

A DECLARATORY RESOLUTION designating an "Economic Revitalization Area" under I.C. 6-1.1-12.1 for property commonly known as 7845 Carnegie Boulevard, Fort Wayne, Indiana 46804 (Oral & Maxillofacial Surgery Associates Holdings, LLP)

WHEREAS, Petitioner has duly filed its petition dated September 10, 2015 to have the following described property designated and declared an "Economic Revitalization Area" under Sections 153.13-153.24 of the Municipal Code of the City of Fort Wayne, Indiana, and I.C. 6-1.1-12.1, to wit:

Attached hereto as "Exhibit A" as if a part herein;

and

WHEREAS, said project will create two full-time, permanent jobs for a total new, annual payroll of \$58,000, with the average new annual job salary being \$29,000 and retain 56 full-time and 20 part-time, permanent jobs for a total current annual payroll of \$7,982,799, with the average current, annual job salary being \$105,037; and

WHEREAS, the total estimated project cost is \$2,260,000; and

WHEREAS, it appears the said petition should be processed to final determination in accordance with the provisions of said Division 6.

NOW, THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF FORT WAYNE, INDIANA:

SECTION 1. That, subject to the requirements of Section 6, below, the property hereinabove described is hereby designated and declared an "Economic Revitalization Area" under I.C. 6-1.1-12.1. Said designation shall begin upon the effective date of the Confirming Resolution referred to in Section 6 of this Resolution and shall terminate on December 31, 2016, unless otherwise automatically extended in five year increments per I.C. 6-1.1-12.1-9.

SECTION 2. That, upon adoption of the Resolution:

- (a) Said Resolution shall be filed with the Allen County Assessor;
- (b) Said Resolution shall be referred to the Committee on Finance requesting a recommendation from said committee concerning the advisability of designating the above area an "Economic Revitalization Area";
- (c) Common Council shall publish notice in accordance with I.C. 6-1.1-12.1-2.5 and I.C. 5-3-1 of the adoption and substance of this resolution and setting this designation as an "Economic Revitalization Area" for public hearing.

1 **SECTION 3.** That, said designation of the hereinabove described property as an
2 "Economic Revitalization Area" shall apply to both a deduction of the assessed value of real
3 estate and personal property for new information technology equipment.

4 **SECTION 4.** That, the estimate of the number of individuals that will be employed
5 or whose employment will be retained and the estimate of the annual salaries of those
6 individuals and the estimate of the value of redevelopment or rehabilitation and the estimate
7 of the value of new information technology equipment, all contained in Petitioner's Statement
8 of Benefits, are reasonable and are benefits that can be reasonably expected to result from
9 the proposed described redevelopment or rehabilitation and from the installation of new
10 information technology equipment.

11 **SECTION 5.** That, the current year approximate tax rates for taxing units within
12 the City would be:

- 13 (a) If the proposed development does not occur, the approximate current year tax
14 rates for this site would be \$3.3286/\$100.
- 15 (b) If the proposed development does occur and no deduction is granted, the
16 approximate current year tax rate for the site would be \$3.3286/\$100 (the
17 change would be negligible).
- 18 (c) If the proposed development occurs and a deduction percentage of fifty percent
19 (50%) is assumed, the approximate current year tax rate for the site would be
20 \$3.3286/\$100 (the change would be negligible).
- 21 (d) If the proposed new information technology equipment is not installed, the
22 approximate current year tax rates for this site would be \$3.3286/\$100.
- 23 (e) If the proposed new information technology equipment is installed and no
24 deduction is granted, the approximate current year tax rate for the site would be
25 \$3.3286/\$100 (the change would be negligible).
- 26 (f) If the proposed new information technology equipment is installed and a
27 deduction percentage of eighty percent (80%) is assumed, the approximate
28 current year tax rate for the site would be \$3.3286/\$100 (the change would be
29 negligible).

30 **SECTION 6.** That, this Resolution shall be subject to being confirmed, modified
and confirmed, or rescinded after public hearing and receipt by Common Council of the
above described recommendations and resolution, if applicable.

SECTION 7. That, pursuant to I.C. 6-1.1-12.1, it is hereby determined that the
deduction from the assessed value of the real property shall be for a period of five years, and
the deduction from the assessed value of the new information technology equipment shall be
for a period of five years.

**FORT WAYNE COMMUNITY DEVELOPMENT DIVISION
TAX ABATEMENT - ESTIMATE OF SAVINGS**

PERSONAL PROPERTY TAX ABATEMENT - 5 yr Schedule

Year	True Cash Value	"Pool 2" 40% 56% 42% 32% 30% 30%	True Tax Value	Assessed Value	Tax Abatement %	Tax Paid %	Deduction	Taxable A V	Tax Rate	Tax Paid	Tax Saved	
1	\$160,000		\$64,000	\$64,000	100%	0%	\$64,000	\$0	0.033286	\$0	\$2,130	
2	\$160,000		\$89,600	\$89,600	80%	20%	\$71,680	\$17,920	0.033286	\$596	\$2,386	
3	\$160,000		\$67,200	\$67,200	60%	40%	\$40,320	\$26,880	0.033286	\$895	\$1,342	
4	\$160,000		\$51,200	\$51,200	40%	60%	\$20,480	\$30,720	0.033286	\$1,023	\$682	
5	\$160,000		\$48,000	\$48,000	20%	80%	\$9,600	\$38,400	0.033286	\$1,278	\$320	
6	\$160,000		\$48,000	\$48,000	0%	100%	\$0	\$48,000	0.033286	\$1,598	\$0	
							TOTAL TAX SAVED				\$6,860	
							TOTAL TAX PAID					\$3,792
									(5 yrs on 5 yr deduction)			
									(5 yrs on 5 yr deduction)			

NOTE: Above calculations assume a constant tax rate over the abatement period. Time value of money is not considered.

