

## COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R6 / 12-21)

Frescribed by the Department of Local Government Finance JUL 2 5 2023

**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

January 1, 2022

INSTRUCTIONS.

- 1 Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent
- to which there has been compliance with the Statement of Bear 1/C 6-1.1-12.1-5.6)

  This form must be filed with the Form 10 -EP/A Street level and the filed with the Form 10 -EP/A Street level and the filed with the Form 10 -EP/A Street level and the filed with the Form 10 -EP/A Street level and the filed with the Form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the Form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with the form 10 -EP/A Street level and the filed with January 1 and the extended due date of each year.

SECTION 1		TAXPAYER	INFORMATI	ON					
e of texpayer					County				
Gavina Inc.				7 <del>-11-1-21-21-21-21-21-21-21-21-21-21-21-2</del>		Vigo			
Address of taxpayer (number and street city, state, and ZIP code)  925 Fruitridge Avenue, Terre Haute, IN 47804						DLGF taxing district number 002 - Harrison			
Name of contact person						Telephone number			
Kirby Johnson	A LEWIS		PIT			(217) 345	-9228		
SECTION 2	LOCAT	ON AND DESC			EN PAR		[[F *] .		
Name of designating body	Resolution number			Estimated start date (Iro ifh, day, year)					
Terre Haute City Council	[10]			02/02/2021					
ocation of property				Actual start date (month day, year) 02/02/2021					
925 Fruitridge Avenue, Terre Haute, IN 47804  Description of new manufacturing equipment, or new research and development equipment, or new information technology					NOV.				
equipment, or new logistical distribution equipment to be acquired.  NOTE: Please See Attached List of Manuafacturing and IT Equipment						04/30/2021			
And the parameter than the		andotaring	and it	_quipitiont		Actual completion of 08/01/2021	tate (month	h, day, year)	
SECTION 3	THE OWNER	EMPLOYEES	AND SALA	RIES	and the	7	War.	AND DESCRIPTION	
EMPLOYEES AND SALARIES							ACTUAL		
Current number of employees Salaries					0 0			0.00	
Number of employees retained					C		0.00		
Salaries					6.00			0.00	
Number of additional employees					35		40		
Salaries	EN DESTRUCTION	HAVE THE PARTY OF	1217	A PRODUCTION ASSESSED.	STATE OF STREET	1,600 700.00		972,688.56	
SECTION 4		COST AN	D VALUES	THE PERSON	2011	The state of	$W_{I} =$	STATE OF THE PARTY.	
	MANUFACTURING R & D EQUIPMENT EQUIPMENT		LOGIST DIST TEQUIPMENT			UIPMENT			
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSEI VALUE	
Values before project		0		0		0		0	
Plus: Values of proposed project		1,652,000		0		0		20,500	
Less. Values of any property being replaced		8		0		0_		0	
Net values upon completion of project		1,652,000		0		0		20,500	
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	
Values before project		0		0		0		0	
Plus Values of proposed project		1,308,000		0		11 500		61,000	
Less: Values of any property being replaced		Carl		0		0		0	
Net values upon completion of project		1,308,000		0		1 : 500		61,000	
NOTE: The COST of the property is confidential p	oursuant to I	C 6-1.1-12.1-5.	6(c).						
The second secon	AND THE BEATTER'S	AND OTHER BE	NEFITS PR	TO VALUE OF STREET AND ADDRESS OF THE PARTY.	The second second		H/H	lares	
					AS ESTIMATED CASSB-1		Α	ACTUAL	
Amount of solid waste converted  Amount of hazardous waste converted					0.00		····	0.00	
Other benefits:		- 1984 18 - 18 - 18 - 18 - 18 - 18 - 18				0.00		0.00	
Real Property Buildout and Landscaping				- 2 2		74 000 00	94	14,149.68	
SECTION 6	BE HOW	TAXPAYER C	ERTIFICAT	ION	"av po tir		LICE TO	The state of	
					1790	100			
I hereby certify that the representations in this st	atement are	true							



## 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 nearing 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 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 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.

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)		
		INCASTING.
easons for the determination (attach additional sheets if necessary)		
	<i>\$</i>	
, 107 AL - LL -		<u> </u>
gnature of authorized member		Date signed (monin day year)
ttested by	Designating body	
If the property owner is found not to be in substantial compliatime has been set aside for the purpose of considering comp		he opportunity for a hearing. The following date and
me of hearing AM Date of hearing (month, day, year	r) Location of hearing	*
HEARING RE	ESULTS (to be completed after the he	paring)
Approved	Denied (see instruc	
easons for the determination (attach additional sheets if necessary)		
gnature of authorized member		Date signed (month. day, year)
itested by	Designating body	
APF	PEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]	