equipment to be acquire	v research and o ed.	levelopment equi	ipment, new info	omation lechnolo	gy equipment,	or Estimated 12/31	Completion Date /2017	(month, day, yea
Slitting equipment, robotics, I	T system	upgrade,	construc	tion of acc	ess/lot	Actual Cor 12/16	npiellon Dale (m /2019	onth, day, year)
SECTION 3		EMPLOY	EES AND SA	LARIES				
EMPLOYEES AND	SALARIES			AS ESTIM/	TED ON SB			UAL
Current Number of Employees			88				116	
Salaries			4,20	00,000	~~~	1	7,707,451	
Number of Employees Retained			88		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	{{\{	32	
Salaries				00,000			6,537,096	
Number of Additional Employees			19				34	
Salaries	a mendadik landanga 1976 s	ner trajelo kasaska josta		,000	er soldagen sentrett (1997) valuation		1,170,355	descriptions.
SECTION 4		cos	T AND VALU		e e e e e e e e e e e e e e e e e e e			
		ACTURING IPMENT		EARCH & ENTEQUIPMENT		. Distribution IPMENT	ITEG	UIPMENT
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSE VALUE
Values Before Project	s	\$ 5744000	5	\$	5	S	\$	\$
Plus: Values of Proposed Project	\$ 1818446	\$	S	S	\$ 790169	S	\$ 295194	\$
Less: Values of Any Property Being Replaced	\$	\$	\$	5	S	<u> s </u>	\$	\$
Net Values Upon Completion of Project	\$ 1818446	\$	5	S	\$ 790169	<u> \$</u>	\$ 295194	s
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSE VALUE
Values Before Project	\$	\$ 5744000	\$	\$	\$	S	ş	5
Plus: Values of Proposed Project	\$ 2704082	\$	S	\$	\$	\$ 52822	s	\$
Less: Values of Any Property Being Replaced	S.	\$	\$. 5	\$	S	\$	\$
Net Values Upon Completion of Project	\$	\$	\$	3	S	S.	S	\$
NOTE: The COST of the property is confident				· · · · · · · · · · · · · · · · · · ·				
			R BENEFITS	PROMISED E				
WASTE CONVERTE	D AND OTHE	RBENEFITS		AS	ESTIMATED	ON SB-1	ACT	UAL
Amount of Solid Waste Converted		Algeria, Carolina	200 Set Set 100 100 100 100 100 100 100 100 100 10		andreas de la company de l La company de la		er en	
					Control of the Contro			
Amount of Hazardous Waste Converted								
CONTRACTOR SEASON AND ADDRESS OF THE SEASON								
Other Benefits:	V.1	TAVEAL	vro crosvi	CATION		<u> </u>	<u></u>	
Other Benefits: SECTION 6	Ones and the		YER CERTIFI	CATION				
Other Benefits:	n this stateme		YER CERTIFI	CATION			Dale Signed (mo	villa dav (mari

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

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

- 1. 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.
- 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, including 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.
- Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a 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 a reasonable effort to comply, 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.

				~			
Weh	ave reviewed the CF-1	and find that	;				
	The property owner I	S in substanti	al com	pliance		*	
	The property owner I	S NOT in sub:	stantia	l compliance			
	Other (specify)						
Reaso	ns for the Determination (altach additiona	l sheets	s if necessary)			
Signati	ire of Authorized Member						Date Signed (month, day, year)
Atteste	d By				Designa	ating Body	
If the	property owner is foun	nd not to be in the purpose o	substa f cons	antial compliance, the property idering compliance.	owner	shall receive the opportunity for	a hearing. The following date and
Time.o	f Hearing		AM	Date of Hearing (month, day, yea	r)	Location of Hearing	
			PM				
		AND LONG		HEARING RESULTS (to be	omple	ted after the hearing)	
			pprove	, , ,			Instruction 5 above)
Reason	ns for the Determination (a	atlach additiona	sheets	; if necessary)			
		-		•			
Signati	ire of Authorized Member		***************************************	dan dikangan mangan			Date Signed (month, day, year)
Atteste	d By	8-8			Designa	ating Body	
				ÁPPEAL RIGHTS [C 6-1.1	-12.1-5.9(e)]	
						pody's decision by filing a complaint elemined against the property owner.	n the office of the clerk of the Circuit

COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

PRIVACY NOTICE This form contains confidential information pursuant to IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6. FORM CF-1 / PP

20_24 Pay 20_25

State Form 51765 (R7 / 12-22)

Prescribed by the Department of Local Government Finance

- 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)
 This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15, unless a filing
- extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.

3. With the approval of t	he designating	body, complian	ce information	for multiple pro	iects may be c	onsolidated on	one (1) complia	ince form (CF-
SECTION 1		TAXPA	YER INFORMA	ATION				
Name of Taxpayer Vehicle Service Group LLC						Jeffer:	on	
Address of Taxpayer (number and street, city, sta	te and ZIP code	1)				1	ing District Num	ber
2700 Lanier Drive, Madison,		y				39007		· ·
Name of Contact Person				one Number	<u></u>	Email Add		
Colin Ulrey)265-951		cuirey@)vsgdover.c	om
SECTION 2 Name of Designating Body	LUU	CATION AND I		OP PROPER	(I)Y	Estimated	State Date (mor	ith day year)
Common Council of the City of	of Madiso	n, IN	65-2			10/31/		,, , , , ,,
Location of Property 2700 Lanier Drive, Madison,	IN 47250				· .	Actual Sta 12/31/	rt Date (month, (2018	day, year)
Description of new manufacturing equipment, new		evelopment equi	pment, new info	rmation technolo	gy equipment, o	and the second		month, day, year)
new logistical distribution equipment to be acquire	ed.					12/31/		ta Maziri ili
Manufacturing equipment to i	ncrease o	capacity w	ith metal	cutting m	achine.	12/10/	npletion Date <i>(m</i> '2019	onth, day, year)
SECTION 3		EMPLOY	EES AND SAL	ARIES				
EMPLOYEES AND	SALARIES			AS ESTIM	ATED ON SB-		ACT	UAL
Current Number of Employees			410	~~			71	
Salaries				39,122	······································		26,740,83	<u>U</u>
Number of Employees Retained Salaries			410	39,122			171	^
Number of Additional Employees			15	39,122			2 <u>6,740,83</u> 31	<u> </u>
Salaries			584.	250			,201,708	
SECTION 4		608	T AND VALU				,,_0,,,00	
		ACTURING PMENT		ARCH& NTEQUIPMENT		DISTRIBUTION	IT EQ	UIPMENT
AS ESTIMATED ON SB-1	соѕт	ASSESSED VALUE	cost	ASSESSED VALUE	совт	ASSESSED VALUE	COST	ASSESSED VALUE
Values Before Project	\$	\$	s	\$	\$	S	s	s
Plus: Values of Proposed Project	\$ 2,800,00	\$	\$	\$	\$	\$	s	s
Less: Values of Any Property Being Replaced	s	\$	\$	\$ 2000000000000000000000000000000000000	\$	\$	s	<u> </u> \$
Net Values Upon Completion of Project	S	\$	S	\$	s	\$	S	S
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSEE VALUE	COST	ASSESSED VALUE
Values Before Project	s	\$	s	s	s	\$	\$	\$
Plus: Values of Proposed Project	s 2,994,171	\$	s	\$	\$	S	\$	\$
Less: Values of Any Property Being Replaced	ş	\$	5	s	\$	s	\$	s
Net Values Upon Completion of Project	s	\$	s	\$	s	S	s	\$
NOTE: The COST of the property is confident						and the second second section is a second section of the second section of the se		***********
SECTION 5 WAST WASTE CONVERTE		D AND OTHE	R BENEFITS		Y THE TAXP ESTIMATED		407	DAT
	D AND OTHE	K BENEFIIS		HO.	COLIMATED	UN 30-1	ACI	UAL

Amount of Solid Waste Converted				i		•		
								(special (s) + man + propagation (s) + pro-
Amount of Solid Waste Converted Amount of Hazardous Waste Converted								
Amount of Solid Waste Converted Amount of Hazardous Waste Converted		TAXPA\	YER CERTIFIC	CATION				
Amount of Solid Waste Converted Amount of Hazardous Waste Converted Other Benefits: SECTION 6 I hereby certify that the representations in	n this statemer			CATION				
Amount of Solid Waste Converted Amount of Hazardous Waste Converted Other Benefits: SECTION 6	n this statemer		Tible	cation orized Age	anf .		Date Signed <i>(mc</i> 5/30/2024	

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

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

- 1. 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.
- 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, including 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.
- 3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made a 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.
- 4. If the designating body determines that the property owner has **NOT** made a reasonable effort to comply, 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.

Weh	ave reviewed the CF-1 and	find tha	t:					
	The property owner IS in	substant	ial com	pliance				
	The property owner IS NO)T in sub	stantia	d compliance				
	Other (specify)							
Reaso	ns for the Determination (attack	addition:	al sheet	s if necessary)	***************************************			
Signati	are of Authorized Member							Date Signed (month, day, year)
Attoste	d By				Designa	ating Body		
If the time t	property owner is found no has been set aside for the p	t to be in	substa of cons	antial compliance, the property sidering compliance.	owner	shall receive the o	pportunity for	a hearing. The following date and
Time o	f Hearing		AM	Date of Hearing (month, day, yea	r)	Location of Hearing		
			PM					
				HEARING RESULTS (to be	comple	ted after the hear	ing)	
			Approve	A CONTRACTOR OF THE PROPERTY O				e Instruction 5 above)
Reason	ns for the Determination (attach	additiona	al sheet:	s if necessary)				
								•
Signatu	re of Authorized Member	***************************************	kanna danasanan					Date Signed (month, day, year)
Alfested By Designating Body								
				APPEAL RIGHTS [I	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 clerk 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.							

COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R3 / 2-13) Prescribed by the Department of Local Government Finance 20 24 PAY 20 25

FORM CF-1 / Real Property

INSTRUCTIONS:

- 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.
- 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).

 This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
- 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).

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).

SECTION 1	TAXPAYER INFORMATION			
Name of taxpayer			County	
Cotton Mill, LLC			Jefferson	
Address of taxpayer (number and street, city, state, and ZIP cod		-	DLGF taxing dist	rict number
1113 W Fireweed Ln, Ste 202, Anchora	ge, AK 99503			
Name of contact person		in antikara sala	Telephone numb	er
Ron Bateman			(907) 7	64-8502
	CATION AND DESCRIPTION OF PROPERT	Υ		
Name of designating body	Resolution number		Estimated start d	ate (month, day, year)
City of Madison				
Location of property			Actual start date	(month, day, year)
108 St. Michaels Ave., Madison, IN 472	02/01/2020			
Description of real property improvements			Estimated compl	etion date (month, day, year)
Preservation and renovation of the Eagle Cotton Mill int meeting space, bar and outdoor event space	o a Fairfield Inn & Suites with 85 rooms, confe	rence and		
meeting space, bar and outdoor event space			Actual completion	n date (month, day, year)
			7	/12/2021
SECTION 3	EMPLOYEES AND SALARIES		I have been a second of the se	
EMPLOYEES AN	D SALARIES	AS ESTIMA	TED ON SB-1	ACTUAL
Current number of employees			10	43
Salaries		800,0	00.00	609,511.00
Number of employees retained				· · · · · · · · · · · · · · · · · · ·
Salaries				
Number of additional employees			rangan	43
Salaries				609,511.00
SECTION 4	COST AND VALUES			The second secon
COST AND VALUES	REAL ESTATE	IMPROVEMI	ENTS	
AS ESTIMATED ON SB-1	COST		ASSESSE	D VALUE
Values before project	1,450,000.0	D		
Plus: Values of proposed project	14,550,000.0	9		Alexander of the second second
Less: Values of any property being replaced			***************************************	
Net values upon completion of project	16,000,000.0	0		
ACTUAL	COST		ASSESSE	D VALUE
Values before project	1,450,000.0	0		
Plus: Values of proposed project	13,800,000.0	0		
Less: Values of any property being replaced	. 450,000.0	0		
Net values upon completion of project	13,800,000.0	0		
SECTION 5 WASTE CONVER	TED AND OTHER BENEFITS PROMISED BY	THE TAXPA	/ER	
WASTE CONVERTED AND C	THER BENEFITS	AS ESTIMAT	TED ON SB-1	ACTUAL
Amount of solid waste converted				
Amount of hazardous waste converted				
Other benefits:				
SECTION 6	TAXPAYER CERTIFICATION		· · · · · · · · · · · · · · · · · · ·	
	ertify that the representations in this statemen	t are true.	and the Albertains	a la companya da la c
Signature of authorized representative	Title		Date signed (n	nonth, day, year)
	Member rep		05/13/202	24