REAL PROPERTY TAX ABATEMENT - 5 yr Schedule

Year	Cash Value	True Tax Value	Assessed Value	Tax Abatement %	Tax Paid %	Deduction	Taxable AV	Tax Rate	Tax Paid	Tax Saved		
1	\$2,100,000	\$2,100,000	\$2,100,000	100%	0%	\$2,100,000	\$0	0.033286	\$0	\$69,901		
2	\$2,100,000	\$2,100,000	\$2,100,000	80%	20%	\$1,680,000	\$420,000	0.033286	\$13,980	\$55,920		
3	\$2,100,000	\$2,100,000	\$2,100,000	60%	40%	\$1,260,000	\$840,000	0.033286	\$27,960	\$41,940		
4	\$2,100,000	\$2,100,000	\$2,100,000	40%	60%	\$840,000	\$1,260,000	0.033286	\$41,940	\$27,960		
5	\$2,100,000	\$2,100,000	\$2,100,000	20%	80%	\$420,000	\$1,680,000	0.033286	\$55,920	\$13,980		
6	\$2,100,000	\$2,100,000	\$2,100,000	0%	100%	\$0	\$2,100,000	0.033286	\$69,901	\$0		
							TOTAL TAX SAVED REAL PROPERTY				\$209,702	
							TOTAL TAX PAID REAL PROPERTY (10 YRS)					\$139,801
							TOTAL TAX SAVED MACHINERY & BUILDING					\$216,561
							TOTAL TAX PAID MACHINERY & BUILDING					\$143,593
									(5 yrs on 5 yr deduction)			
									(5 yrs on 5 yr deduction)			
									(5 yrs on 5 yr deduction)			
									(5 yrs on 5 yr deduction)			

NOTE: Above calculations assume a constant tax rate over the abatement period. Time value of money is not considered.

1 **SECTION 8.** The deduction schedule from the assessed value of the real
2 property pursuant to I.C. 6-1.1-12.1-17 shall look like this:

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Year of Deduction	Percentage
1	100%
2	80%
3	60%
4	40%
5	20%

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9 **SECTION 9.** The deduction schedule from the assessed value of the new
10 information technology equipment pursuant to I.C. 6-1.1-12.1-17 shall look like this:

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Year of Deduction	Percentage
1	100%
2	80%
3	60%
4	40%
5	20%

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16 **SECTION 10.** That, the benefits described in the Petitioner's Statement of Benefits
17 can be reasonably expected to result from the project and are sufficient to justify the
18 applicable deductions.

19 **SECTION 11.** That, the taxpayer is non-delinquent on any and all property tax due
20 to jurisdictions within Allen County, Indiana.

21 **SECTION 12.** That, pursuant to I.C. 6-1.1-12.1-12 et al, any property owner that
22 has received a deduction under section 3 or 4.5 of this chapter may be required to repay the
23 deduction amount as determined by the county auditor in accordance with section 12 of said
24 chapter if the property owner ceases operations at the facility for which the deduction was
25 granted and if the Common Council finds that the property owner obtained the deduction by
26 intentionally providing false information concerning the property owner's plans to continue
27 operation at the facility.
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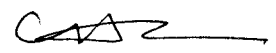
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SECTION 13. That, this Resolution shall be in full force and effect from and after its passage and any and all necessary approval by the Mayor.



Member of Council

APPROVED AS TO FORM AND LEGALITY



Carol Helton, City Attorney



SEP 10 2015

Ernie

**COMMUNITY DEVL
ECONOMIC REVITALIZATION AREA APPLICATION
CITY OF FORT WAYNE, INDIANA**

APPLICATION IS FOR: (Check appropriate box(es))

Real Estate Improvements

Personal Property Improvements

Vacant Commercial or Industrial Building

Total cost of real estate improvements: \$ 2,100,000

Total cost of manufacturing equipment improvements: \$ 500,000

Total cost of research and development equipment improvements: _____

Total cost of logistical distribution equipment improvements: _____

Total cost of information technology equipment improvements: \$ 100,000

TOTAL OF ABOVE IMPROVEMENTS: \$ 2,700,000

GENERAL INFORMATION

Real property taxpayer's name: Oral & Maxillofacial Surgery Associates Holdings, LLP

Personal property taxpayer's name: Oral & Maxillofacial Surgery Associates PC

Telephone number: 260-969-4100

Address listed on tax bill: 4606-D East State Blvd, Fort Wayne, IN 46815

Name of company to be designated, if applicable: _____

Year company was established: 01/01/1972

Address of property to be designated: Carnegie Blvd, Fort Wayne, IN

Real estate property identification number: 02-11-12-101-001.000-075

Contact person name: Deanna Schaefer

Contact person telephone number: (260) 969-4100 Contact person Email: deanna@omsafw.com

Contact person address: 4606-D East State Blvd, Fort Wayne, IN 46815

List company officer and/or principal operating personnel

NAME	TITLE	ADDRESS	PHONE NUMBER
Steven Schimmele	Partner	4606-D East State Blvd, Fort Wayne, IN 46815	(260) 969-4100
Michael Stroncsek	Partner	4606-D East State Blvd, Fort Wayne, IN 46815	(260) 969-4100
Timothy Frey	Partner	4606-D East State Blvd, Fort Wayne, IN 46815	(260) 969-4100
Steven Butler	Partner	4606-D East State Blvd, Fort Wayne, IN 46815	(260) 969-4100
James O'Neill	Partner	4606-D East State Blvd, Fort Wayne, IN 46815	(260) 969-4100
Lucas Reed	Partner	4606-D East State Blvd, Ft Wayne, IN 46815	(260) 969-4100

List all persons or firms having ownership interest in the applicant business and the percentage each holds:

NAME	PERCENTAGE
Steven Schimmele	16.67%
Michael Stronczek	16.67%
Timothy Frey	16.67%
Steven Butler	16.67%
James O'Neill	16.66%
Lucas Reed	16.66%

- Yes No Are any elected officials shareholders or holders of any debt obligation of the applicant or operating business? If yes, who? (name/title) _____
- Yes No Is the property for which you are requesting ERA designation totally within the corporate limits of the City of Fort Wayne?
- Yes No Do you plan to request state or local assistance to finance public improvements?
- Yes No Is the property for which you are requesting ERA designation located in an Economic Development Target Area (EDTA)? (see attached map for current areas)
- Yes No Does the company's business include a retail component? If yes, answer the following questions:
 What percentage of floor space will be utilized for retail activities? _____
 What percentage of sales is made to the ultimate customer? _____
 What percentage of sales will be from service calls? _____

What is the percentage of clients/customers served that are located outside of Allen County? 23%

What is the company's primary North American Industrial Classification Code (NAICs)? 621210

Describe the nature of the company's business, product, and/or service:

Oral & Maxillofacial Surgery Associates PC are a group of surgeons that perform a wide range of oral and maxillofacial surgical procedures. These services include facial injuries, TMJ disorders, wisdom teeth removal, dental implants, and bone grafting.

