



# Premium Composite Technology

Premium Composite Technology North America, Inc.

2101 Commerce Parkway

Franklin, Indiana 46131

June 9, 2011

Mrs. Krista Linke, Director  
Department of Planning & Economic Development  
70 E. Monroe Street  
Franklin, IN 46131

Re: Amended Tax Abatement Compliance Schedules  
For Premium Composite Technology NA

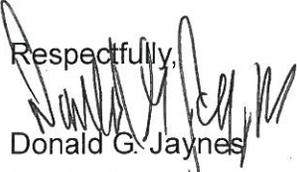
Dear Mrs. Linke:

Enclosed please find amended Forms 322/RE, Form 11 C/I, and Form CF-1 / Real Property. These forms have been amended as a result of our reporting of our total capital investment rather than only assets that were ready for commercial production. When reviewing our previously prepared forms our outside auditors advised us that the compliance form and the property tax form must report only report assets in service. Our original Tax Abatement Compliance reporting had shown the total capital spending for all assets rather than just assets in service.

Our auditors have instructed us that we must resubmit the Compliance documents for your review and approval. The assets that were not in service at the date of our original submission are planned to be in full service later this year.

Please let us know if you have any questions or need additional information.

Respectfully,

  
Donald G. Jaynes  
Senior Accountant



# COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

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

2011 PAY 2012  
FORM CF-1 / Real Property

**Amended**

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

- Redevelopment or rehabilitation of real estate improvements (IC 6-1.1-12.1-4)  
 Eligible vacant building (IC 6-1.1-12.1-4.8)

**INSTRUCTIONS:**

- This form does not apply to property located in a residentially distressed area. (IC 6-1.1-12.1-2 (b))
- Property owners must file this form with the County Auditor and the Designating Body for their review regarding the compliance of the project with the Statement of Benefits (SB-1 / Real Property).
- This form must accompany the initial deduction application that is filed with the County Auditor.
- Property owners whose Statement of Benefits was approved after June 30, 1991, must file an updated form with the County Auditor and the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.1)
- The updated form must be filed annually by May 15, or by the due date for the real property owner's personal property return that is filed in the township where the project is located, whichever is later. (IC 6-1.1-12.1-5.1 (b))
- With the approval of the Designating Body, compliance information for multiple projects may be consolidated on one (1) compliance 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 PREMIUM COMPOSITE TECHNOLOGY NORTH AMERICA, INC.	
Address of taxpayer (number and street, city, state and ZIP code) 2101 Commerce Pkwy FRANKLIN IN 46131	
Name of contact person KAZUSHI TAKAHASHI	Telephone number 317-346-0011

**SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY**

Name of designating body FRANKLIN CITY COUNCIL	Resolution number
Location of property 2101 Commerce Pkwy FRANKLIN IN 46131	County JOHNSON DLGF taxing district number 41009
Description of real property improvements: OFFICE AND MANUFACTURING FACILITY	Estimated starting date (month, day, year) 06/01/2009 Estimated completion date (month, day, year) 06/30/2010

**SECTION 3 EMPLOYEES AND SALARIES**

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		10
Salaries		485,325
Number of employees retained	37	
Salaries	2,100,000	
Number of additional employees	37	10
Salaries	2,100,000	485,325

**SECTION 4 COST AND VALUES**

COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values before project		
Plus: Values of proposed project	5,350,000	5,350,000
Less: Values of any property being replaced		
Net values upon completion of project	5,350,000	5,350,000
ACTUAL	COST	ASSESSED VALUE
Values before project		
Plus: Values of proposed project	5,153,380	2,039,800
Less: Values of any property being replaced		
Net values upon completion of project	5,153,380	2,039,800

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

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

**SECTION 6 TAXPAYER CERTIFICATION**

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

Signature of authorized representative	Title	Date signed (month, day, year)
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**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 6-1.1-12-5.1)**

1. This page does not apply to a Statement of Benefits filed before July 1, 1991; that deduction may not be terminated for a failure to comply with the Statement of Benefits.
2. Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.
3. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. A copy of the notice will be sent to the County Auditor.
4. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable effort to substantially comply with the Statement of Benefits.
5. If the designating body determines that the property owner has **NOT** made reasonable effort to comply, then the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner and (2) the County Auditor.

We have reviewed the CF-1 and find that:

- the property owner **IS** in substantial compliance
- the property owner **IS NOT** in substantial compliance
- other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

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  
 PM

Date of hearing (month, day, year)

Location of hearing

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

- Approved  Denied (see instruction 5 above)

Reasons for determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating 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 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.