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 <u>may</u> 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.

resolution to: (1) the property of	wher, (2) the county additor, and (o) the count	7 853E5301.		
We have reviewed the CF-1 and	find that:				
the property owner IS in su	ubstantial compliance				
the property owner IS NOT	Γ in substantial compliance				
other (specify)				······································	
Reasons for the determination (attach	additional sheets if necessary)	,			
Signature of authorized member					Date signed (month, day, year)
Attested by:			Designating body		
	not to be in substantial compliance purpose of considering complian				a hearing. The following date and ne date of mailing of this notice.)
Time of hearing AM	Date of hearing (month, day, year)	Location of h	earing		
	HEARING RESU	LTS (to be o	completed after the hearing)		
	☐ Approved		Denied (see instruction 4 at	bove)	
Reasons for the determination (attach	additional sheets if necessary)				
Signature of authorized member				T C	Date signed (month, day, year)
Attested by:			Designating body	t	
**************************************	APPEA	L RIGHTS [I	C 6-1.1-12.1-5.9(e)]		
					filing a complaint in the office of the mined against the property owner.

citrix | RightSignature

SIGNATURE CERTIFICATE

TRANSACTION DETAILS

Reference Number

6FE53E21-43BE-47C9-B009-2F3D65970AAF

Transaction Type

Signature Request

Sent At

05/13/2024 14:42 EDT

Executed At

05/13/2024 23:30 EDT

Identity Method

email

Distribution Method

email

Signed Checksum

55c1cd01ba0b7b5fc0691d3a871707cee0f69b55172187d0deac5eb9a9166cae

Signer Sequencing

Disabled

Document Passcode

Disabled

REFERENCE NUMBER

6FE53E21-43BE-47C9-B009-2F3D65970AAF

DOCUMENT DETAILS

Document Name

Cotton Mill CF-1 Real Property 2024-for sig

Filename

Cotton_Mill_CF-1_Real_Property_2024-for_sig.pdf

Pages

2 pages

Content Type

application/pdf

File Size

172 KB

Original Checksum

a1f707cc58a82692f7278d941c67ed7bfc97be6e07e1f55b857baf21c3d77665

SIGNERS

SIGNER

Name

Glenn Gellert

Email

glenn.gellert@gmail.com

Components

E-SIGNATURE

Status

signed

Multi-factor Digital Fingerprint Checksum

e653bf5fde4b62b81b38c7b449a2dfb13aad8c5024769419badeaf9c3ed36b11

IP Address

97.73.244.8

Device

Mobile Safari via iOS

Drawn Signature

Signature Reference ID

A4EB220E

Signature Biometric Count

EVENTS

Viewed At

05/13/2024 23:30 EDT

Identity Authenticated At 05/13/2024 23:30 EDT

Signed At

05/13/2024 23:30 EDT

AUDITS

TIMESTAMP

05/13/2024 14:42 EDT

AUDIT

Kate Womack (kate@jmtaxadvocates.com) created document 'Cotton_Mill_CF-1_Real_Property_2024-for_sig.pdf' on Chrome via Windows from 98.220.142.38.

Glenn Gellert (glenn.gellert@gmail.com) was emailed a link to sign.

05/13/2024 14:42 EDT 05/13/2024 23:29 EDT Glenn Gellert (glenn.gellert@gmail.com) viewed the document on Mobile Safari via iOS from 97.73.244.8. 05/13/2024 23:30 EDT Glenn Gellert (glenn.gellert@gmail.com) viewed the document on Mobile Safari via iOS from 97.73.244.8. 05/13/2024 23:30 EDT Glenn Gellert (glenn.gellert@gmail.com) authenticated via email on Mobile Safari via iOS from 97.73,244.8. 05/13/2024 23:30 EDT Glenn Gellert (glenn.gellert@gmail.com) signed the document on Mobile Safari via iOS from 97.73.244.8.



COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)

Prescribed by the Department of Local Government Finance

20 23 PAY 2024

FORM CF-1 / Real Property

INSTRUCTIONS:

- 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).
- This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
- 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 6-1.1-12.1-5.3(j))
- 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).

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (l).

SECTION 1	TAXPAYER	INFORMATION			3005 (435 H) 1 34	
Name of Taxpayer	a distribution of the second section is a second section of the sect		a na na alikulikulikuliku	County		
Riverside Tower, LP (dba: Riverside	de Tower Apartments)	in side year and the side of the		Jefferson		
Address of Taxpayer (number and street, city, str	nie, and ZIP code)			DLGF Taxing Distric	t Number	
509 Spring Street Jeffersonville, IN Name of Contact Person	147130		3.18 P. 20	007		
Brandon Denton		Telephone Number		Email Address	A COMPANY OF THE COMP	
SECTION 2	LOCATION AND DEA	(502)339-061		bdenton@dent	onfloyd.com	
Name of Designating Body	LOCATION AND DES	Resolution Number	ERTY			
City of Madison Common Council		58-2018		Estimated Start Date December 01,	(month, day, year)	
Location of Property		100 20.0		Actual Start Date (month, day, year)		
1001 W. 2nd St. Madison, IN 4725	0			December 28, 2018		
Description of Real Property Improvements		······································			Date (month, day, year)	
The Riverside Tower Apartments r	epresents a proposed inve	stment in excess	of \$8 million in	February 01, 2	2020	
the city of Madison. The project en	italied the transformation of	f the former Town		Actual Completion Da	ate (month, day, year)	
Manufacturing property into a 50-u SECTION 3	nlt affordable senior housir	na development.		March 10, 202	1	
EMPLOYEES AND		AND SALARIES				
Current Number of Employees	SALARIES	AS ESTIN	MATED ON SB-1		ACTUAL	
Salaries Salaries						
					anderson en	
Number of Employees Retained Salaries						
				- nama ang sangangnyayi		
Number of Additional Employees Salaries		- 1		<u> </u>		
SECTION 4	Altered No. 2007 and folder flower of bloody and	40,420.00	arindigales, cèg	40,420.00	Agran e esta e	
	COST AN	ND VALUES				
COST AND VALUES	AVE	REAL ESTATE	IMPROVEMENTS	3		
AS ESTIMATED ON SB-1	COST		The second secon	ASSESSED VALU	Æ	
Values Before Project			\$ 90,400.00		Participal Community of	
Plus: Values of Proposed Project	\$ 8,445,303.00		\$ 1,232,237.00			
Less: Values of Any Property Being Replaced	\$					
Net Values Upon Completion of Project	\$ 8,445,303.00		\$ 1,232,237,00			
ACTUAL	COST		ASSESSED VALUE			
Values Before Project	s		\$			
Plus: Values of Proposed Project	\$ 8,445,303.00		Š			
Less: Values of Any Property Being Replaced	'š .		\$			
Net Values Upon Completion of Project	\$ 8,445,303.00		\$			
SECTION 5 WASTI	E CONVERTED AND OTHER BE	ENEFITS PROMISED	BY THE TAXPAYE	R		
	D AND OTHER BENEFITS	A	ESTIMATED ON	SB-1	ACTUAL	
Amount of Solid Waste Converted						
Amount of Hazardous Waste Converted	Talan da karangan da karang					
Other Benefits:			n patriotopialita e identino propria principalita con			
SECTION 6		CERTIFICATION				
I hereby certify that the representations in	this statement are true.				Allen Transcall	
Signature of Authorized Representative		Title Oringinal		Date Signed	(month, day, year)	
		Principal				

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 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 compiled with the Statement of Benefits (Form SB-1/Real Property).
- 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, including 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.
- 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, 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.

Well	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)							
Reaso	Reasons for the Delermination (attach additional sheets if necessary)							
Signal	ure of Authorized Member				Date Signed (month, day, year)			
								
Allesi	ad Bý		_{ting Body} of Madison (Common.	Council			
If the	property owner is found not to be in substantial compliance, the property has been set aside for the purpose of considering compliance. (Hearing)	y owner	shall receive the op	portunity for	a hearing. The following date and			
			Location of Hearing	O) days or an	s date of framing of this reason,			
ime	of Hearing		Encount of Licenses					
	HEARING RESULTS (to be	complet	ed after the heari					
	☐ Approved			Denied (see	Instruction 4 above)			
Reaso	ns for the Determination (attach additional sheets if necessary)							
			•					
Signal	ure of Authorized Member				Date Signed (month, day, year)			
Allest	ed By		iting Body of Madison (Common	Council			
	APPEAL RIGHTS							
A prot	perty owner whose deduction is denied by the designating body may appeal the des	signating !	ody's decision by fill	ng a complaint	in the office of the clerk of the Circuit or			
Super	Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.							



STATEMENT OF BENEFITS **REAL ESTATE IMPROVEMENTS**

State Form 51767 (R7 / 1-21)

Prescribed by the Department of Local Government Finance

20 23 PAY 20 24

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.

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

- 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 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 January 1 and May 10 of a subsequent year.
- 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)
- 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						eng tidak sakiris Albamaka Masal
Name of taxpayer		TAXPAY	ER INFORMATION			
Riverside To	wer. LP (dba: Rive	rside Tower Apartmen	tree el la sun light avec'h la e. Moù			
Address of taxpayer ((number and street, city, state,	and ZIP code)	(15)			anah kabupatèn
509 Spring S	St. Jeffersonville. IN	V 47130				
Name of contact pers	on		Telephone number		T	
Brandon De	nton		(502) 339-0611	i tanan 1	E-mail add	entended in the control of the contr
SECTION 2		LOCATION AND DESCR	IPTION OF PROPOSED P		paento	on@dentonfloyd.com
Name of designating			IF HOW OF PROPUSED P	ROJECT	D	
City of Madison Common Council					Resolution number	
Location of property			County		DI CE MAI	an affabrat a la l
1001 W. 2nd	St. Madison, IN 47	lefferson		DLGF taxing district number 007		
Description of real pro	perty improvements, redevelo	onal sheets if necessary)	Constant	Estimated start date (month, day, year)		
			raganga ya sani na arinaga mwaniga ma Waliofi na waliofia iliku 18 Maga Maliofia		Decen	nber 01, 2018
					Estimated	completion date (month, day, year
La Lies, are words and register of the second as	ing in our country and prompting out.	and the second s			Febru	ary 01, 2020
SECTION 3	ESTIMA	TE OF EMPLOYEES AND SA	LARIES AS RESULT OF P	ROPOSED PR	OJECT	
Current Number	Oalaries	Number Retained	Salaries	Number Ad		Salaries
0.00	\$0.00	0.00	\$0.00	1.00		\$40,420.00
SECTION 4	M. C.	ESTIMATED TOTAL COST	AND VALUE OF PROPOS	ED PROJECT		- 12 ASSES
				REAL ESTATE	MPROVEN	IENTS
			COST		A	ASSESSED VALUE
Current values				ta visit fi		90,400.00
	alues of proposed project			8,445,303.00		
Not estimated as	ny property being replaced					
SECTION 5	lues upon completion of p			8,445,303.00	1,232,237.00	
SECTION 5	VV	ASTE CONVERTED AND OTH	ER BENEFITS PROMISED	BY THE TAXE	YAYER	
Estimated solid w	vaste converted (pounds)		Estimated hazardous	waeta canvarle	ساسستان الم	
Other benefits			L-ourinted Hazardods	waste convent	iu (pourias ₎	
	TARREST AND		•			•
SECTION 6		TAXPAYER	CERTIFICATION		<u> </u>	
I hereby certify	that the representations	s in this statement are true.				
Signature of authorized	1 representative				Data sissen	I formath de
He Bun	オスニー				vate signed	i (month, day, year)
rinted name of author	ized representative		Tiue			
Brandon Dent	on		Principal	1		
			Frincipal	l		