Dollar amount of annual sales for the last three years:

Year	Annual Sales
2014	\$ 12,967,204.00
2013	\$ 13,120,158
2012	\$ 12,570,027

List the company's three largest customers, their locations and amount of annual gross sales:

Customer Name	City/State	Annual Gross Sales
N/A (services offered to the general public)		

List the company's three largest material suppliers, their locations and amount of annual purchases:

Supplier Name	City/State	Annual Gross Purchases
Zimmer Dental	Chicago, IL	\$ 608,560
Henry Schein	Palatine, IL	\$ 117,462
Southern Anesthesia & Surgical	West Columbia, SC	\$ 43,018

List the company's top three competitors:

Competitor Name	City/State
Fort Wayne Oral Surgery	Fort Wayne, IN
Midwest Oral Surgery	Fort Wayne, IN
Summit Oral Surgery	Fort Wayne, IN

Describe the product or service to be produced or offered at the project site:

Oral & Maxillofacial Surgery Associates will offer the following services at this location: Dental Implants, Bone Grafting, Wisdom Teeth Removal, Jaw Surgery, Treatment for TMJ Disorders, Treatment for Cleft Lip & Palate, Facial Trauma Treatment, Distraction Osteogenesis, and Oral Pathology.

In order to be considered an Economic Revitalization Area (ERA), the area must be within the corporate limits of the City of Fort Wayne and must have 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 or prevent a normal development of property or use of property. It also includes any area where a facility or group of facilities that are technologically, economically, or energy obsolete is located and where the obsolescence may lead to a decline in employment and tax revenues.

How does the property for which you are requesting designation meet the above definition of an ERA?

The area contains other service/retail buildings and has experienced sporadic growth development in recent years.

REAL PROPERTY INFORMATION

Complete this section of the application if you are requesting a deduction from assessed value for real property improvements.

Describe any structure(s) that is/are currently on the property:

Not Applicable (the current property is land only)

Describe the condition of the structure(s) listed above:

Not Applicable

Describe the improvements to be made to the property to be designated for tax phase-in purposes:

The taxpayer is planning on building a 14,464 square foot facility, of which 9,397 will be finished. It will include 12 exam rooms and 70 parking spaces.

Projected construction start (month/year): 10/2015

Projected construction completion (month/year): 05/2016

Yes No Will construction result in Leadership in Energy and Environmental Design (LEED) certification by the U.S. Green Building Council?

Yes No Will construction use techniques to minimize impact on combined sewer overflows? (i.e. rain gardens, bio swales, etc.)

PERSONAL PROPERTY INFORMATION

Complete this section of the application if you are requesting a deduction from assessed value of new manufacturing, research and development, logistical distribution or information technology equipment.

List below the equipment for which you are seeking an economic revitalization area designation.

Manufacturing equipment must be used in the direct production, manufacture, fabrication, assembly, extraction, mining, processing, refining, or finishing of other tangible personal property at the site to be designated. Research and development equipment consists of laboratory equipment, research and development equipment, computers and computer software, telecommunications equipment or testing equipment used in research and development activities devoted directly and exclusively to experimental or laboratory research and development for new products, new uses of existing products, or improving or testing existing products at the site to be designated. Logistical distribution equipment consists of racking equipment, scanning or coding equipment, separators, conveyors, fork lifts or lifting equipment, transitional moving equipment, packaging equipment, sorting and picking equipment, software for technology used in logistical distribution, is used for the storage or distribution of goods, services, or information. Information technology equipment consists of equipment, including software used in the fields of information processing, office automation, telecommunication facilities and networks, informatics, network administration, software development and fiber optics: (use additional sheets, if necessary)

The new building will be furnished with dental chairs, dental track lighting, anesthetic machinery, computer and peripheral equipment, an intercom and phone system, X-Ray machines and processors, dental hand pieces and drills, medical monitors, waiting room furniture, and employee furniture.

Yes No Has the above equipment for which you are seeking a designation, ever before been used for any purpose in Indiana? If yes, was the equipment acquired at an arms length transaction from an entity not affiliated with the applicant? Yes No

Yes No Will the equipment be leased?

Date first piece of equipment will be purchased (month/year): 10/2015

Date last piece of equipment will be installed (month/year): 05/2016

Please provide the depreciation schedule term for equipment under consideration for personal property tax phase-in:

Computers and peripheral equipment: 5 years

Medical equipment: 5-7 years

Furniture: 5 years

ELIGIBLE VACANT BUILDING INFORMATION

Complete this section of the application if you are requesting a deduction from the current assessed value of a vacant building

Yes No Has the building for which you are seeking designation for tax phase-in been unoccupied for at least one year? Please provide evidence of occupation. (i.e. certificate of occupancy, paid utility receipts, executed lease agreements)

Describe any structure(s) that is/are currently on the property:

Describe the condition of the structure(s) listed above: _____

Projected occupancy date (month/year): _____

Describe the efforts of the owner or previous owner in regards to selling, leasing or renting the eligible vacant building during the period the eligible vacant building was unoccupied including how much the building was offered for sale, lease, or rent by the owner or a previous owner during the period the eligible vacant building was unoccupied.

PUBLIC BENEFIT INFORMATION

EMPLOYMENT INFORMATION FOR FACILITY TO BE DESIGNATED

ESTIMATE OF EMPLOYEES AND PAYROLL FOR FORT WAYNE
FACILITY REQUESTING ECONOMIC REVITALIZATION AREA DESIGNATION

Please be specific on job descriptions. When listing the occupation codes, please avoid using the "Major Occupational Groupings" (i.e. 11-000, 13-000, 15-000, etc.) which are more general in nature. Instead, use specific occupation codes (i.e. 11-1021, 13-1081, 15-2041 etc) for each created and retained job. To fill out information on occupation and occupation code, use data available through Occupation Employment Statistics for Fort Wayne

http://www.bls.gov/oes/current/oes_23060.htm

Current Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
Medical		29	\$ 6,727,229
Administration		27	\$ 1,073,946

Retained Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
Medical		29	\$ 6,727,229
Administration		27	\$ 1,073,946

Additional Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
Medical		██████████	██████████
Administrative		██████████	██████████

PUBLIC BENEFIT INFORMATION

Current Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll
Medical		13	\$ 132,213
Administrative		7	\$ 49,411

Retained Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll
Medical		13	\$ 132,213
Administrative		7	\$ 49,411

Additional Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll

Check the boxes below if the existing jobs and the jobs to be created will provide the listed benefits:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Pension Plan | <input checked="" type="checkbox"/> Major Medical Plan | <input checked="" type="checkbox"/> Disability Insurance |
| <input type="checkbox"/> Tuition Reimbursement | <input type="checkbox"/> Life Insurance | <input checked="" type="checkbox"/> Dental Insurance |

List any benefits not mentioned above:

Paid time off, uniform reimbursement, continuing education, licensing/certification fee reimbursement

When will you reach the levels of employment shown above? (month/year): 05/2018

REQUIRED ATTACHMENTS

The following must be attached to the application.