**STATEMENT OF BENEFITS  
REAL ESTATE IMPROVEMENTS**

State Form 61767 (R2 / 1-07)  
Prescribed by the Department of Local Government Finance

**Exhibit B**

2010 PAY 2011  
FORM SB-1 / Real Property

This statement is being completed for real property that qualifies under the following Indiana Code (check one box):  
 Redevelopment or rehabilitation of real estate improvements (IC 6-1.1-12.1-4)  
 Eligible vacant building (IC 6-1.1-12.1-4.8)

**INSTRUCTIONS:**

- 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. "Projects" planned or committed to after July 1, 1987, and areas designated after July 1, 1987, require a STATEMENT OF BENEFITS. (IC 6-1.1-12.1)
- Approval of the designating body (City Council, Town Board, County Council, etc.) must be obtained prior to initiation of the redevelopment or rehabilitation, BEFORE a deduction may be approved.
- To obtain a deduction, application Form 322 ERA/RE or Form 322 ERANBD, whichever is applicable, must be filed with the County Auditor by the later of: (1) May 10; or (2) thirty (30) days after the notice of addition to assessed valuation or new assessment is mailed to the property owner at the address shown on the records of the township assessor.
- Property owners whose Statement of Benefits was approved after June 30, 1991, must attach a Form GF-1/Real Property annually to the application to show compliance with the Statement of Benefits. [IC 6-1.1-12.1-5.1(b) and IC 6-1.1-12.1-5.3(j)]
- The schedules established under IC 6-1.1-12.1-4(d) for rehabilitated property end under IC 6-1.1-12.1-4.8(1) for vacant buildings apply to any statement of benefits approved on or after July 1, 2000. The schedules effective prior to July 1, 2000, shall continue to apply to a statement of benefits filed before July 1, 2000.

**SECTION 1**

**TAXPAYER INFORMATION**

Name of taxpayer: **Premium Composite Technology North America, Inc.**  
 Address of taxpayer (number and street, city, state, and ZIP code): **5560 South 175W, Columbus, IN 47201**  
 Name of contact person: **Toru Usugi** Telephone number: **(212) 355-2459** E-mail address: \_\_\_\_\_

**SECTION 2**

**LOCATION AND DESCRIPTION OF PROPOSED PROJECT**

Name of designating body: **Franklin City Council** Resolution number: \_\_\_\_\_  
 Location of property: **Franklin** County: **Johnson** DLGF taxing district number: **41009**  
 Description of real property improvements, redevelopment, or rehabilitation (use additional sheets if necessary): **See attached**  
 Estimated start date (month, day, year): **06/01/2009**  
 Estimated completion date (month, day, year): **06/30/2010**

**SECTION 3**

**ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT**

Current number	Salaries	Number retained	Salaries	Number additional	Salaries
0.00	\$0.00	37.00	\$2,100,000.00	37.00	\$2,100,000.00

**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.

	REAL ESTATE IMPROVEMENTS	
	COST	ASSESSED VALUE
Current values		
Plus estimated values of proposed project	0.00	0.00
Less values of any property being replaced	5,350,000.00	5,350,000.00
Net estimated values upon completion of project	0.00	0.00
	5,350,000.00	5,350,000.00

**SECTION 5**

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

Estimated solid waste converted (pounds): \_\_\_\_\_ Estimated hazardous waste converted (pounds): \_\_\_\_\_  
 Other benefits: \_\_\_\_\_

**SECTION 6**

**TAXPAYER CERTIFICATION**

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

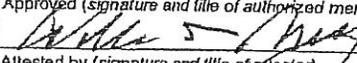
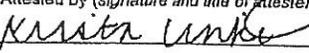
Signature of authorized representative: \_\_\_\_\_ Title: **President** Date signed (month, day, year): **03/20/2009**

**FOR USE OF THE DESIGNATING BODY**

We have reviewed our prior actions relating to the designation of this Economic Revitalization Area and find that the applicant meets the general standards adopted in the resolution previously approved by this body. Said resolution, passed under IC 6-1.1-12.1, provides for the following limitations:

- A. The designated area has been limited to a period of time not to exceed 10 calendar years \* (see below). The date this designation expires is 2019 payable 2020.
- B. The type of deduction that is allowed in the designated area is limited to:
  - 1. Redevelopment or rehabilitation of real estate improvements  Yes  No
  - 2. Residentially distressed areas  Yes  No
  - 3. Occupancy of a vacant building  Yes  No
- C. The amount of the deduction applicable is limited to \$ 5,350,000.00.
- D. Other limitations or conditions (specify) An agreed 2% fee on abated taxes pursuant to IC 6-1.1-12.1-14
- E. The deduction is allowed for 10 years\* (see below).