	FOR USE OF THE DESIGNATING BODY								
We find that the applicant meets the general standards in the resolution adopted or to be adopted by this body. Said resolution, passed or to be passed under IC 6-1.1-12.1, provides for the following limitations:									
A	The designated area has be expires is	een limited to a peri	od of time not to excee This question address	edses whether the re	calendar years* (see t esolution contains an e	below). The date this designation xpiration date for the designated area.			
В.	The type of deduction that is 1. Redevelopment or rehabi 2. Residentially distressed a	litation of real estat		l to:					
c.	C. The amount of the deduction applicable is limited to \$								
D.	D. Other limitations or conditions (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			
We ha	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 tille of authorized	member of designatir	ng body)	Telephone number		Date signed (month, day, year)			
Printed na	ame of authorized member of des	ignating body		Name of designation	ng body				
Attested I	by (signature and title of attester)			Printed name of at	tester				
* If the	e designating body limits the t yer is entitled to receive a dec	lime period during v duction to a number	which an area is an eco of years that is less th	onomic revitalizati han the number of	on area, that limitation fyears designated und	does not limit the length of time a er IC 6-1.1-12.1-17.			
 A. For residentially distressed areas where the Form SB-1/Real Property was approved prior to July 1, 2013, the deductions established in IC 6-1.1-12.1-4.1 remain in effect. The deduction period may not exceed five (5) years. 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. Except as provided in IC 6-1.1-12.1-18, the deduction period may not exceed ten (10) years. (See IC 6-1.1-12.1-17 below.) B. For the redevelopment or rehabilitation of real property where the Form SB-1/Real Property was approved prior to July 1, 2013, the abatement schedule approved by the designating body remains in effect. 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. (See IC 6-1.1-12.1-17 below.) 									
Abate Sec. 1 sectio	n 4 or 4.5 of this chapter an a (1) The total a (2) The numbe (3) The averag	abatement schedule imount of the taxpay er of new full-time e ge wage of the new irructure requirement tement of benefits a er this chapter. An ded in IC 6-1.1-12.1 ed for a particular to	based on the followinger's investment in reaquivalent jobs created employees compared to for the taxpayer's in approved after June 36 abatement schedule ne-18, an abatement solaxpayer before July 1,	ig factors: If and personal properties If to the state minimizestment If 2013. A design nust specify the penedule may not expected.	operty. mum wage. ating body shall establi ercentage amount of th roeed ten (10) years.	ne deduction for each year of			

APPLICATION FOR DEDUCTION FROM ASSESSED VALUATION OF STRUCTURES IN ECONOMIC REVITALIZATION AREAS (ERA)

State Form 18379 (R14 / 6-16)
Prescribed by the Department of Local Government Finance

20 23 PAY 20 24

FORM 322 / RE

- 1. This form is to be filed in person or by mail with the County Auditor of the county in which the property is located.
- 2. To obtain this 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 (or new assessment) 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. If the property owner misses the May 10 deadline in the initial year of assessment, he can apply between January 1 and May 10 of a subsequent year for the remainder of the abatement term. (See also IC 6-1.1-12.1-11.3 concerning the failure to file a timely application.)
- 3. A copy of the Form 11, the approved Form SB-1 / Real Property, the resolution adopted by the designating body, and the Form CF-1 / Real Property must be attached to this application.
- 4. The Form CF-1 / Real Property must be updated annually and provided to the County Auditor and the designating body for each assessment year in which the deduction is applicable.
- 5. Please see IC 6-1.1-12.1 for further instructions.
- 6. Taxpayer completes Sections I, II and III below.
- If property located in an economic revitalization area is also located in an allocation area as defined in IC 36-7-14-39 or IC 36-7-15.1-26, an application for the property tax deduction may not be approved unless the Commission that designated the allocation area adopts a resolution approving the application (IC 6-1.1-12.1-2(k)).
- Except for deductions related to redevelopment or rehabilitation of real property in a county containing a consolidated city, a deduction for the
 redevelopment or rehabilitation of real property may not be approved for the following facilities (IC 6-1.1-12.1-3);
 - a. Private or commercial golf course
 - b. Country club
 - c. Massage parlor
 - d. Tennis club
 - e. Skating facility, including roller skating, skateboarding or ice skating
 - f. Racquet sport facility (including handball or racquet ball court)
 - g. Hot tub facility
 - h. Suntan facility
 - i. Racetrack

- Any facility, the primary purpose of which is (a) retail food and beverage service; (b) automobile sales or service; or (c) other retail; (unless the facility is located in an economic development-target area established under IC 6-1.1-12.1-7).
- k. Residential, unless the facility is a multi-family facility that contains at least 20% of the units available for use by low and moderate income individuals, or unless the facility is located in an economic development target area established under IC 6-1.1-12.1-7, or the area is designated as a residentially distressed area which is required to meet conditions as cited in IC 6-1.1-12.1-2(c)(1 & 2).
- I. Package liquor store (see IC 6-1,1-12,1-3(e)(12))

County Jefferson	Town	nship	DLGF taxing district number	· · · · · · · · · · · · · · · · · · ·	Key number
Name of owner	wer, LP (dba: Rive	rside Tower Apartments)	Legal description from Form	11 P	
	mber and street, city, state, an St. Madison, IN 47			Date of Form 11 (month, day, year, April 11,2024	
Type of structure Limited Partn		4		# 1	Use of structure Residential
Governing body that a City of Madis	approved ERA designation SON		Date ERA designation appro 09/18/2		Resolution number 2018-14
		SECTION II - VERIFICATION OF		ITATIVE	
Signature of owner or	representative (I hereby certi	fy that the representations on this appli	cation are true.)		Date signed (month, day, year)
KIT TO			Married total - may		
Printed name of owner Brandon Den		Address (number and street,	city, state, and ZIP code) ffersonville, IN 471:		
		Address (number and street, 509 Spring St. Jei	• • • • • • • • • • • • • • • • • • • •		AUDITOR'S USE
Brandon Den		Address (number and street, 509 Spring St. Je	ffersonville, IN 471		
Brandon Den	nton	Address (number and street, 509 Spring St. Jet SECTION III -	ffersonville, IN 4713 STRUCTURES \$		
Brandon Den	nton Cture 1. Assessed valuation A 2. Assessed valuation B	Address (number and street, 509 Spring St. Jet SECTION III -	ffersonville, IN 4713 STRUCTURES \$	30	
Brandon Den	cture 1. Assessed valuation A 2. Assessed valuation B 3. Difference in assesse 4. Assessed valuation e (for the increase in A	Address (number and street, 509 Spring St. Jet SECTION III - FTER rehabilitation EFORE rehabilitation d valuation (Line 1 minus Line 2)	ffersonville, IN 471; STRUCTURES \$ \$	30	
Brandon Den A. Rehabilitation struc	nton 1. Assessed valuation A 2. Assessed valuation B 3. Difference in assessed 4. Assessed valuation e (for the increase in AV for	Address (number and street, 509 Spring St. Jet SECTION: III-FTER rehabilitation EFORE rehabilitation d valuation (Line 1 minus Line 2) ligible for deduction V from the rehabilitation, not including	ffersonville, IN 471; STRUCTURES \$ \$	30	
Brandon Den	nton 1. Assessed valuation A 2. Assessed valuation B 3. Difference in assessed 4. Assessed valuation e (for the increase in AV fro structure)	Address (number and street, 509 Spring St. Jel SECTION III - FTER rehabilitation EFORE rehabilitation of valuation (Line 1 minus Line 2) ligible for deduction V from the rehabilitation, not including om the reassessment of the entire	ffersonville, IN 4713 STRUCTURES \$ \$ \$ \$	30	
Brandon Den	nton 1. Assessed valuation A 2. Assessed valuation B 3. Difference in assesses 4. Assessed valuation e (for the increase in A// fro structure) 1. Assessed valuation	Address (number and street, 509 Spring St. Jel SECTION III - FTER rehabilitation EFORE rehabilitation of valuation (Line 1 minus Line 2) ligible for deduction V from the rehabilitation, not including om the reassessment of the entire	ffersonville, IN 471; STRUCTURES \$ \$ \$ \$ \$ \$ \$	30 111,000.00	

SECTION V - FOR AR	EAS EXCEPT FOR A RESIDENTIALL	Y DISTRESSED AREA WHERE THE STATEMENT OF BENEFITS WAS DEDUCTION SCHEDULE PER IC 6-1.1-12.1-17
YEAR OF DEDUCTION / ASSESS	ED VALUE / PERCENTAGE / DEDUCTION	DEDUCTION SCREDULE PERIC 6-1.1-12.1-17 N* YEAR OF DEDUCTION / ASSESSED VALUE / PERCENTAGE / DEDUCTION
(1) For deductions allowed over a one	(1) year period:	(8) For deductions allowed over a eight (8) year period:
1 20 pay 20 \$	100% *% \$	1 20 pay 20 \$ 100% *% \$
(2) For deductions allowed over a two	(2) year period:	2 20 pay 20 \$ 88% *% \$
1 20 pay 20 \$	100% * % \$	3 20pay 20\$75% +% \$
2 20 pay 20 \$	50% * % \$	4 20 pay 20 \$ 63% * % \$ 5 20 pay 20 \$ 50% * % \$
		5 20 pay 20 \$ 50% * % \$
(3) For deductions allowed over a thre	e (3) year period:	7 20 pay 20 \$ 25% * % \$
1 20pay 20\$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 20 pay 20 \$ 13% *% \$
2 20 pay 20 \$ \$	66% *% \$	(9) For deductions allowed over a nine (9) year period:
3 20 pay 20 \$	33% *% \$	
(4) For deductions allowed over a four	(4) year period:	1 20pay 20 \$100% *% \$ 2 20 pay 20 \$ 88% * % \$
1 20 pay 20 \$	100% *% \$	2 20pay 20 \$ 88% *% \$ 3 20pay 20 \$ 77% *% \$
2 20 pay 20 \$	75% *% \$	
3 20pay 20\$	50% *% \$	5 20 pay 20 \$ 55% *% \$
4 20 pay 20 \$	25% *% \$	6 20 pay 20 \$ 44% *% \$
(5) For deductions allowed over a five ((5) year period:	7 20pay 20\$ 33% *% \$
1 20pay 20\$		8 20 pay 20 \$ 22% *% \$
2 20pay 20\$		9 20pay 20 \$ 11% *% \$
3 20pay 20\$		(10) For deductions allowed over a ten (10) year period:
4 20 pay 20 \$		-
5 20 pay 20 \$	20% *% \$	_ 2 20pay 20 \$95% *% \$
(6) For deductions allowed over a six (6	s) year period:	3 20pay 20\$80% *% \$
		4 20 pay 20 \$ 65% *% \$
1 20 pay 20 \$2 20 pay 20 \$		_ 5 20_ pay 20 \$ 50% *% \$
3 20pay 20\$	66% *% \$	- 6 20pay 20 \$ 40% * % \$
4 20 pay 20 \$		_ 7 20 pay 20 \$ 30% *% \$ _ 8 20 pay 20 \$ 20% *% \$
5 20 pay 20 \$	34% *% \$	_ 9 20 pay 20 \$ 10% * % \$
6 20pay 20\$	17% *% \$	_ 10 20 pay 20 \$ 5% * % \$
(7) For deductions allowed over a sever	n (7) year period:	NOTE: The deduction percentages shown in this section apply to a
1 20 pay 20 \$		NOTE: The deduction percentages shown in this section apply to a statement of benefits approved before July 1, 2013 that did not
2 20 pay 20 \$		have an alternative deduction schedule adopted by the
3 20 pay 20 \$		designating body. All other abatements shall use the percentages reflected in the abatement schedule adopted by the designating
4 20 pay 20 \$	57% *% \$	body per IC 6-1.1-12.1-17.
5 20 pay 20 \$	43% *% \$	* **
6 20pay 20\$	29% *% \$	The amount of the deduction shall be adjusted annually to reflect changes to the assessed valuation resulting from a reassessment or an appeal of
7 20 pay 20 \$	14% *% \$	the assessment per IC 6-1.1-12.1-4(b).
SECTION VI - FOR A RESIDE	NTIALLY DISTRESSED AREA WHERE	THE STATEMENT OF BENEFITS WAS APPROVED BEFORE JULY 1, 2013
		DULE PER IC 6-1.1-12.1-17
TYPE OF DWELLING	[IC 6-1.1-	THE LESSER OF: 2.1-4.1(b)] DEDUCTION IS ALLOWED FOR A FIVE (5) YEAR PERIOD THAT INCLUDES YEARS:
г п		
One (1) family dwelling	Assessed value (after rehabilitation or rede	velopment) \$ or \$74,880 AV pay through pay
Two (2) family dwelling	Assessed value (after rehabilitation or rede	velopment) \$ or \$106,080 AV pay through pay
	Treatment of the control of the cont	velopment) \$ or \$106,080 AV pay through pay
Three (3) unit multifamily dwelling	Assessed value (after rehabilitation or rede	velopment) \$ or \$156,000 AV pay through pay
П		
Four (4) unit multifamily dwelling	Assessed value (after rehabilitation or rede	
		\$36,000, \$51,000, \$75,000, and \$96,000 for one to four family dwellings, respectively.
		AUDITOR (COMPLETE ONLY IF APPROVED)
This application is approved in the lignature of County Auditor	· · · · · · · · · · · · · · · · · · ·	ame of County Auditor Date signed (month, day, year)
		, and any, justi

COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R6 / 4-23)
Prescribed by the Department of Local Government Finance

2024 PAY 2025

FORM CF-1 / Real Property

INSTRUCTIONS:

- 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).
- 2. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
- 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 6-1.1-12.1-5.3(j))
- 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).

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.3 (k) and (I).

SECTION 1	TAXPAYER	NFORMATION	er i di Karawatan	¥4.41-4655)	a emineral en	
Name of Taxpayer				County		
Trilogy Real Estate of Madison LLC				Jeffer		
Address of Taxpayer (number and street, city, stat	le, and ZIP code)				axing District Number	
303 N. Hurstbourne Pkwy, Ste 200,	Louisville, KY 40222			39-00		
Paulie Shively, Vice President - Tax	Compliance	Telephone Number (502) 213-75	07	Email A		
SECTION 2	LOCATION AND DESC			paulie	shively@trilogyhs.com	
Name of Designating Body	ECCATION AND DESC	Resolution Number	ERIT	Estimat	ed Start Date (month, day, year)	
Madison City Council		69-2015/71-20)15	Louino	ou otast batts (month, day, year)	
Location of Property				Actual S	Start Date (month, day, year)	
120 Presbyterian Ave, Madison, IN		3.1		ary 2015		
Description of Real Property Improvements					d Completion Date (month, day, year)	
Complete rehab of the building, incl structural improvements.	uding new HVAC, windows	s, plumbing, and	other		mber 2015	
structural improvements.					Completion Date (month, day, year)	
SECTION 3	CHOLOVECO	AND CALABIES		rebru	ary 2016	
EMPLOYEES AND S	·	AND SALARIES	WATER ON OR 4			
Current Number of Employees	PALARIES	A5 E51	IMATED ON SB-1	***************************************	ACTUAL	
Salaries	***************************************	<u> </u>	· · · · · · · · · · · · · · · · · · ·	·····		
Number of Employees Retained						
Salaries						
					raper d'	
Number of Additional Employees					107	
Salaries SECTION 4	t As all small to the district	2,700,000.00	and the second of	2 : NO	2,800,408.62	
	COSTAN	ID VALUES				
COST AND VALUES		REAL ESTA	TE IMPROVEMENTS	; 		
AS ESTIMATED ON SB-1	COST			ASSESSED VALUE		
Values Before Project	\$	ng ng kalipaganga ayag sa	\$			
Plus: Values of Proposed Project	\$ 15,100,000.00		\$			
Less: Values of Any Property Being Replaced	\$		\$	The second secon		
Net Values Upon Completion of Project	\$ 15,100,000,00		\$	\$		
ACTUAL	COST		ASSESSED VALUE			
Values Before Project	\$ 0		\$			
Plus: Values of Proposed Project	\$ 15,020,367.22		\$			
Less: Values of Any Property Being Replaced	\$0		\$			
Net Values Upon Completion of Project	\$ 15,020,367.22		\$	-		
SECTION 5 WASTI	E CONVERTED AND OTHER BE	NEFITS PROMISE	D BY THE TAXPAYE	R		
	D AND OTHER BENEFITS		AS ESTIMATED ON	SB-1	ACTUAL	
Amount of Solid Waste Converted						
Amount of Hazardous Waste Converted						
Other Benefits:			ay an an area a segui			
SECTION 6		CERTIFICATION		in care in contact		
I hereby certify that the representations in	this statement are true.	, var erin bejlev (f. 1945). I				
Signature of Authorized Representative	e la	Title SUP - 7	ĀX		Date Signed (month, day, year)	

OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)

INSTRUCTIONS: (IC 6-1.1-12.1-5.3 and IC 6-1.1-12.1-5.9)

- Not later than forty-five (45) days after receipt of this form, the designating body <u>may</u> 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, including 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.
- 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, 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.

Wei	ave reviewed the CF-1 and fi	nd that:						
	The Property Owner IS in Si	ubstant	ial Co	mpliance				
	The Property Owner IS NOT	in Sub	stanti	al Compliance			****	
	Other (specify)							
Reaso	ns for the Determination (attach a	dditional	sheets	s if necessary)				
Signati	ure of Authorized Member						· · · · · · · · · · · · · · · · · · ·	Date Signed (month, day, year)
Atteste	Attested By Designating Body							
					Mad	ison City Co	uncil	
If the time I	property owner is found not to has been set aside for the pur	be in pose of	substa f cons	antial compliance, the propertidering compliance. (Hearing	y owner must be	shall receive the op held within thirty (3	pportunity for 30) days of th	a hearing. The following date and e date of mailing of this notice.)
	f Hearing		AM	Date of Hearing (month, day, yea		Location of Hearing		
			РМ					
		7		HEARING RESULTS (to be	comple	ted after the hear		
Pageo	L ns for the Determination (attach ad		prove			Ц	Denied (see	e Instruction 4 above)
1102301	is to the occanination parasit ac	uuoona	Silvers	ii necessary)				
Signatu	re of Authorized Member							Date Signed (month, day, year)
Atteste	d By					ating Body ison City Co	uncil	1
				APPEAL RIGHTS [
A prope	erty owner whose deduction is der or Court together with a bond cond	nied by t	he des to pay	ignating body may appeal the des the costs of the appeal if the appe	ignating t al is dete	oody's decision by filir rmined against the pr	ng a complaint operty owner.	n the office of the clerk of the Circuit or

- INITIAL FORM 322/RE-



APPLICATION FOR DEDUCTION FROM ASSESSED VALUATION OF STRUCTURES IN ECONOMIC REVITALIZATION AREAS (ERA)

State Form 18379 (R14 /6-16)

Prescribed by the Department of Local Government Finance

20 18 PAY 20 19

FORM 322 / RE

INSTRUCTIONS:

- 1. This form is to be filed in person or by mail with the County Auditor of the county in which the property is located.
- 2. To obtain this 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 (or new assessment) 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. If the property owner misses the May 10 deadfire in the initial year of assessment, he can apply between January 1 and May 10 of a subsequent year for the remainder of the abatement term. (See also IC 6-1.1-12.1-11.3 concerning the failure to file a timely application.)
- Account the Form 11, the approved Form SB-1 / Real Property, the resolution adopted by the designating body, and the Form CF-1 / Real Property must be attached to this application.
- The Form CF-1 / Real Property must be updated annually and provided to the County Auditor and the designating body for each assessment year in which
 the deduction is applicable.
- 5. Please see IC 6-1.1-12.1 for further instructions.
- 6. Taxpayer completes Sections I, II and III below.
- If property located in an economic revitalization area is also located in an allocation area as defined in IC 36-7-14-39 or IC 36-7-15.1-26, an application for the property tax deduction may not be approved unless the Commission that designated the allocation area adopts a resolution approving the application (IC 6-1.1-12.1-2(k)).
- Except for deductions related to redevelopment or rehabilitation of real property in a county containing a consolidated city, a deduction for the redevelopment or rehabilitation of real property may not be approved for the following facilities (IC 6-1.1-12.1-3):
 - a. Private or commercial golf course
 - b. Country club
 - c. Massage parlor
 - d. Tennis club
 - e. Skating facility, including roller skating, skateboarding or ice skating
 - f. Recquet sport facility (including handball or recquet ball court)
 - g. Hot tub facility
 - h. Suntan facility
 - i. Recetrack

- Any facility, the primary purpose of which is (s) retail food and beverage service; (b) automobile sales or service; or (c) other retail; (unless the facility is located in an economic development-target area established under IC 6-1.1-12.1-7).
- uncer to -1.1-12.1-17.

 R. Residentiel, unless the facility is a multi-family facility that contains at less 20% of the units available for use by low and moderate income individuals, or unless the facility is located in an economic development target trias established under to 6-1.1-12.1-7, or the area is designated as a residentially distressed area which is required to meet conditions as citied in IC 6-1.1-12.1-2(c)(1 & 2).
- Package figure store [see IC 6-1.1-12.1-3(e)(12)]

<u> </u>		i. Facility after same face in	
The owner hereby applies to the	e County Auditor for a deduction pur	suant to IC 6-1.1-12.1-5 beginning with	he assessment date January 1, 20
County Jefferson	Township Madison	DLGF bixing district number	Kay number
Name of owner Trilogy Real Estate Mad	ison LLC	Legal description from Form 11	
Property address (number and street, of 120 Presbyterian Ave, N	- "프라마스 (A		Date of Form 11 (month, day, year)
Type of structure Rehab of the former KD	H Hospital		Use of structure Skilled nursing/Assisted Living
Governing body that approved ERA des Common Council of City		Date ERA designation approved (r 12/08/2015	north, day, year) Resolution number 71-2015
Man & S	pereby certify that the representations or UVIII		Date signed (reports, day, year)
Printed harne-off owner or representative Mary L Shively	303 N. Hun	end street, city, state, and ZIP code) stbourne #200, Louisville, KY	40222 502 - Z13 - 7587
		ere erelie ilia.	AUDITOR'S USE
A. Rehabilitation structure 1. Assessed	valuation AFTER rehabilitation	<u>S</u>	
2. Assessed	valuation BEFORE rehabilitation	en sy transition and the second	Professional Control of the Control
3. Difference	s in assessed valuation (Line 1 minus Lin	ne 2) \$	
(for the in	I valuation eligible for deduction crease in AV from the rehabilitation, not see in AV from the reassessment of the s	including source	
B. New structure 1. Assessed	f valuation	\$	
2. Assessed	f valuation aligible for deduction		
	The second secon		A RELATION OF THE PARTY OF THE
I verify that the above described effective date of the assessmen	d structure was assessed and the over the structure was assessed and the over the structure of the structure was assessed and the over the structure was assessed and the structure was assessed and the structure was assessed as a structure was assessed as a structure was assessed as a structure was a s	wher was notified on I that the assessed valuations in Section	, with the
Signature of assessing official	P	inted name of assessing official	Date (month, day, year)