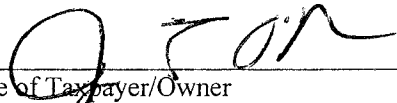
1. **Statement of Benefits Form(s) (first page/front side completed)**
2. **Full legal description of property and a plat map identifying the property boundaries. (Property tax bill legal descriptions are not sufficient.) Should be marked as Exhibit A.**
3. **Check for non-refundable application fee made payable to the City of Fort Wayne.**

ERA filing fee (either real or personal property improvements)	.1% of total project cost not to exceed \$500
ERA filing fee (both real and personal property improvements)	.1% of total project cost not to exceed \$750
ERA filing fee (vacant commercial or industrial building)	\$500
ERA filing fee in an EDTA	\$100
Amendment to extend designation period	\$300
Waiver of non compliance with ERA filing	\$500 + ERA filing fee
4. **Owner's Certificate (if applicant is not the owner of property to be designated) Should be marked as Exhibit B if applicable.**

CERTIFICATION

I, as the legal taxpayer and/or owner, hereby certify that all information and representations made on this application and its attached exhibits are true and complete and that neither an Improvement Location Permit nor a Structural Permit has been filed for construction of improvements, nor has any manufacturing, research and development, logistical distribution or information technology equipment which is a part of this application been purchased and installed as of the date of filing of this application. I also certify that the taxpayer is not delinquent on any and all property tax due to taxing jurisdictions within Allen County, Indiana. I understand that any incorrect information on this application may result in a rescission of any tax phase-ins which I may receive.

I understand that I must file a correctly completed Compliance with Statement of Benefits Form (CF-1/Real Property for real property improvements and CF-1/PP for personal property improvements) and the Public Benefit Annual Update with the City of Fort Wayne Community Development Division in each year in which I receive a deduction. Further the CF-1/PP form must be filed with the county assessor and the CF-1/Real Property must be filed with the county auditor. Failure to file the CF-1 form with these agencies may result in a rescission of any tax phase-in occurring as a result of this application.



Signature of Taxpayer/Owner

J. Terence O'Neill

Printed Name and Title of Applicant

9-8-15

Date



**STATEMENT OF BENEFITS
REAL ESTATE IMPROVEMENTS**

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

CITY OF FT WAYNE

SEP 10 2015 *Emc*

20__ PAY 20__

FORM SB-1 / Real Property

PRIVACY NOTICE

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

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)

COMMUNITY DEVL.

INSTRUCTIONS:

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

SECTION 1 TAXPAYER INFORMATION

Name of taxpayer Oral & Maxillofacial Surgery Associates Holdings, LLP		
Address of taxpayer (number and street, city, state, and ZIP code) 4606-D East State Blvd, Fort Wayne, IN 46815		
Name of contact person Deanna Schaefer	Telephone number (260) 969-4100	E-mail address

SECTION 2 LOCATION AND DESCRIPTION OF PROPOSED PROJECT

Name of designating body Fort Wayne Common Council		Resolution number
Location of property Carnegie Blvd	County Allen	DLGF taxing district number FW Aboite
Description of real property improvements, redevelopment, or rehabilitation (use additional sheets if necessary) 14,464 square foot new facility		Estimated start date (month, day, year) 10/01/2015
		Estimated completion date (month, day, year) 05/01/2016

SECTION 3 ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT

Current number	Salaries	Number retained	Salaries	Number additional	Salaries
76.00	\$7,982,799.00	76.00	\$7,982,799.00	2.00	\$58,500.00

SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT

	REAL ESTATE IMPROVEMENTS	
	COST	ASSESSED VALUE
Current values		
Plus estimated values of proposed project	2,100,000.00	
Less values of any property being replaced		
Net estimated values upon completion of project		

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER

Estimated solid waste converted (pounds) _____	Estimated hazardous waste converted (pounds) _____
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Other benefits

SECTION 6 TAXPAYER CERTIFICATION

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

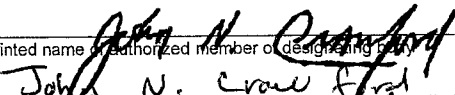
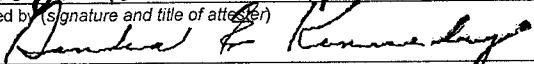
Signature of authorized representative <i>J. Terrence O'Neill</i>	Date signed (month, day, year) 9-8-15
Printed name of authorized representative J. Terrence O'Neill	Title Officer

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 been limited to a period of time not to exceed — calendar years* (see below). The date this designation expires is December 31, 2016.
- 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
- C. The amount of the deduction applicable is limited to \$ unlimited.
- D. Other limitations or conditions (specify) _____
- E. Number of years allowed: Year 1 Year 2 Year 3 Year 4 Year 5 (* see below)
 Year 6 Year 7 Year 8 Year 9 Year 10
- F. For a statement of benefits approved after June 30, 2013, did this designating body adopt an abatement schedule per IC 6-1.1-12.1-17?
 Yes No
 If yes, attach a copy of the abatement schedule to this form.
 If no, the designating body is required to establish an abatement schedule before the deduction can be determined.

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

Approved (signature and title of authorized member of designating body)	Telephone number	Date signed (month, day, year)
	(260) 427-1221	9-22-15
Printed name of authorized member of designating body	Name of designating body	
John N. Crowford	Common Council	
Attested by (signature and title of attester)	Printed name of attester	
	Sandra E. Kennedy	

* If the designating body limits the time period during which an area is an economic revitalization area, that limitation does not limit the length of time a taxpayer is entitled to receive a deduction to a number of years that is less than the number of years designated under 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. 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.)