We have also reviewed the information contained in the statement of benefits and find that the estimates and expectations are reasonable and have determined that the totality of benefits is sufficient to justify the deduction described above.

Approved (signature and title of authorized member of designating body) 	Telephone number (317) 736-3631	Date signed (month, day, year) 04/20/2009
Attested by (signature and title of attester)  KRISTA LINKE, Planning Director	Designated body City of Franklin Common Council	

\* 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 6-1.12-12.1-4.

- A. For residentially distressed areas, the deduction period may not exceed five (5) years.
- B. For redevelopment and rehabilitation or real estate improvements:
  - 1. If the Economic Revitalization Area was designated prior to July 1, 2000, the deduction period is limited to three (3), six (6), or ten (10) years.
  - 2. If the Economic Revitalization Area was designated after June 20, 2000, the deduction period may not exceed ten (10) years.
- C. For vacant buildings, the deduction period may not exceed two (2) years.



**COMPLIANCE WITH STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51765 (R / 1-06)  
Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

*Amended*

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

**SECTION 1 TAXPAYER INFORMATION**

Name of taxpayer Premium Composite Technology North America	
Address of taxpayer (street and number, city, state and ZIP code) 2101 Commerce Pkwy Franklin IN 46131	
Name of contact person KAZUSHI TAKAHASHI	Telephone number 317-346-0011

**SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY**

Name of designating body FRANKLIN CITY COUNCIL	Resolution number
Location of property 2101 Commerce Pkwy FRANKLIN IN 46131	County Johnson
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired. Plastic Compounding Equipment and Office Equipment	DLGF taxing district number 41009
	Estimated starting date (month, day, year) 04/01/2010
	Estimated completion date (month, day, year) 06/30/2010

**SECTION 3 EMPLOYEES AND SALARIES**

EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		10
Salaries		485,325
Number of employees retained	37	
Salaries	2,100,000	
Number of additional employees	37	10
Salaries	2,100,000	485,325

**SECTION 4 COST AND VALUES**

AS ESTIMATED ON SB-1	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project	8,630,000	8,630,000						
Less: Values of any property being replaced								
Net values upon completion of project	8,630,000	8,630,000						
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project	5,446,379	584,400						
Plus: Values of proposed project	2,005,770	802,310						
Less: Values of any property being replaced								
Net values upon completion of project	7,452,149	1,386,710						

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

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

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

**SECTION 6 TAXPAYER CERTIFICATION**

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

Signature of authorized representative	Title	Date signed (month, day, year)
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INSTRUCTIONS: (IC 6-1.1-12-5.9)

**Amended**

1. This page does not apply to a Statement of Benefits filed before July 1, 1991; that deduction may not be terminated for a failure to comply with the Statement of Benefits.
2. Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.
3. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the Township Assessor and the County Auditor.
4. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable effort to substantially comply with the Statement of Benefits.
5. If the designating body determines that the property owner has **NOT** made reasonable effort to comply, then the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the County Auditor; and (3) the Township Assessor.

We have reviewed the CF-1 and find that:			
<input type="checkbox"/> the property owner <b>IS</b> in substantial compliance			
<input type="checkbox"/> the property owner <b>IS NOT</b> in substantial compliance			
<input type="checkbox"/> other (specify) _____			
Reasons for the determination (attach additional sheets if necessary)			
Signature of authorized member			Date signed (month, day, year)
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	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of hearing (month, day, year)	Location of hearing
<b>HEARING RESULTS (to be completed after the hearing)</b>			
<input type="checkbox"/> Approved		<input type="checkbox"/> Denied (see instruction 5 above)	
Reasons for determination (attach additional sheets if necessary)			
Signature of authorized member			Date signed (month, day, year)
Attested by:		Designating body	
<b>APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]</b>			
A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.			