SECTION V - FOR A	REAS EXCEPT FOR A RESIDENTIALLY D	ISTRESSED AREA WHERE THE S	TATEMENT OF BENEFITS WAS		
	ED VALUE / PERCENTAGE / DEDUCTION*		SED VALUE / PERCENTAGE / DEDUCTION**		
(1) For deductions allowed over a one		(8) For deductions allowed over a eig			
1 20 pay 20 \$	100% * % \$	1 20pay 20\$	100% * % \$		
		2 20 pay 20 \$			
(2) For deductions allowed over a two	(2) year period:	3 20 pay 20 \$	75% % \$		
1 20 pay 20 \$	100% *% 5	4 20 pay 20 \$	63%% \$		
2 20 pay 20 \$	50% *% \$	5 20pay 20\$	50% *% \$		
(3) For declusions allowed over a thre	se (3) year period:	6 20 pay 20 5	38% *% \$		
1 20 pay 20 \$		/ 20pay 20 \$	25% '% S		
2 20 pay 20 \$	100% *% \$	8 20 pay 20 \$	13% *% \$		
3 20 pay 20 \$	33% · % \$	(9) For deductions allowed over a nin	e (9) year period:		
(4) For deductions allowed over a four	(4) year period:	1 20 pay 20 5 2 20 pay 20 5	100% *% \$ 88% *% \$		
1 20 pay 20 \$	100% •% \$	3 20 pay 20 \$	77% % S		
2 20pay/20\$	75% *% \$	4 20 pay 20 \$	66% % \$		
3 20pay 20 \$	50% '_% \$	5 20pay 20 \$	55% % \$		
4 20 pay 20 S	% \$	6 20 pay 20 5	44% *% \$		
(5) For deductions allowed over a five.	(5) year period:	7 20 pay 20 \$	33% % \$		
•		8 20 pay 20 s	22% "% \$		
1 20 pay 20 \$ 2 20 pay 20 \$	100% *% \$ 80% * % \$	9 20pay 20 \$	11% • _ % \$		
3 20 pay 20 \$	50% ' % \$	(10) For deductions allowed over a tar	n (10) vear reging		
4 20 pay 20 \$	40% * % S	†	0,700,00% - 100% \$3780,700		
5 20 pay 20 \$	20% % \$				
			2700 95% 95% \$3591, 605 200 80% 80% \$3022,560		
(6) For deductions allowed over a six (6	S) year period:		0,700 65% · 65% s		
1 20pay-20 \$	100% *% \$	5 209/ pay 2099 \$	50% 50% \$		
2 20pay 20\$	85% *% \$	6 20-53 pay 20-3-3 \$	40% · 40 % \$		
3 20 pay 20 \$	66% *% \$	7 2093 pay 2074 'S	30% 30% \$		
4 20 pay 20 \$	50% *% \$	8 2034 pay 2035 \$	20% * <u>20</u> % \$		
5 20 pay 20 \$ 6 20 pay 20 \$	34% *% \$	9 20 <u>35 pay 2036</u> \$	10% * <u>/0</u> % \$		
6 20pay 20 \$	17% % \$	10 20 <u>46</u> pay 20 <u>47</u> 5	5% • <u>5</u> % \$		
(7) For deductions allowed over a sever	n (7) year period:	NOTE: The deduction percent	tages shown in this section apply to a		
1 20pay 20 \$	100% *% \$	statement of benefits a	pproved before July 1, 2013 that did not		
2 20 pay 20 \$	85% * % \$	have an alternative	deduction schedule adopted by the		
3 20 pay 20 \$	71% % % \$		ner abatements shall use the percentages ent schedule adopted by the designating		
4 20pay 20\$	57% *% \$	body per IC 8-1.1-12,1-1	17.		
5 20pay 20 \$	43% *% 5		···		
6 20pay 20\$	29% *% \$	to the assessed valuation result	lell be adjusted annually to reflect changes:		
7 20pay. 20 \$	14% *% \$	the assessment per IC 6-1.1-12	2.1-4(b).		
SECTION VI FOR A RESIDE	TTALLY DISTRESSED AREA WHERE TH DEDUCTION SCHEDUL	E STATEMENT OF BENEFITS WA E PER IC 6-1.1-12.1-17	S APPROVED BEFORE JULY 1, 2013		
TYPE OF DWELLING	DEDUCTION IS THE	LESSER OF:	DEDUCTION IS ALLOWED FOR A FIVE (5) YEAR PERIOD THAT INCLUDES YEARS:		
One (1) family dwelling.	Assessed value (affer rehabilitation or redevelo	pment) \$ or \$74,880 AV	pay through pay		
Two (2) family dwelling	Assessed yalua (aftar rahabililation or redevelo	pment) \$ or \$106,080 AV	paythroughpay		
Three (3) unit multifamily dwelling	Assessed value (after rehabilitation or redevelo	pment) \$ or \$156,000 AV	paythroughpay		
Four (4) unit multifamily dwelling	Assessed value (after rehabilitation or redevelop		paythroughpay		
Assessed value limits for taxes due ar	nd payable prior to January 1, 2005 were \$36,				
	CTION VII - APPROVAL OF COUNTY AU				
This application is approved in the					
nature of County Auditor Date signed (month, day, year)					

- INITIAL FORM SB-1



STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

Sinte Form \$1767 (\$46.718-14)

ment is being completed for seet property that questies under the following indianal Code (obset one body, elopment or relabilitation of real estate improvements (IC 6-1,1-12-1-4) safety distressed area (IC 6-1,1-12,1-4,1)

24__MY28

PORCH SEL-1 / Road Property

	Act (Carlotte)		والمستحدث فالكليانات						 -
			The Land				A		be designed or
	The second second	the second second second	THE PLANT	المستندة المستند					COLUMN TO SERVICE STATE OF THE PARTY.
	mailine from the	manager of the same	مأد ولا مسلط	ومحالب بسطياء	مسالسلات	السنسان المراج	and Constant	L. Strafferdon	 ates. Par about
		sharmen or as some	may no se	THE RESERVE		or standarding			

information from the applicant immulting its decision about whether to dealprate an Economic Postituitation Area. Otherwise, this statement must be authoritied to the shadpasting body REPOATE the redevelopment or substitution of mal property for which the person where to claim a decisation.

2. The authoritied betwell them must be submitted to the designating body and the new decignant an economic revelopment or inhalitation for which the person dealprate to claim a deduction.

2. To obtain a deduction, a Form 322PE must be that with the County Auditor before May 10 in the year in which the addition to assessed velocities in made or and later than thinly 100 defer after the assessment matter is audited to the year in which the addition to assessed velocities in made or and later than thinly 100 defer after the assessment matter is audited to the year in which the addition that the person of the sales of the property owner it is used after April 10. A property owner who these there is a decision within the prescribed deadline may be an application between Mass in the April 10 of a exhaustion from the April 10 of a exhaustion from CF-14 or April 10 of a exhaustion in the Property wheel the admittal to the Form 322PE when the deduction is first claimed and then implied an arrangly for each year the education is applicable. If 6.1.1-12.1.5.1p)

For a Form SB-14 form Property that is approved prior to July 1, 2013, the abstract achecide approved by the designating body remarked in effect. IC 6-1.1-12.1-17

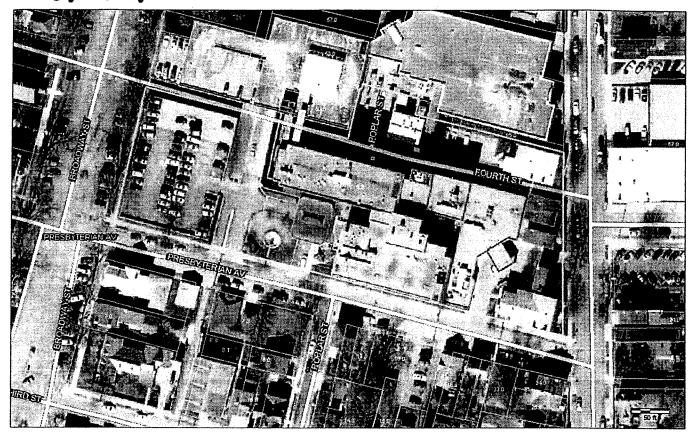
3-14-54		31494	CE MEDAMATIONS				
Trilogy Real E	stata Madison, LLC	A CHARLES		t til in interpenture	a property en	age afree wife a earl se	
	familiar and about, city sine, i occarna Pagitavary, Suite	nd ZP acts) 200, Louisville, KY 40	<i>m</i>	The second of th			
	VIVI and the second of the sec		Talaphane autopar		Seed street		
Todd Schmiddeler			(502) 213-7417	7	fodda@tri	ogytra.com	
		LOCATION AND DATE.	ention of this asso	rac eci i			
ladison City (71-2015		
12 Presbyter			Jefferson		CLEF house of		
nacryddol of said yr Complete rehebli saidheridais	Second the former RDH ha	person, or refunditioning from acti equital building including room	History planting	and other	1/15	data (marak, day, yaw)	
e Pagyali Gerbedi	The set the set of the set	त्रकार्यं स्टब्स्य विकास स्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस जनसङ्ख्याने स्टिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्रिस्ट्	or is to record or angle a second displaced of the whole the second displaced the first second of the whole the second displaced the first second displaced to the second disp	e inner vere en en in elega en val leneva en el elega en val leneva en elega	12/15	بر پند (انحمار عما معاد	
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				REAL ESTATE			
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Current values			e projekty karakteria k		district		
	values of proposed project	e i na dje e i gareke i na	a kaj u u anggara ya sa	10,100,000,00			
Lace values of	any property being replace	<u> </u>		A.D.			
	rakuna upon compision of p			Al Asthern			
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I hereby south	ly that the regularization	us in this statement are i	rue.				
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Section 6. With respect to the Real Property, the percentage of deductions for each of said ten (10) years shall be as follows:

Year 1 (2017)	100%%
Year 2 (2018)	95%%
Year 3 (2019)	80%%
Year 4 (2020)	65%%
Year 5 (2021)	50%%
Year 6 (2022)	40%
Year 7 (2023)	30%
Year 8 (2024)	20%
Year 9 (2025)	10%
Year 10 (2026)	5%

Exhibit A



Printed 11/17/2015

COMMON COUNCIL OF THE CITY OF MADISON, INDIANA

Resolution No. 7 - 2015

REAL PROPERTY TAX ABATEMENT

CONFIRMATORY RESOLUTION FOR THE DESIGNATION OF AN ECONOMIC REVITALIZATION AREA AND WAIVER OF NON-COMPLIANCE

WHEREAS, the City of Madison, Indiana (the "City") has been requested by Trilogy Real Estate Madison, LLC (the "Applicant") to find pursuant to IC 6-1.1-12.1-2 that an area (the "Area") is an Economic Revitalization Area, which Area will contain the Project (as hereinafter defined); and

WHEREAS, the Common Council of the City (the "Council") has prepared a simplified description of the Area or maps and plats that identify the Area, attached as Exhibit A; and

WHEREAS, the Area is located within the jurisdiction of the City for the purposes set forth in IC 6-1.1-12.1-2; and

WHEREAS, the Applicant has and intends to construct improvements to its existing facility on its property located at 112 Presbyterian Ave. (the "Real Property"), consisting of rehabilitation of the former KDH building in the Area, as described in the Statements of Benefits (the "Statements of Benefits") submitted by the Applicant to the Council (the "Project"); and