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.



**STATEMENT OF BENEFITS
PERSONAL PROPERTY**

State Form 51764 (R3 / 12-13)

Prescribed by the Department of Local Government Finance

CITY OF FT WAYNE

FORM SB-1 / PP

SEP 10 2015 *Enc*

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.

COMMUNITY DEVL.

INSTRUCTIONS

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** a person installs the new manufacturing equipment and/or research and development equipment, and/or logistical distribution equipment and/or information technology equipment for which the person wishes to claim a deduction.
2. The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area before the installation of qualifying abatable equipment for which the person desires to claim a deduction.
3. To obtain a deduction, a person must file a certified deduction schedule with the person's personal property return on a certified deduction schedule (Form 103-ERA) with the township assessor of the township where the property is situated or with the county assessor if there is no township assessor for the township. The 103-ERA must be filed between 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.
4. Property owners whose Statement of Benefits was approved, must submit Form CF-1/PP annually to show compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
5. For a Form SB-1/PP that is approved after June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/PP that is approved prior to July 1, 2013, the abatement schedule approved by the designating body remains in effect. (IC 6-1.1-12.1-17)

SECTION 1		TAXPAYER INFORMATION						
Name of taxpayer Oral & Maxillofacial Surgery Associates Holdings, LLP			Name of contact person Deanna Schaefer					
Address of taxpayer (number and street, city, state, and ZIP code) 4606-D East State Blvd, Fort Wayne, IN 46815					Telephone number (260) 969-4100			
SECTION 2		LOCATION AND DESCRIPTION OF PROPOSED PROJECT						
Name of designating body Fort Wayne Common Council					Resolution number (s)			
Location of property See attached			County Allen		DLGF taxing district number Aboite			
Description of manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment. <i>(Use additional sheets if necessary.)</i> Various IT equipment to support growth and expansion. This equipment will include a phone system, intercom system, panoramic machine (with software), digital x-ray machines (with software), patient display screens, electronic whiteboards, computer workstations, server, IT switch, printers, and dental cameras.					ESTIMATED			
							START DATE	COMPLETION DATE
					Manufacturing Equipment			
					R & D Equipment			
					Logist Dist Equipment			
IT Equipment		09/30/2015	12/31/2016					
SECTION 3		ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT						
Current number 76	Salaries \$7,982,799	Number retained 76	Salaries \$7,982,799	Number additional 2	Salaries \$58,500			
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							
	Plus estimated values of proposed project						160,000.00	
	Less values of any property being replaced							
Net estimated values upon completion of project								
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 <i>[Signature]</i>					Date signed (month, day, year) 9-9-15			
Printed name of authorized representative Lucas S. Reed				Title Officer				

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 calendar years * (see below). The date this designation expires is December 31, 2016

- B. The type of deduction that is allowed in the designated area is limited to:
- | | | |
|--|---|--|
| 1. Installation of new manufacturing equipment; | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 2. Installation of new research and development equipment; | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 3. Installation of new logistical distribution equipment. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 4. Installation of new information technology equipment; | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

C. The amount of deduction applicable to new manufacturing equipment is limited to \$ N/A cost with an assessed value of \$ N/A.

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

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

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

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:

- | | | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|--|---------------|
| <input type="checkbox"/> Year 1 | <input type="checkbox"/> Year 2 | <input type="checkbox"/> Year 3 | <input type="checkbox"/> Year 4 | <input checked="" type="checkbox"/> Year 5 | (see below *) |
| <input type="checkbox"/> Year 6 | <input type="checkbox"/> Year 7 | <input type="checkbox"/> Year 8 | <input type="checkbox"/> Year 9 | <input type="checkbox"/> Year 10 | |

I. 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.

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 by: (signature and title of authorized member of designating body) <i>John N. Crawford</i>	Telephone number <i>(260) 427-1221</i>	Date signed (month, day, year) <i>9-22-15</i>
Printed name of authorized member of designating body <i>John N. Crawford</i>	Name of designating body <i>Common Council</i>	
Attested by: (signature and title of attester) <i>Sandra E. Kennedy</i>	Printed name of attester <i>Sandra E. Kennedy</i>	

* If the designating body limits the time period during which an area is an economic revitalization area, that limitation does not limit the length of time a taxpayer is entitled to receive a deduction to a number of years that is less than the 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.
- (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.

(Attached to and becoming a part of document)