**Amended**



**STATEMENT OF BENEFITS  
PERSONAL PROPERTY**

State Form 51764 (R/1-06)  
Prescribed by the Department of Local Government Finance

**Exhibit B**

FORM SB-1 / PP

2010 PAY 2011

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

- This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise this statement must be submitted to the designating body BEFORE a person installs the new manufacturing equipment and/or research and development equipment, and/or logistical distribution equipment and/or information technology equipment for which the person wishes to claim a deduction. "Projects" planned or committed to after July 1, 1987, and areas designated after July 1, 1987, require a STATEMENT OF BENEFITS. (IC 6-1.1-12.1)
- Approval of the designating body (City Council, Town Board, County Council, etc.) must be obtained prior to installation of the new manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment, BEFORE a deduction may be approved.
- To obtain a deduction, a person must file a certified deduction schedule with the person's personal property return on a certified deduction schedule (Form 103-ERA) with the township assessor of the township where the property is situated. The 103-ERA must be filed between March 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 March 1 and the extended due date of that year.
- Property owners whose Statement of Benefits was approved after June 30, 1997, must submit Form CF-1 / PP annually to show compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
- The schedules established under IC 6-1.1-12.1-4.5(d) and (e) apply to equipment installed after March 1, 2001. For equipment installed prior to March 2, 2001, the schedules and statutes in effect at the time shall continue to apply. (IC 6-1.1-12.1-4.5(f) and (g))

**SECTION 1**

**TAXPAYER INFORMATION**

Name of taxpayer  
**Premium Composite Technology North America, Inc.**

Address of taxpayer (number and street, city, state, and ZIP code)  
**5560 South 175W, Columbus, IN 47201**

Name of contact person  
**Toru Uesugi**

Telephone number  
**(212) 356-2459**

**SECTION 2**

**LOCATION AND DESCRIPTION OF PROPOSED PROJECT**

Name of designating body  
**Franklin City Council**

Resolution number (e)

Location of property  
**Franklin**

County  
**Johnson**

DLGF taxing district number  
**41009**

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)  
**See attached**

	ESTIMATED	
	START DATE	COMPLETION DATE
Manufacturing Equipment	04/01/2010	06/30/2010
R & D Equipment	04/01/2010	06/30/2010
Logist Dist Equipment	04/01/2010	06/30/2010
IT Equipment	04/01/2010	06/30/2010

**SECTION 3**

**ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT**

Current number	Salaries	Number retained	Salaries	Number additional	Salaries
0	0.00	37	2,100,000.00	37	2,100,000.00

**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		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Current values	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Plus estimated values of proposed project	8,630,000.00	8,630,000.00	0.00	0.00	0.00	0.00	230,000.00	230,000.00
Less values of any property being replaced	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net estimated values upon completion of project	8,630,000.00	8,630,000.00	0.00	0.00	0.00	0.00	230,000.00	230,000.00

**SECTION 5**

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

Estimated solid waste converted (pounds) \_\_\_\_\_ Estimated hazardous waste converted (pounds) \_\_\_\_\_

Other benefits:

**SECTION 6**

**TAXPAYER CERTIFICATION**

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

Signature of authorized representative \_\_\_\_\_ Title **President** Date signed (month, day, year) **03/20/2009**

FOR USE OF THE DESIGNATING BODY

We have reviewed our prior actions relating to the designation of this economic revitalization area and find that the applicant meets the general standards adopted 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 authorized under IC 6-1.1-12.1-2.

A. The designated area has been limited to a period of time not to exceed 10 calendar years \* (see below). The date this designation expires is 2019 payable 2020.

B. The type of deduction that is allowed in the designated area is limited to:

- 1. Installation of new manufacturing equipment;  Yes  No
- 2. Installation of new research and development equipment;  Yes  No
- 3. Installation of new logistical distribution equipment.  Yes  No
- 4. Installation of new information technology equipment;  Yes  No

C. The amount of deduction applicable to new manufacturing equipment is limited to \$ 8,630,000.00 cost with an assessed value of \$ \_\_\_\_\_.

D. The amount of deduction applicable to new research and development equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_.

E. The amount of deduction applicable to new logistical distribution equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_.

F. The amount of deduction applicable to new information technology equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_.

G. Other limitations or conditions (specify) An agreed five percent (5%) fee on abated taxes pursuant to IC 6-1.1-12.1-14

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 on or after July 1, 2000, is allowed for:

- 1 year  6 years
- 2 years  7 years
- 3 years  8 years
- 4 years  9 years
- 5 years \*\*  10 years \*\*

\*\* For ERA's established prior to July 1, 2000, only a 5 or 10 year schedule may be deducted.

Also we have reviewed the information contained in the statement of benefits and find that the estimates and expectations are reasonable and have determined that the totality of benefits is sufficient to justify the deduction described above.

Approved: (signature and title of authorized member) <i>[Signature]</i>	Telephone number (317) 736-3631	Date signed (month, day, year) 04/20/2009
Attested by: Krista Linke, Director of Planning <i>[Signature]</i>	Designated body City of Franklin Common Council	

\* 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 6-1.1-12.1-4,5