

**A DECLARATORY RESOLUTION designating an
"Economic Revitalization Area" under I.C. 6-1.1-12.1 for
property commonly known as 436, 502, 508 E.
Washington Blvd., Fort Wayne, Indiana 46802 (Avenue
Development LLC)**

WHEREAS, Petitioner has duly filed its petition dated July 7, 2016 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 result in the occupation of an eligible vacant building under I.C. 6-1.1-12.1-4.8; and

WHEREAS, said project will create 37 full-time permanent jobs for a total new, annual payroll of \$2,622,633, with the average new annual job salary being \$70,881 and;

WHEREAS, the total estimated project cost is \$2,100,000; 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 a deduction of the assessed value of
3 occupation of an eligible vacant building.

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 the occupation of the eligible vacant building, all
7 contained in Petitioner's Statement of Benefits, are reasonable and are benefits that can be
8 reasonably expected to result from the proposed described occupation of the eligible vacant
9 building.

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

12 (a) If the proposed occupation of the eligible vacant building does not occur, the
13 approximate current year tax rates for this site would be \$3.5045/\$100.

14 (b) If the proposed occupation of the eligible vacant building does occur and no
15 deduction is granted, the approximate current year tax rate for the site would be
16 \$3.5045/\$100 (the change would be negligible).

17 (c) If the proposed occupation of the eligible vacant building occurs and a deduction
18 percentage of fifty percent (50%) is assumed, the approximate current year tax
19 rate for the site would be \$3.5045/\$100 (the change would be negligible).

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21 and confirmed, or rescinded after public hearing and receipt by Common Council of the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

23 **SECTION 7.** That, pursuant to I.C. 6-1.1-12.1, it is hereby determined that the
24 deduction from the assessed value of the occupation of the eligible vacant building shall be
25 for a period of one year.

26 **SECTION 8.** The deduction schedule from the assessed value of the occupation
27 of the eligible vacant building pursuant to I.C. 6-1.1-12.1-17 shall look like this:

28

Year of Deduction	Percentage
1	100%

29

30 **SECTION 9.** That, the benefits described in the Petitioner's Statement of Benefits
can be reasonably expected to result from the project and are sufficient to justify the
applicable deductions.

SECTION 10. That, the taxpayer is non-delinquent on any and all property tax due
to jurisdictions within Allen County, Indiana.

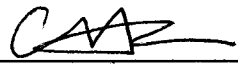
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SECTION 11. That, pursuant to I.C. 6-1.1-12.1-12 et al, any property owner that has received a deduction under section 3 or 4.5 of this chapter may be required to repay the deduction amount as determined by the county auditor in accordance with section 12 of said chapter if the property owner ceases operations at the facility for which the deduction was granted and if the Common Council finds that the property owner obtained the deduction by intentionally providing false information concerning the property owner's plans to continue operation at the facility.

SECTION 12. 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

Admn. Appr. _____

DIGEST SHEET

TITLE OF ORDINANCE: **Declaratory Resolution**

DEPARTMENT REQUESTING ORDINANCE: **Community Development Division**

SYNOPSIS OF ORDINANCE: **Avenue Development LLC is requesting the designation of an Economic Revitalization Area for eligible vacant building improvements in the amount of \$2,100,000. Avenue Development LLC will develop a health care clinic.**

EFFECT OF PASSAGE: **Investment of \$2,100,000 and 37 new full-time jobs.**

EFFECT OF NON-PASSAGE: **Potential loss of investment and 37 full-time jobs.**

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

ASSIGNED TO COMMITTEE (PRESIDENT): **Glynn Hines and John Crawford**

CITY OF FT WAYNE

JUL 07 2016

03/2013



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: _____
 Total cost of research and development equipment improvements: _____
 Total cost of logistical distribution equipment improvements: _____
 Total cost of information technology equipment improvements: _____
 TOTAL OF ABOVE IMPROVEMENTS: \$ 2,100,000

GENERAL INFORMATION

Real property taxpayer's name: HG Avenue Ft Wayne LLC
 Personal property taxpayer's name: N/A
 Telephone number: 317-566-2049
 Address listed on tax bill: 3815 River Crossing Parkway, Suite 100, Indianapolis, IN 46240
 Name of company to be designated, if applicable: Avenue Development LLC
 Year company was established: 2015
 Address of property to be designated: 436 E. Washington Blvd., 502 E. Washington Blvd., 508 E. Washington Blvd.
 Real estate property identification number: 02-12-01-351-006.000-074, 02-12-01-352-001.000-074, 02-12-01-352-002.000-074
 Contact person name: Mike Mattingly
 Contact person telephone number: (317) 566-2049 Contact person Email: mmattingly@avenuedev.com
 Contact person address: 3815 River Crossing Parkway, Suite 100, Indianapolis, IN 46240