EXHIBIT A

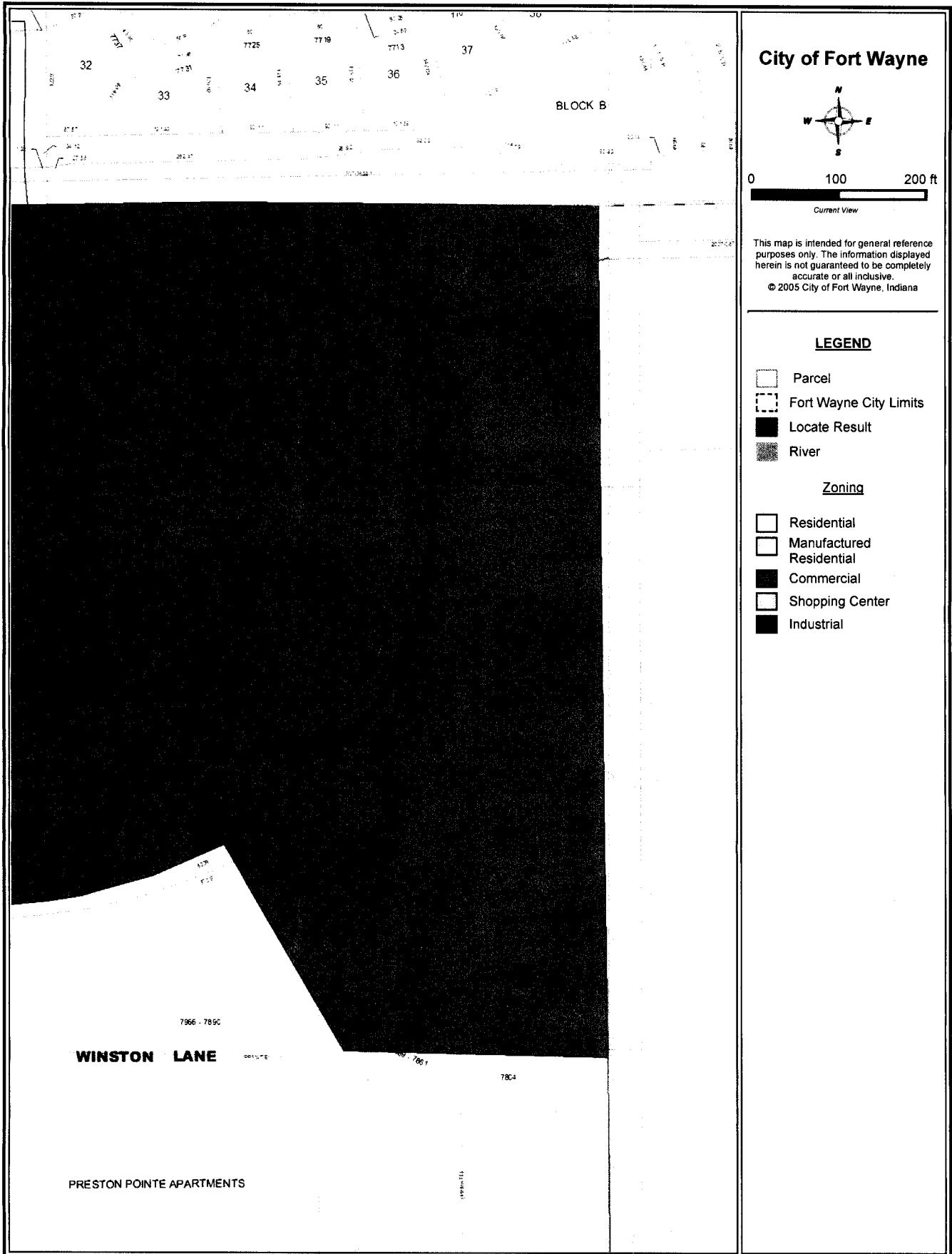
Land situated in the County of Allen, State of Indiana, is described as follows:

Part of the Northwest Quarter of Section 12, Township 30 North, Range 11 East of the Second Principal Meridian in Allen County, Indiana, more particularly described as follows:

Commencing at the Northwest corner of said Northwest Quarter; thence North 88 degrees 58 minutes 45 seconds East (assumed bearing and basis of bearings to follow), a distance of 671.66 feet (deed) along the North line of said Northwest Quarter and the centerline of State Road 14 to the East Line of the West Half of the West Half of said Northwest Quarter; thence South 00 degrees 11 minutes 24 seconds West, a distance of 318.18 feet (deed) along said East line to a point on the South line of an existing tract as described in Document Number 2014035798 in the Office of the Recorder of Allen County, Indiana, said point being referenced by a 5/8" steel rebar found 0.35 feet North, also being the POINT OF BEGINNING of the herein described tract; thence continuing South 00 degrees 11 minutes 24 seconds West, a distance of 340.18 feet along said East line to a point on the North line of an existing tract as described in Document Number 2008051591, said point being referenced by a 5/8" steel rebar found 0.09 feet North; thence North 62 degrees 30 minutes 04 seconds West, a distance of 246.11 feet (deed) along said North line to a point on a tangent curve, concave to the South, having a radius of 20.00 feet, said point being referenced by a 5/8" steel rebar found 0.20 feet North; thence Southwesterly along said curve and said North line a distance of 30.46 feet, having a central angle of 87 degrees 16 minutes 23 seconds, and a chord of 27.60 feet (deed) bearing South 73 degrees 51 minutes 44 seconds West to a 5/8" steel rebar with Miller Firm#0095 identification cap set on a tangent curve on the East right-of-way line of Carnegie Boulevard; concave to the West, having a radius of 380.00 feet; thence Northerly along said curve and said right-of-way line a distance of 196.92 feet, having a central angle of 29 degrees 41 minutes 27 seconds, and a chord of 194.72 feet bearing North 15 degrees 22 minutes 43 seconds East to a 5/8" steel rebar with Miller Firm#0095 identification cap set at the point of tangency; thence North 00 degrees 32 minutes 00 seconds East, a distance of 48.24 feet along said right-of-way line to a point on the South line of an said existing tract as described in Document Number 2014035798, said point being referenced by a 5/8" steel rebar with Karst identification cap found 0.42 feet North; thence South 89 degrees 28 minutes 27 seconds East, a distance of 193.86 feet (deed) along said South line to the Point of Beginning. Containing 1.362 Acre, more or less.

File Number: 4035-72183

Exhibit A



DIGEST SHEET

TITLE OF ORDINANCE: **Declaratory Resolution**

DEPARTMENT REQUESTING ORDINANCE: **Community Development Division**

SYNOPSIS OF ORDINANCE: **Oral & Maxillofacial Surgery Associates Holdings, LLP is requesting the designation of an Economic Revitalization Area for both real and personal property improvements in the amount of \$2,260,000. Oral & Maxillofacial Surgery Associates PC will construct a new 14,464 square foot medical office as well as purchase and install new information technology equipment.**

EFFECT OF PASSAGE: **In order to expand its business in Northeast Indiana, Oral & Maxillofacial Surgery Associates PC will construct a new facility in Southwest Fort Wayne. Two full-time jobs will be created as a result of the project.**

EFFECT OF NON-PASSAGE: **Potential loss of development and two full-time jobs**

MONEY INVOLVED (DIRECT COSTS, EXPENDITURES, SAVINGS): **No expenditures of public funds required.**

ASSIGNED TO COMMITTEE (PRESIDENT): **Russell Jehl and Tom Didier**

MEMORANDUM



TO: City Council
FROM: Elissa McGauley, Economic Development Specialist
DATE: September 10, 2015
RE: Request for designation by Oral & Maxillofacial Surgery Associates Holdings, LLP as an ERA for real and personal property improvements

BACKGROUND

PROJECT ADDRESS:	7845 Carnegie Boulevard	PROJECT LOCATED WITHIN:	Not Applicable
PROJECT COST:	\$ 2,260,000	COUNCILMANIC DISTRICT:	4