WHEREAS, the Council has reviewed the Statements of Benefits; and

WHEREAS, pursuant to IC 6-1.1-12.1-2, on November 17, 2015, the Council adopted a Resolution (the "Declaratory Resolution"), which designated the Area as an "economic revitalization area" pursuant the Act and approved real property tax deductions under IC 6-1.1-12.1-3 for redevelopment or rehabilitation in the Area for ten (10) years; and

WHEREAS, in compliance with IC 6-1.1-12.1-2.5, the Council published notice (the "Notice") describing the adoption and substance of the Declaratory Resolution and stating that, on the date hereof, the Council would hold a public hearing (the "Public Hearing") at which it will receive and hear all remonstrances and objections from interested persons, with respect to the Declaratory Resolution; and

WHEREAS, in compliance with IC 6-1.1-12.1-2.5, the Council filed, with each taxing unit that has authority to levy property taxes in the Area, a copy of the Notice and the Statements of Benefits; and

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WHEREAS, in compliance with IC 6-1.1-12.1-2.5, on the date hereof, the Council held the Public Hearing at which it received, heard and considered evidence concerning the Declaratory Resolution and any remonstrances or objections with respect to the Declaratory Resolution; and

WHEREAS, following publication of notice as required by law, pursuant to IC 6-1:1-12.1-11.3, on the date hereto the Council, held a public hearing concerning the proposed waiver of noncompliance due to the Applicants failure to submit the completed Statement of Benefits form to the designating body before initiation of the redevelopment or rehabilitation (the "Waiver"); and

WHEREAS, pursuant to IC 6-1.1-12.1-2.5, the Council desires to take final action confirming the Declaratory Resolution and the Waiver;

NOW, THEREFORE, BE IT RESOLVED, by the Common Council of the City of Madison, Indiana, as follows:

Section 1. The Council hereby finds that (i) the Area is within the City and (ii) the Area has become undesirable for, or impossible of, normal development and occupancy because of a lack of development, cessation of growth, deterioration of improvements or character of occupancy, age, obsolescence, substandard buildings, or other factors which have impaired values and prevented a normal development of property and use of property.

Section 2. The Area is hereby declared to be an "economic revitalization area" pursuant to IC 6-1.1-12.1. The period for real property tax deductions under IC 6-1.1-12.1-3 for redevelopment or rehabilitation in the Area shall be ten (10) years.

Section 3. The determination to wave noncompliance pursuant to IC 6-1.1-12.1-11.3 as outlined in the Declaratory Resolution 69-2015 is hereby affirmed.

<u>Section 4</u>. Based on the information in the Statements of Benefits describing the Project, the Council makes the following findings:

- (a) That the estimate of the value of the redevelopment or rehabilitation of the Real Property is reasonable for projects of that nature.
- (b) That the estimate of the number of individuals who will be employed or whose employment will be retained as a result of the proposed redevelopment or rehabilitation of the Real Property can reasonably be expected to result from the proposed redevelopment or rehabilitation of the Real Property.
- (c) That the estimate of annual salaries of those individuals who will be employed or whose employment will be retained can reasonably be expected to result from the proposed redevelopment or rehabilitation of the Real Property.
- (d) That the number of individual opportunities for employment, both temporary and permanent, and the compensation to be paid to employees, along with the value of the acquisition

and construction of improvements as a result of the Project, create benefits of the type and quality anticipated by the Council within the Area and can reasonably be expected to result from the proposed redevelopment or rehabilitation of the Real Property.

(e) That the benefits described in the Statements of Benefits can reasonably be expected to result from the proposed redevelopment or rehabilitation of the Real Property.

(f) That the totality of benefits from the proposed redevelopment or rehabilitation of the Real Property is sufficient to justify a ten-year real property tax deduction period.

Section 5. Based on the information in the Statements of Benefits and the foregoing findings, the Council, pursuant to IC 6-1.1-12.1, hereby approves and allows the Applicant real property tax deductions for ten (10) years as set for in Section 2 and Section 6 for the redevelopment located in the Area.

Section 6. With respect to the Real Property, the percentage of deductions for each of said ten (10) years shall be as follows:

Year 1 (2017)	100%%
Year 2 (2018)	95%%
Year 3 (2019)	80%%
Year 4 (2020)	65%%
Year 5 (2021)	50%%
Year 6 (2022)	40%
Year 7 (2023)	30%
Year 8 (2024)	20%
Year 9 (2025)	10%
Year 10 (2026)	5%

Section 7. The Council hereby confirms the Declaratory Resolution, and the actions set forth in this Resolution are final, except for the limited rights of appeal provided under IC 6-1.1-12.1-2.5.

Section 8. The Clerk-Treasurer is hereby authorized to make all filings necessary or desirable and to take all other necessary actions to carry out the purposes and intent of this Resolution and the deductions approved hereunder.

Section 9. This Resolution shall be in full force and effect from and after its adoption.

Passed and adopted by the Common Council of the City of Madison, Jefferson County, Indiana, this Gru day of December 2015.

Presiding Officer



This resolution presented by me; the Clerk-Treasurer of the City of Madison, Indiana to the Mayor for his approved this THE day of December 2, 2015.

This resolution signed and approved by me, the Mayor of the City of Madison, Indiana, this <u>Structure</u>, 2015.

RESOLUTION 69 -2015

A RESOLUTION OF THE COMMON COUNCIL OF THE CITY OF MADISON, INDIANA ESTABLISHING AN ECONOMIC REVITALIZATION AREA AND APPROVING A STATEMENT OF BENEFITS ALONG WITH A WAIVER OF NONCOMPLIANCE AND ESTABLISHING THE PERIOD FOR DEDUCTION FOR TRILOGY REAL ESTATE MADISON, LLC FOR PURPOSES OF REAL PROPERTY TAX ABATEMENT

WHEREAS, the Common Council of the City of Madison, Indiana, has pursuant to I.C. 6-1.1-12.1-1, et seq., established a program of personal and real property tax abatement within defined "economic revitalization areas;" and

WHEREAS, Trilogy Real Estate Madison, LLC has submitted a request for tax abatement in the form of a Statement of Benefits for consideration by the Common Council of the City of Madison; and

WHEREAS, Trilogy Real Estate Madison, LLC, a for-profit corporation will be the owner of the property and pay property taxes on the property located at 112 Presbyterian Avenue (see attached Exhibit A); and

WHEREAS, the property located at 112 Presbyterian Avenue was originally purchased by the Trilogy Foundation, a non-profit entity which would not have paid property taxes on the property; and

WHEREAS, work commenced on the rehabilitation of the former King's Daughters Hospital prior to the submission of the Statement of Benefits form or the Common Council establishing an economic revitalization area as required by the I.C. 6-1.1-12.1-3; and

WHEREAS, I.C. 6-1.1-12.1-11.3 grants the designating body the ability by resolution to waive noncompliance due to failure to submit the completed statement of benefits form to the designating body before initiation of the redevelopment or rehabilitation; and

WHEREAS, the Common Council must hold a public hearing before adopting a waiver of noncompliance as required by I.C. 6-1.1-12.1-11.3-c.

WHEREAS, the tax abatement guidelines for the City of Madison, established in Resolution 9-2007 allow for exceptions to be made to allow for a tax abatement to be granted; and

WHEREAS, the Common Council of the City of Madison has considered and found that the estimated jobs to be created, and the estimate of annual salaries, and the value of the rehabilitation of the existing facility can reasonably be expected to result from the project located at 112 Presbyterian Avenue, Madison, IN 47250 and the totality of such benefits is sufficient to justify the deductions described herein.

NOW, THEREFORE, BE IT RESOLVED by the Common Council of the City of Madison, Indiana that said area within City of Madison, Indiana is an economic revitalization area (see attached Exhibit A) within the meaning of I.C. 6-1.1-12.1-1, et seq.

BE IT FURTHER RESOLVED by the Common Council of the City of Madison, Indiana that an exception be made to the City of Madison tax abatement guidelines so that a waiver of noncompliance shall be issued for failure to submit the Statement of Benefits and obtain designation as an economic revitalization area prior to commencement of rehabilitation of the property.

BE IT FURTHER RESOLVED by the Common Council of the City of Madison, Indiana that pursuant to I.C. 6-1.1-12.1-17 the abatement schedule may be set for a period up to ten (10) years.

BE IT FURTHER RESOLVED by the Common Council of the City of Madison, Indiana that the amount of the deduction which the property owner is entitled to receive is as follows:

Real Property

Year 1:100%	Year 6:	40%
Year 2: 95%	Year 7:	30%
Year 3: 80%	Year 8:	20%
Year 4: 65%	Year 9:	10%
Year 5: 50%	Year 10:	5%

BE IT FURTHER RESOLVED by the Common Council of the City of Madison, Indiana that a copy of this Resolution shall be filed with the County Assessor and made available at that office for public inspection, and that the City of Madison Clerk-Treasurer shall arrange for the publication of notice that the Common Council of the City of Madison, Indiana will, at its meeting scheduled on December 8, 2015 receive and hear all objections/statements in support from interested person, and having heard and considered same, will act to rescind, modify or confirm this Resolution and authorize a waiver of noncompliance.

ADOPTED by the Common Council of City of Madison, IN this 17th Day of November, 2015.

City Council President

Damon Welch, Mayor

<u>CERTIFICATE</u>

SEAL:

Bill Kall, Clerk-Treasurer

AN ORDINANCE OF THE COMMON COUNCIL OF THE CITY OF MADISON, INDIANA ESTABLISHING THE INDIANA DESTINATION DEVELOPMENT CORPORATION GRANT CONTROL FUND

WHEREAS, The Indiana Destination Development Corporation, a tourism development office that is dedicated to supporting and promoting Indiana's tourism and talent attraction efforts; and

WHEREAS, The Indiana Destination Development Corporation will be making restricted donations for various tourism related initiatives within the City of Madison; and

WHEREAS, the City of Madison wishes to establish a fund to deposit monies donated from the Indiana Destination Development Corporation to City of Madison initiatives,

NOW, THEREFORE, BE IT ORDAINED by the Common Council of the City of Madison, Indiana as follows:

- (A) A control fund is established to deposit monies donated from the Indiana Destination Development Corporation. The monies will come as restricted donations for a specified purpose through an agreement for each donation which will specify the accepted use of funds.
- (B) The fund shall be named the Indiana Destination Development Corporation Grant Control Fund. All funds contained in the account shall be expended only for the exclusive purpose detailed in each restricted donation agreement. The Common Council of the City of Madison will review and agree to each donation agreement prior to accepting funds and no further appropriation is required.
- (C) The express and written approval of the Board of Public Works and Safety shall be obtained prior to the expenditure of funds from the account.
- (D) For each type of restricted donation, separate, individual accounts shall be monitored to reflect receipts, disbursements, and current balances.
- (E) The fund shall be non-reverting and exist perpetually unless terminated by a subsequent ordinance enacted by the Common Council.
- (F) If the fund is terminated by a subsequent ordinance enacted by the Common Council, the remaining balance of the terminated account shall revert to the general budget of the Common Council.

The foregoing Ordinance was passed and ado meeting held on the day of 2024	pted by the Common Council, City of Madison, Indiana at a regula 4.
	PRESENTED BY:
	Council President Pro-tempore
(SEAL) ATTEST:	Bob G. Courtney, Mayor
 Shirley Rynearson, Clerk-Treasurer	

INDIANA DESTINATION DEVELOPMENT CORPORATION GRANT AGREEMENT - IDDC-24-PMAG-105

Contract #0000000000000000000082159

This Grant Agreement ("Grant Agreement"), entered into by and between Indiana Destination Development Corporation (the "State") and **CITY OF MADISON** (the "Grantee"), is executed pursuant to the terms and conditions set forth herein. In consideration of those mutual undertakings and covenants, the parties agree as follows:

1. Purpose of this Grant Agreement; Funding Source. The purpose of this Grant Agreement is to enable the State to award a Grant of \$25,000.00 (the "Grant") to the Grantee for eligible costs of the services or project (the "Project") described in Exhibits A and B of this Grant Agreement, which are incorporated fully herein.

