

## COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R7 / 12-22)

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

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Prescribed by the Department of Local Government Finance

- 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)
  - 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-1).

SECTION 1		ΤΑΧΡΑΥ	ER INFORM	ATION					
Name of Taxpayer							County		
Address of Taxpayer (number and street, city, state, and ZIP code)							DLGF Taxing District Number		
Name of Contact Person			Telepho	Telephone Number			Email Address		
			(	)					
SECTION 2	LO	CATION AND D	DESCRIPTION	OF PROPER	TY				
Name of Designating Body			Resolut	on Number		Estimated	State Date (mor	th, day, year)	
Location of Property						Actual Start Date (month, day, year)			
Description of new manufacturing equipment, new research and development equipment, new information technology equipment, or						Estimated C	Estimated Completion Date (month, day, year)		
new logistical distribution equipment to be acquire	d.								
							Actual Completion Date (month, day, year)		
SECTION 3		EMPLOY	EES AND SAL	ARIES					
EMPLOYEES AND	IPLOYEES AND SALARIES AS ESTIMATED ON SB-1				ACTI	JAL			
Current Number of Employees									
Salaries									
Number of Employees Retained									
Salaries									
Number of Additional Employees									
Salaries									
SECTION 4		COS	T AND VALU	ES					
	-	ACTURING IPMENT	-	RESEARCH & LOGISTICAL DIS DEVELOPMENT EQUIPMENT EQUIPM					
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	
Values Before Project	\$	\$	\$	\$	\$	\$	\$	\$	
Plus: Values of Proposed Project	\$	\$	\$	\$	\$	\$	\$	\$	
Less: Values of Any Property Being Replaced	\$	\$	\$	\$	\$	\$	\$	\$	
Net Values Upon Completion of Project	\$	\$	\$	\$	\$	\$	\$	\$	
ACTUAL	соѕт	ASSESSED VALUE	соѕт	ASSESSED VALUE	COST	ASSESSED VALUE	соѕт	ASSESSED VALUE	
Values Before Project	\$	\$	\$	\$	\$	\$	\$	\$	
Plus: Values of Proposed Project	\$	\$	\$	\$	\$	\$	\$	\$	
Less: Values of Any Property Being Replaced	\$	\$	\$	\$	\$	\$	\$	\$	
Net Values Upon Completion of Project	\$	\$	\$	\$	\$	\$	\$	\$	
NOTE: The COST of the property is confident	ial pursuant to	IC 6-1.1-12.1-5.	6(c).				•		
SECTION 5 WAST	E CONVERT	ED AND OTHE	R BENEFITS	PROMISED B	Υ ΤΗΕ ΤΑΧΡΑ	YER			
WASTE CONVERTE	D AND OTHE	R BENEFITS		AS	ESTIMATED C	N SB-1	ACTI	JAL	
Amount of Solid Waste Converted	Amount of Solid Waste Converted								
Amount of Hazardous Waste Converted									
Other Benefits:									
SECTION 6 TAXPAYER CERTIFICATION									
I hereby certify that the representations ir	n this stateme	nt are true.							
Signature of Authorized Representative			Title			D	ate Signed (mor	th, day, year)	

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

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

- 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, 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.
- 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.

We have reviewed the CF-1 and find that:									
	The property owner <b>IS</b> in substantial compliance								
	The property owner <b>IS NOT</b> in substantial compliance								
	Other (specify)								
Reaso	ns for the Determination (attach additional sheets if necessary)								
				L <u></u>					
Signat	ure of Authorized Member			Date Signed (month, day, year)					
Atteste	d By								
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.									
	f Hearing AM Date of Hearing (month, day, ye								
	 PM								
HEARING RESULTS (to be completed after the hearing)									
Reaso	Approved ns for the Determination (attach additional sheets if necessary)			e Instruction 5 above)					
Reaso									
Signat	ure of Authorized Member			Date Signed (month, day, year)					
Atteste	d By	Design	ating Body						

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.

APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]