COMPANY PRODUCT OR SERVICE:	Oral & Maxillofacial Surgery Associates PC is a group of surgeons that perform oral and maxillofacial surgical procedures including facial injuries, TMJ disorders, wisdom tooth removal, dental implants and bone grafts. Oral & Maxillofacial Surgery Associates will construct a new 14,464 square foot medical office as well as purchase and install new information technology equipment.
PROJECT DESCRIPTION:	

CREATED

RETAINED

JOB'S CREATED (FULL-TIME):	2	JOB'S RETAINED (FULL-TIME): *	56
JOB'S CREATED (PART-TIME):	0	JOB'S RETAINED (PART-TIME): *	20
TOTAL NEW PAYROLL:	\$ 58,000	TOTAL RETAINED PAYROLL:*	\$ 7,982,799
AVERAGE SALARY (FULL-TIME NEW):	\$ 29,000	AVERAGE SALARY (FULL-TIME RETAINED):	\$ 139,307

*RETAINED JOBS AND PAYROLL ARE FOR ALL OMSA FACILITIES

COMMUNITY BENEFIT REVIEW

Yes No N/A

Project will encourage vacant or under-utilized land appropriate for commercial or industrial use?

Explain: Property to be developed is currently vacant.

Yes No N/A

Real estate to be designated is consistent with land use policies of the City of Fort Wayne?

Explain: Property to be designated is zoned C2, limited commercial zoning classification. Use of property is consistent with the land use policies of the City of Fort Wayne.

Yes No N/A

Project encourages the improvement or replacement of a deteriorated or obsolete structure?

Yes No N/A

Project encourages the improvement or replacement of obsolete manufacturing and/or research and development and/or information technology and/or logistical distribution equipment?

Explain: New information technology equipment will be purchased.

Yes No N/A

Project will result in significant conversion of solid waste or hazardous waste into energy or other useful products?

Yes No N/A

Project encourages preservation of an historically or architecturally significant structure?

Yes No N/A

Construction will result in Leadership in Energy and Environmental Design (LEED) certification by the U.S. Green Building Council?

Yes No N/A

Construction will use techniques to minimize impact on combined sewer overflows? (i.e. rain gardens, bio swales, etc.)

Yes No N/A

ERA designation induces employment opportunities for Fort Wayne area residents?
Explain: Two full-time jobs will be created as a result of the project.

Yes No N/A

Taxpayer is NOT delinquent on any or all property tax due to any taxing jurisdiction within Allen County.

POLICY

Per the policy of the City of Fort Wayne, the following guidelines apply to this project:

1. The period of deduction for real property is five years.
2. The period of deduction for personal property is five years.

Under Fort Wayne Common Council's tax abatement policies and procedures, Oral & Maxillofacial Surgery Associates Holdings, LLP is eligible for five year deductions on the real and personal property improvements. Attached are spreadsheets that shows how the application scored under the review system as well as a calculation of property tax savings with the deductions.

COMMENTS

Signed: *Elessa McFady*
Economic Development Manager

Personal Property Abatements

Tax Abatement Review System

	Points Possible	Points Awarded
INVESTMENT (30 points possible)		
Total new investment in equipment		
Over \$5,000,000	10	
\$1,000,000 to \$4,999,999	8	
\$500,000 to \$999,999	6	
\$0 to \$499,999	4	4
Investment per employee (both jobs created and retained)		
\$35,000 or more	10	
\$18,500 to \$34,999	8	
\$6,250 to \$18,499	6	
\$1,250 to \$6,249	4	4
less than \$1,250	2	
Estimated local income taxes generated from jobs retained		
\$80,000 or more	5	5
\$30,000 to \$79,999	4	
\$10,000 to \$29,999	3	
\$5,000 to \$9,999	2	
less than \$5,000	1	
Estimated local income taxes generated from jobs created (Double points for start-up)		
\$30,000 or more	5	
\$10,000 to \$29,999	4	
\$5,000 to \$9,999	3	
\$3,000 to \$4,999	2	
less than \$3,000	1	1
ECONOMIC BASE (20 points possible)		
Location Quotient in designated Occupation Code (use majority Occupation Code of all created and retained jobs)		
Greater than 1.0	5	
Estimated Percent of Business done outside Allen County		
Greater than 75%	15	
50% to 74%	10	
25% to 49%	5	
JOBS (20 points possible)		
Total number of permanent jobs retained		
Over 250	10	
100 to 249	8	
50 to 99	6	6
25 to 49	4	
10 to 24	2	
1 to 9	1	
Total number of permanent jobs created (Double for start-up)		
Over 100	10	
50-99	8	
25-49	6	
10-24	4	
1 to 9	2	2
WAGES (20 points possible)		
Median salary of the jobs created and/or retained		
Over \$45,000	20	
\$40,000 to \$44,999	16	
\$35,000 to \$39,999	12	12
\$30,000 to \$34,999	8	
\$25,000 to \$29,999	4	
under \$25,000	0	
BENEFITS (10 points possible)		
Major Medical Plan		
Pension, Tuition Reimbursement, Life Insurance, Dental Insurance, Disability Insurance,	7	7
	3	3

SUSTAINABILITY

Construction uses green building techniques (ie LEED Certification)	5
Construction uses techniques to minimize impact on Combined Sewer Overflows (CSOs)	5

Total	44
--------------	-----------

Length of Abatement
20 to 39 points - 3 year abatement
40 to 59 points - 5 year abatement
60 to 69 points - 7 year abatement
70 to 100 points - 10 year abatement

* If Average annual salary of the full-time jobs created by listed occupation is 10% or greater than the average salary for Allen County using current occupational employment statistics, then the applicant is eligible for an alternate deduction schedule.