The funds shall be used exclusively in accordance with the provisions contained in this Grant Agreement and in conformance with Indiana Code § 5-33-3-3(a)(2)(B) establishing the authority to make this Grant, as well as any rules adopted thereunder. The funds received by the Grantee pursuant to this Grant Agreement shall be used only to implement the Project or provide the services in conformance with this Grant Agreement and for no other purpose.

FUNDING SOURCE:

Program Title:

Destination Development Grant Program

Type of funding:

State Funding – IDDC Budget

2. Representations and Warranties of the Grantee.

A. The Grantee expressly represents and warrants to the State that it is statutorily eligible to receive these Grant funds and that the information set forth in its Grant Application is true, complete and accurate. The Grantee expressly agrees to promptly repay all funds paid to it under this Grant Agreement should it be determined either that it was ineligible to receive the funds, or it made any material misrepresentation on its grant application.

B. The Grantee certifies by entering into this Grant Agreement that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from entering into this Grant Agreement by any federal or state department or agency. The term "principal" for purposes of this Grant Agreement is defined as an officer, director, owner, partner, key employee or other person with primary management or supervisory responsibilities, or a person who has a critical influence on or substantive control over the operations of the Grantee.

3. Implementation of and Reporting on the Project.

A. The Grantee shall implement and complete the Project in accordance with **Exhibit A** and with the plans and specifications contained in its Grant Application, which is on file with the State and is incorporated by reference. Modification of the Project shall require prior written approval of the State.

- B. The Grantee shall submit to the State written progress reports until the completion of the Project. These reports shall be submitted on a <u>semi-annual</u> basis and shall contain such detail of progress or performance on the Project as is requested by the State.
- **4. Term.** This Grant Agreement commences on **March 7, 2024** and shall remain in effect through **May 31, 2025**. Unless otherwise provided herein, it may be extended upon the written agreement of the parties and as permitted by state or federal laws governing this Grant.

5. Grant Funding.

- A. The State shall fund this Grant in the amount of \$25,000.00. The approved Project Budget is set forth as Exhibit B of this Grant Agreement, attached hereto and incorporated herein. The Grantee shall not spend more than the amount for each line item in the Project Budget without the prior written consent of the State, nor shall the Project costs funded by this Grant Agreement and those funded by any local and/or private share be changed or modified without the prior written consent of the State.
- B. The disbursement of Grant funds to the Grantee shall not be made until all documentary materials required by this Grant Agreement have been received and approved by the State and this Grant Agreement has been fully approved by the State.

6. Payment of Claims.

- A. If advance payment of all or a portion of the Grant funds is permitted by statute or regulation, and the State agrees to provide such advance payment, advance payment shall be made only upon submission of a proper claim setting out the intended purposes of those funds. After such funds have been expended, Grantee shall provide State with a reconciliation of those expenditures. Otherwise, all payments shall be made thirty five (35) days in arrears in conformance with State fiscal policies and procedures. As required by IC § 4-13-2-14.8, all payments will be by the direct deposit by electronic funds transfer to the financial institution designated by the Grantee in writing unless a specific waiver has been obtained from the Indiana Auditor of State.
- B. Requests for payment will be processed only upon presentation of a Claim Voucher in the form designated by the State. Such Claim Vouchers must be submitted with the budget expenditure report detailing disbursements of state, local and/or private funds by project budget line items.
- C. The State may require evidence furnished by the Grantee that substantial progress has been made toward completion of the Project prior to making the first payment under this Grant. All payments are subject to the State's determination that the Grantee's performance to date conforms with the Project as approved, notwithstanding any other provision of this Grant Agreement.
- D. All final claims and reports must be submitted to the State within 30 calendar days after the completion or termination of this agreement. Payment for claims submitted after that time may, at the discretion of the State, be denied. Claims may be submitted on a monthly basis only. If Grant funds have been advanced and are unexpended at the time that the final claim is submitted, all such unexpended grant funds must be returned to the State. Claim amounts are detailed and must follow what's in EXHIBITS A & B.
- E. Claims must be submitted with accompanying supportive documentation as designated by the State. Claims submitted without supportive documentation will be returned to the Grantee and not processed for payment. Failure to comply with the provisions of this Grant Agreement may result in the denial of a claim for payment.
- 7. Project Monitoring by the State. The State may conduct on-site or off-site monitoring reviews of the Project during the term of this Grant Agreement and for up to ninety (90) days after it expires or is otherwise terminated. The Grantee shall extend its full cooperation and give full access to the Project site and to relevant documentation to the State or its authorized designees for the purpose of determining, among other things:
 - A. whether Project activities are consistent with those set forth in **Exhibit A**, the Grant Application, and the terms and conditions of the Grant Agreement;
 - B. the actual expenditure of state, local and/or private funds expended to date on

the Project is in conformity with the amounts for each Budget line item as set forth in **Exhibit B** and that unpaid costs have been properly accrued;

- C. that Grantee is making timely progress with the Project, and that its project management, financial management and control systems, procurement systems and methods, and overall performance are in conformance with the requirements set forth in this Grant Agreement and are fully and accurately reflected in Project reports submitted to the State.
- 8. Compliance with Audit and Reporting Requirements; Maintenance of Records.

 A. The Grantee shall submit to an audit of funds paid through this Grant Agreement and shall make all books, accounting records and other documents available at all reasonable times during the term of this Grant Agreement and for a period of three (3) years after final payment for inspection by the State or its authorized designee. Copies shall be furnished to the State at no cost
- B. If the Grantee is a "subrecipient" of federal grant funds under 2 C.F.R. 200.331, Grantee shall arrange for a financial and compliance audit that complies with 2 C.F.R. 200.500 et seq. if required by applicable provisions of 2 C.F.R. 200 (Uniform Administrative Requirements, Cost Principles, and Audit Requirements).
- C. If the Grantee is a non-governmental unit, the Grantee shall file the Form E-1 annual financial report required by IC § 5-11-1-4. The E-1 entity annual financial report will be used to determine audit requirements applicable to non-governmental units under IC § 5-11-1-9. Audits required under this section must comply with the State Board of Accounts *Uniform Compliance Guidelines for Examination of Entities Receiving Financial Assistance from Governmental Sources*, https://www.in.gov/sboa/files/guidelines-examination-entities-receiving-financial-assistance-government-sources.pdf. Guidelines for filing the annual report are included in Exhibit C (Guidelines for Non-governmental Entities).

9. Compliance with Laws.

- A. The Grantee shall comply with all applicable federal, state and local laws, rules, regulations and ordinances, and all provisions required thereby to be included herein are hereby incorporated by reference. The enactment or modification of any applicable state or federal statute or the promulgation of rules or regulations thereunder after execution of this Grant Agreement shall be reviewed by the State and the Grantee to determine whether the provisions of this Grant Agreement require formal modification.
- B. The Grantee and its agents shall abide by all ethical requirements that apply to persons who have a business relationship with the State as set forth in IC § 4-2-6, et seq., IC § 4-2-7, et seq. and the regulations promulgated thereunder. If the Grantee has knowledge, or would have acquired knowledge with reasonable inquiry, that a state officer, employee, or special state appointee, as those terms are defined in IC 4-2-6-1, has a financial interest in the Grant, the Grantee shall ensure compliance with the disclosure requirements in IC § 4-2-6-10.5 prior to the execution of this Grant Agreement. If the Grantee is not familiar with these ethical requirements, the Grantee should refer any questions to the Indiana State Ethics Commission, or visit the Inspector General's website at http://www.in.gov/ig/. If the Grantee or its agents violate any applicable ethical standards, the State may, in its sole discretion, terminate this Grant immediately upon notice to the Grantee. In addition, the Grantee may be subject to penalties under IC §§ 4-2-6, 4-2-7, 35-44.1-1-4, and under any other applicable laws.

- C. The Grantee certifies by entering into this Grant Agreement that neither it nor its principal(s) is presently in arrears in payment of taxes, permit fees or other statutory, regulatory or judicially required payments to the State. The Grantee agrees that any payments currently due to the State may be withheld from payments due to the Grantee. Additionally, payments may be withheld, delayed, or denied and/or this Grant suspended until the Grantee is current in its payments and has submitted proof of such payment to the State.
- D. The Grantee warrants that it has no current, pending or outstanding criminal, civil, or enforcement actions initiated by the State, and agrees that it will immediately notify the State of any such actions. During the term of such actions, the Grantee agrees that the State may suspend funding for the Project. If a valid dispute exists as to the Grantee's liability or guilt in any action initiated by the State or its agencies, and the State decides to suspend funding to the Grantee, the Grantee may submit, in writing, a request for review to the Indiana Department of Administration (IDOA). A determination by IDOA shall be binding on the parties. Any disbursements that the State may delay, withhold, deny, or apply under this section shall not be subject to penalty or interest.
- E. The Grantee warrants that the Grantee and any contractors performing work in connection with the Project shall obtain and maintain all required permits, licenses, registrations, and approvals, and shall comply with all health, safety, and environmental statutes, rules, or regulations in the performance of work activities for the State. Failure to do so may be deemed a material breach of this Grant Agreement and grounds for immediate termination and denial of grant opportunities with the State.
- F. The Grantee affirms that, if it is an entity described in IC Title 23, it is properly registered and owes no outstanding reports to the Indiana Secretary of State.
- G. As required by IC § 5-22-3-7:
 - (1) The Grantee and any principals of the Grantee certify that:
 - (A) the Grantee, except for de minimis and nonsystematic violations, has not violated the terms of:
 - (i) IC § 24-4.7 [Telephone Solicitation Of Consumers];
 - (ii) IC § 24-5-12 [Telephone Solicitations]; or
 - (iii) IC § 24-5-14 [Regulation of Automatic Dialing Machines];
 - in the previous three hundred sixty-five (365) days, even if IC 24-4.7 is preempted by federal law; and
 - (B) the Grantee will not violate the terms of IC § 24-4.7 for the duration of this Grant Agreement, even if IC §24-4.7 is preempted by federal law.
 - (2)The Grantee and any principals of the Grantee certify that an affiliate or principal of the Grantee and any agent acting on behalf of the Grantee or on behalf of an affiliate or principal of the Grantee, except for de minimis and nonsystematic violations,
 - (A) has not violated the terms of IC § 24-4.7 in the previous three hundred sixty-five (365) days, even if IC § 24-4.7 is preempted by federal law: and
 - (B) will not violate the terms of IC § 24-4.7 for the duration of this Grant Agreement even if IC § 24-4.7 is preempted by federal law.

10. Debarment and Suspension.

A. The Grantee certifies by entering into this Grant Agreement that it is not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from entering into

this Grant by any federal agency or by any department, agency or political subdivision of the State. The term "principal" for purposes of this Grant Agreement means an officer, director, owner, partner, key employee or other person with primary management or supervisory responsibilities, or a person who has a critical influence on or substantive control over the operations of the Grantee.

- B. The Grantee certifies that it has verified the suspension and debarment status for all subcontractors receiving funds under this Grant Agreement and shall be solely responsible for any recoupments or penalties that might arise from non-compliance. The Grantee shall immediately notify the State if any subcontractor becomes debarred or suspended, and shall, at the State's request, take all steps required by the State to terminate its contractual relationship with the subcontractor for work to be performed under this Grant Agreement.
- 11. Drug-Free Workplace Certification. As required by Executive Order No. 90-5, April 12, 1990, issued by the Governor of Indiana, the Grantee hereby covenants and agrees to make a good faith effort to provide and maintain a drug-free workplace. Grantee will give written notice to the State within ten (10) days after receiving actual notice that the Grantee, or an employee of the Grantee in the State of Indiana, has been convicted of a criminal drug violation occurring in the workplace. False certification or violation of the certification may result in sanctions including, but not limited to, suspension of grant payments, termination of the Grant and/or debarment of grant opportunities with the State of Indiana for up to three (3) years.

In addition to the provisions of the above paragraphs, if the total amount set forth in this Grant Agreement is in excess of \$25,000.00, the Grantee certifies and agrees that it will provide a drug-free workplace by:

- A. Publishing and providing to all of its employees a statement notifying them that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Grantee's workplace and specifying the actions that will be taken against employees for violations of such prohibition; and
- B. Establishing a drug-free awareness program to inform its employees of: (1) the dangers of drug abuse in the workplace; (2) the Grantee's policy of maintaining a drug-free workplace; (3) any available drug counseling, rehabilitation, and employee assistance programs; and (4) the penalties that may be imposed upon an employee for drug abuse violations occurring in the workplace; and
- C. Notifying all employees in the statement required by subparagraph (A) above that as a condition of continued employment the employee will: (1) abide by the terms of the statement; and (2) notify the Grantee of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction; and
- D. Notifying in writing the State within ten (10) days after receiving notice from an employee under subdivision (C)(2) above, or otherwise receiving actual notice of such conviction; and
- E. Within thirty (30) days after receiving notice under subdivision (C)(2) above of a conviction, imposing the following sanctions or remedial measures on any employee who is convicted of drug abuse violations occurring in the workplace: (1) take appropriate personnel action against the employee, up to and including termination; or (2) require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state or local health, law enforcement, or other appropriate agency; and

- F. Making a good faith effort to maintain a drug-free workplace through the implementation of subparagraphs (A) through (E) above.
- **12. Employment Eligibility Verification.** As required by IC § 22-5-1.7, the Grantee hereby swears or affirms under the penalties of perjury that:
 - A. The Grantee has enrolled and is participating in the E-Verify program;
 - B. The Grantee has provided documentation to the State that it has enrolled and is participating in the E-Verify program;
 - C. The Grantee does not knowingly employ an unauthorized alien.
 - D. The Grantee shall require its contractors who perform work under this Grant Agreement to certify to Grantee that the contractor does not knowingly employ or contract with an unauthorized alien and that the contractor has enrolled and is participating in the E-Verify program. The Grantee shall maintain this certification throughout the duration of the term of a contract with a contractor.

The State may terminate for default if the Grantee fails to cure a breach of this provision no later than thirty (30) days after being notified by the State.

- 13. Funding Cancellation. As required by Financial Management Circular 3.3 and IC § 5-22-17-5, when the Director of the State Budget Agency makes a written determination that funds are not appropriated or otherwise available to support continuation of performance of this Grant Agreement, it shall be canceled. A determination by the Director of the State Budget Agency that funds are not appropriated or otherwise available to support continuation of performance shall be final and conclusive.
- **14. Governing Law**. This Grant Agreement shall be governed, construed, and enforced in accordance with the laws of the State of Indiana, without regard to its conflict of laws rules. Suit, if any, must be brought in the State of Indiana.
- 15. Information Technology Accessibility Standards. Any information technology related products or services purchased, used or maintained through this Grant must be compatible with the principles and goals contained in the Electronic and Information Technology Accessibility Standards adopted by the Architectural and Transportation Barriers Compliance Board under Section 508 of the federal Rehabilitation Act of 1973 (29 U.S.C. §794d), as amended.
- **16. Insurance.** The Grantee shall maintain insurance with coverages and in such amount as may be required by the State or as provided in its Grant Application.
- 17. Nondiscrimination. Pursuant to the Indiana Civil Rights Law, specifically IC § 22-9-1-10, and in keeping with the purposes of the federal Civil Rights Act of 1964, the Age Discrimination in Employment Act, and the Americans with Disabilities Act, the Grantee covenants that it shall not discriminate against any employee or applicant for employment relating to this Grant with respect to the hire, tenure, terms, conditions or privileges of employment or any matter directly or indirectly related to employment, because of the employee or applicant's: race, color, national origin, religion, sex, age, disability, ancestry, status as a veteran, or any other characteristic protected by federal, state, or local law ("Protected Characteristics"). Furthermore, Grantee certifies compliance with applicable federal laws, regulations, and executive orders prohibiting discrimination based on the Protected Characteristics in the provision of services.

The Grantee understands that the State is a recipient of federal funds, and therefore, where applicable, Grantee and any subcontractors shall comply with requisite affirmative action

requirements, including reporting, pursuant to 41 CFR Chapter 60, as amended, and Section 202 of Executive Order 11246 as amended by Executive Order 13672.

- **18. Notice to Parties**. Whenever any notice, statement or other communication is required under this Grant, it will be sent by E-mail or first class U.S. mail service to the following addresses, unless otherwise specifically advised.
 - A. Notices to the State shall be sent to:

Kyle Johnson
Indiana Destination Development Corporation
1 N. Capitol
Indianapolis, IN. 46204
KyJohnson@visitindiana.com

B. Notices to the Grantee shall be sent to:

Emily McKinney, Associate Director of Economic Development
City of Madison
101 West Main Street
Madison, IN 47250
emckinney@madison-in.gov

As required by IC § 4-13-2-14.8, payments to the Grantee shall be made via electronic funds transfer in accordance with instructions filed by the Grantee with the Indiana Auditor of State.

- 19. Order of Precedence; Incorporation by Reference. Any inconsistency or ambiguity in this Grant Agreement shall be resolved by giving precedence in the following order: (1) requirements imposed by applicable federal or state law, including those identified in paragraph 24, below, (2) this Grant Agreement, (3) Exhibits prepared by the State, (4) Invitation to Apply for Grant; (5) the Grant Application; and (6) Exhibits prepared by Grantee. All of the foregoing are incorporated fully herein by reference.
- **20. Public Record.** The Grantee acknowledges that the State will not treat this Grant as containing confidential information, and the State will post this Grant on the transparency portal as required by Executive Order 05-07 and IC § 5-14-3.5-2. Use by the public of the information contained in this Grant shall not be considered an act of the State.

21. Termination for Breach.

A. Failure to complete the Project and expend State, local and/or private funds in accordance with this Grant Agreement may be considered a material breach, and shall entitle the State to suspend grant payments, and to suspend the Grantee's participation in State grant programs until such time as all material breaches are cured to the State's satisfaction.

- B. The expenditure of State or federal funds other than in conformance with the Project or the Budget may be deemed a breach. The Grantee explicitly covenants that it shall promptly repay to the State all funds not spent in conformance with this Grant Agreement.
- **22. Termination for Convenience.** Unless prohibited by a statute or regulation relating to the award of the Grant, this Grant Agreement may be terminated, in whole or in part, by the State whenever, for any reason, the State determines that such termination is in the best interest of the State. Termination shall be effected by delivery to the Grantee of a Termination Notice, specifying the extent to which such termination becomes effective. The Grantee shall be compensated for completion of the Project properly done prior to the effective date of termination. The State will

not be liable for work on the Project performed after the effective date of termination. In no case shall total payment made to the Grantee exceed the original grant.

- **23.** Travel. No expenses for travel will be reimbursed unless specifically authorized by this Grant.
- 24. Federal and State Third-Party Contract Provisions. Omitted, no federal funds.
- 25. Provision Applicable to Grants with tax-funded State Educational Institutions: "Separateness" of the Parties. Omitted, not applicable.
- **26. State Boilerplate Affirmation Clause.** I swear or affirm under the penalties of perjury that I have not altered, modified, changed or deleted the State's standard contract clauses (as contained in the *2021* OAG/ IDOA *Professional Services Contract Manual* or the *2021 SCM Template*) in any way except as follows:
 - 3B. Reporting requirements changed per program need
 - 6D. Claims (D) Program Specific
 - 8B. Omitted, no federal funds
 - 24. Omitted, no federal funds
 - 25. Omitted, N/A

Non-Collusion, Acceptance

The undersigned attests, subject to the penalties for perjury, that the undersigned is the Grantee, or that the undersigned is the properly authorized representative, agent, member or officer of the Grantee. Further, to the undersigned's knowledge, neither the undersigned nor any other member, employee, representative, agent or officer of the Grantee, directly or indirectly, has entered into or been offered any sum of money or other consideration for the execution of this Grant Agreement other than that which appears upon the face hereof. Furthermore, if the undersigned has knowledge that a state officer, employee, or special state appointee, as those terms are defined in IC § 4-2-6-1, has a financial interest in the Grant, the Grantee attests to compliance with the disclosure requirements in IC § 4-2-6-10.5.

Agreement to Use Electronic Signatures

I agree, and it is my intent, to sign this Contract by accessing State of Indiana Supplier Portal using the secure password assigned to me and by electronically submitting this Contract to the State of Indiana. I understand that my signing and submitting this Contract in this fashion is the legal equivalent of having placed my handwritten signature on the submitted Contract and this affirmation. I understand and agree that by electronically signing and submitting this Contract in this fashion I am affirming to the truth of the information contained therein. I understand that this Contract will not become binding on the State until it has been approved by the Department of Administration, the State Budget Agency, and the Office of the Attorney General, which approvals will be posted on the Active Contracts Database: https://secure.in.gov/apps/idoa/contractsearch/

In Witness Whereof, the Grantee and the State have, through their duly authorized representatives, entered into this Grant Agreement. The parties, having read and understood the foregoing terms of this Grant Agreement, do by their respective signatures dated below agree to the terms thereof.

Indiana Destination Development Corporation

CITY OF MADISON

By:		By:	
Title:		Title:	
Date:		Date:	
Electronically Approved by: Department of Administration By: Rebecca Holwerda, Commission	(for)		्राकृतिकारी अस्ति । स्वार्कितिकारी अस्ति ।
Electronically Approved by: State Budget Agency		Electronically Approved as Office of the Attorney Gen	
By: Zachary Q. Jackson, Director	(for)	By: Theodore E Rokita, Attorn	(for) ey General

Exhibit A Scope of Work

Project Details

The Indiana Destination Development Corporation will grant a total of \$25,000.00 to the City of Madison for the purpose of a Placemaking Activation Grant.

Deliverables & Duties

Deadline for Project Completion: December 1, 2024.

Reporting

A final report will be due at grant closeout which should include receipts for all grant purchases and matching dollars as well as detailed information of the impact the grant had on the project.

Modifications

Grantee shall seek approval from the State before modifications are made to the scope of work, budget, or timeline. Approved modifications may require this Grant Agreement to be amended.

Exhibit B Budget

Claims and Budget

All funds will be 100% available once the contract has been executed unless otherwise restricted by the program manager.

Program Costs	Grant Funds	Local Match	In-Kind	TOTAL
Program Costs	\$8,000.00	\$150,000.00	\$0.00	\$158,000.00
Professional Fees	\$17,000.00	\$0.00	\$0.00	\$17,000.00
Program Costs Subtotal	\$25,000.00	\$150,000.00	\$0.00	\$175,000.00
Total Grant Funds	\$25,000.00			\$25,000.00
Total Cash Match		\$150,000.00	\$0.00	\$150,000.00
Total Project Budget				\$175,000.00

Exhibit C

Annual Financial Report for Non-governmental Entities

Guidelines for filing the annual financial report:

- 1. Filing an annual financial report called an Entity Annual Report (E-1) is required by IC 5-11-1-
 - 4. This is done through Gateway which is an on-line electronic submission process.
 - a. There is no filing fee to do this.
 - b. This is in addition to the similarly titled Business Entity Report required by the Indiana Secretary of State.
 - c. The E-1 electronical submission site is found at https://gateway.ifionline.org/login.aspx
 - d. The Gateway User Guide is found at https://gateway.ifionline.org/userguides/E1guide
 - e. The State Board of Accounts may request documentation to support the information presented on the E-1.
 - f. Login credentials for filing the E-1 and-additional information can be obtained using the notforprofit@sboa.in.gov email address.
- 2. A tutorial on completing Form E-1 online is available at https://www.youtube.com/watch?time continue=87&v=nPpgtPcdUcs
- Based on the level of government financial assistance received, an audit may be required by IC 5-11-1-9.