Personal Property Deduction Schedule	Normal Deduction Schedule
10 year	10 Year
Year 1: 100%	Year 1: 100%
Year 2: 90%	Year 2: 100%
Year 3: 80%	Year 3: 100%
Year 4: 70%	Year 4: 100%
Year 5: 60%	Year 5: 100%
Year 6: 50%	Year 6: 90%
Year 7: 40%	Year 7: 80%
Year 8: 30%	Year 8: 65%
Year 9: 20%	Year 9: 50%
Year 10: 10%	Year 10: 40%
Year 11: 0%	
7 year	7 Year
Year 1: 100%	Year 1: 100%
Year 2: 85%	Year 2: 100%
Year 3: 71%	Year 3: 100%
Year 4: 57%	Year 4: 100%
Year 5: 43%	Year 5: 100%
Year 6: 29%	Year 6: 71%
Year 7: 14%	Year 7: 43%
Year 8: 0%	
5 year	
Year 1: 100%	
Year 2: 80%	
Year 3: 60%	
Year 4: 40%	
Year 5: 20%	
Year 6: 0%	
3 year	
Year 1: 100%	
Year 2: 66%	
Year 3: 33%	
Year 4: 0%	

Real Property Abatements

Tax Abatement Review System

	Points Possible	Points Awarded
INVESTMENT (30 points possible)		
Total new investment in real property (new structures and/or rehabilitation)		
Over \$1,000,000	10	10
\$500,000 to \$999,999	8	
\$100,000 to \$499,999	6	
Under \$100,000	4	
Investment per employee (both jobs created and retained)		
\$35,000 or more	10	
\$18,500 to \$34,999	8	8
\$6,250 to \$18,499	6	
\$1,250 to \$6,249	4	
less than \$1,250	2	
Estimated local income taxes generated from jobs retained		
\$80,000 or more	5	5
\$30,000 to \$79,999	4	
\$10,000 to \$29,999	3	
\$5,000 to \$9,999	2	
less than \$5,000	1	
Estimated local income taxes generated from jobs created (Double points for start-up)		
\$30,000 or more	5	
\$10,000 to \$29,999	4	
\$5,000 to \$9,999	3	
\$3,000 to \$4,999	2	
less than \$3,000	1	1
ECONOMIC BASE (20 points possible)		
Location Quotient in designated Occupation Code (use majority Occupation Code of all created and retained jobs)		
Greater than 1.0	5	
Estimated Percent of Business done outside Allen County		
Greater than 75%	15	
50% to 74%	10	
25% to 49%	5	
JOBS (20 points possible)		
Total number of permanent jobs retained		
Over 250	10	
100 to 249	8	
50 to 99	6	6
25 to 49	4	
10 to 24	2	
1 to 9	1	
Total number of permanent jobs created (Double for start-up)		
Over 100	10	
50-99	8	
25-49	6	
10-24	4	
1 to 9	2	2
WAGES (20 points possible)		
Median salary of the jobs created and/or retained		
Over \$45,000	20	
\$40,000 to \$44,999	16	
\$35,000 to \$39,999	12	12
\$30,000 to 34,999	8	
\$25,000 to \$29,999	4	
under \$25,000	0	
BENEFITS (10 points possible)		
Major Medical Plan		
	7	7
Pension, Tuition Reimbursement, Life Insurance, Dental Insurance, Disability Insurance,		
	3	3

SUSTAINABILITY

Construction uses green building techniques (ie LEED Certification)	5
Construction uses techniques to minimize impact on Combined Sewer Overflows (CSOs)	5

Total	54
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Length of Abatement	
20 to 39 points - 3 year abatement	
40 to 59 points - 5 year abatement	
60 to 69 points - 7 year abatement	
70 to 100 points - 10 year abatement	

* If Average annual salary of the full-time jobs created by listed occupation is 10% or greater than the average salary for Allen County using current occupational employment statistics, then the applicant is eligible for an alternate deduction schedule.

Real Property Deduction Schedules		Alternative Deduction Schedules	
10 year		10 Year	
Year 1: 100%		Year 1: 100%	
Year 2: 95%		Year 2: 100%	
Year 3: 80%		Year 3: 100%	
Year 4: 65%		Year 4: 100%	
Year 5: 50%		Year 5: 100%	
Year 6: 40%		Year 6: 90%	
Year 7: 30%		Year 7: 80%	
Year 8: 20%		Year 8: 65%	
Year 9: 10%		Year 9: 50%	
Year 10: 5%		Year 10: 40%	
Year 11: 0%			
7 year		7 Year	
Year 1: 100%		Year 1: 100%	
Year 2: 85%		Year 2: 100%	
Year 3: 71%		Year 3: 100%	
Year 4: 57%		Year 4: 100%	
Year 5: 43%		Year 5: 100%	
Year 6: 29%		Year 6: 71%	
Year 7: 14%		Year 7: 43%	
Year 8: 0%			
5 year			
Year 1: 100%			
Year 2: 80%			
Year 3: 60%			
Year 4: 40%			
Year 5: 20%			
Year 6: 0%			
3 year			
Year 1: 100%			
Year 2: 66%			
Year 3: 33%			
Year 4: 0%			

Public Hearing Date, if applicable _____

Read the first time in full and on motion by Councilman Russ Jehl

Read the second time by title and referred to the Finance

Committee. Read the third time in full and on motion by Councilman

Russ Jehl, placed on passage by the following vote:

	<u>AYES</u>	<u>NAYS</u>	<u>ABSTAINED</u>	<u>ABSENT</u>
<u>TOTAL VOTES</u>	<u>8</u>	_____	_____	<u>1</u>
BENDER	<u>✓</u>	_____	_____	_____
CRAWFORD	<u>✓</u>	_____	_____	_____
DIDIER	<u>✓</u>	_____	_____	_____
HARPER	<u>✓</u>	_____	_____	_____
HINES	<u>✓</u>	_____	_____	_____
JEHL	<u>✓</u>	_____	_____	_____
PADDOCK	<u>✓</u>	_____	_____	_____
SHOAF	<u>✓</u>	_____	_____	_____
SMITH	_____	_____	_____	<u>✓</u>

DATED: 9-22-15 Sandra E. Kennedy
SANDRA E. KENNEDY, CITY CLERK

Passed and adopted by the Common Council of the City of Fort Wayne, Indiana, as
(ANNEXATION) (APPROPRIATION) (GENERAL) (SPECIAL) (ZONING) ORDINANCE
(RESOLUTION) NO. R-86-15 on the 22nd day of
September, 2015

ATTEST:
Sandra E. Kennedy
SANDRA E. KENNEDY,
CITY CLERK

John N. Crawford
PRESIDING OFFICER

Presented by me to the Mayor of the City of Fort Wayne, Indiana, on the 23rd day
of September, 2015, at the hour of 12:00 o'clock PM. E.S.T.

Sandra E. Kennedy
SANDRA E. KENNEDY, CITY CLERK

Approved and signed by me this 24th day of September
2015, at the hour of 11:00 O'clock AM. E.S.T.

Thomas C. Henry
THOMAS C. HENRY, MAYOR