List company officer and/or principal operating personnel

NAME	TITLE	ADDRESS	PHONE NUMBER
Laurie Schultz	Principal	3815 River Crossing Pkwy, Ste 100, Indianapolis, IN 46240	(317) 566-2031
Mike Mattingly	Principal	3815 River Crossing Pkwy, Ste 100, Indianapolis, IN 46240	(317) 566-2049

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

NAME	PERCENTAGE
HG Medical, LLC	70%
Avenue Development, LLC	30%

- 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? 0

What is the company's primary North American Industrial Classification Code (NAICs)? 236220

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

Avenue Development is a commercial property developer that primarily develops medical facilities for health and wellness management.

Dollar amount of annual sales for the last three years:

Year	Annual Sales
2015	\$ 0.00

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

Customer Name	City/State	Annual Gross Sales
Preservation on Main, LLC	Louisville, KY	\$ 165,000
Oak Street Health MSO, LLC	Chicago, IL	Customer is sublessor of space from Preservation on Main

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

Supplier Name	City/State	Annual Gross Purchases

List the company's top three competitors:

Competitor Name	City/State
Parkview Medical Group	Fort Wayne, IN
Lutheran Medical Group	Fort Wayne, IN
St. Joseph's Medical Group	Fort Wayne, IN

*These are the competitors of the entity operating out of the facility.

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

Avenue Development will develop a healthcare clinic and lease the facility to Oak Street Health. Oak Street Health serves the Medicaid population using a concierge model of providing services to their patients. The clinic provides medical services as well as providing assistance to the patients in how to manage their bills online, hosting community events open to the public, and serving as a warming center. Oak Street Health welcomes patients who make appointments or come through the door as well as taking the initiative of going out into the community to serve the patients and bring them to the clinic for services.

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 building has been vacant for at least one year and is currently in a state of disrepair. This project will include the rehabilitation of the building and the parking lots across the street.

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:

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

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

Projected construction start (month/year): _____

Projected construction completion (month/year): _____

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)

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): _____

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

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

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:

There is currently a 15,000 sq ft building on the property.

Describe the condition of the structure(s) listed above: Poor - the structure of the building has been compromised because of vacancy and lack of maintenance.

Projected occupancy date (month/year): Occupied: August 2016; Operating: October 2016

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.

The property has been listed for sale since 2013 and there is currently no active tenant in the building. The active list price is \$530,000.

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

Any information concerning the cost of the property and specific salaries paid to individual employees is confidential per Indiana Code (I.C. 6-1.1-12.1-5.1)

Current Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
No current employees.			

Retained Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
N/A			

Additional Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll
Physicians/PAs	29-1062	█	██████
Nurses/Aides	29-2061	█	██████
Patient Support	39-9021	█	██████
Administration	43-1011	█	██████
Outreach	21-1094	█	██████

PUBLIC BENEFIT INFORMATION

Current Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll
N/A			

Retained Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll
N/A			

Additional Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll
N/A			

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

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

List any benefits not mentioned above:

The employer provides medical care and provides contributions to 401k.

When will you reach the levels of employment shown above? (month/year): 12/2020

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.**

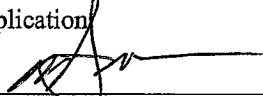
ERA filing fee (either real or personal property improvements)	.1% of total project cost not to exceed \$500
ERA filing fee (both real and personal property improvements)	.1% of total project cost not to exceed \$750
ERA filing fee (vacant commercial or industrial building)	\$500
ERA filing fee in an 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 no Improvement Location Permit or Structural Permit has been filed for construction of improvements, the occupation of the vacant building has not taken place and no 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, CF-1/PP for personal property improvements, and CF-1/VBD for vacant building deduction) 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 and CF-1/VBD 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.

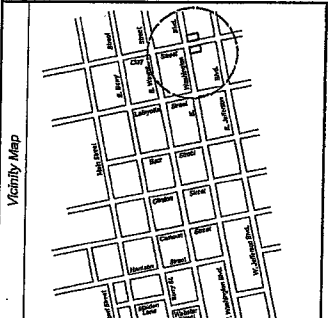
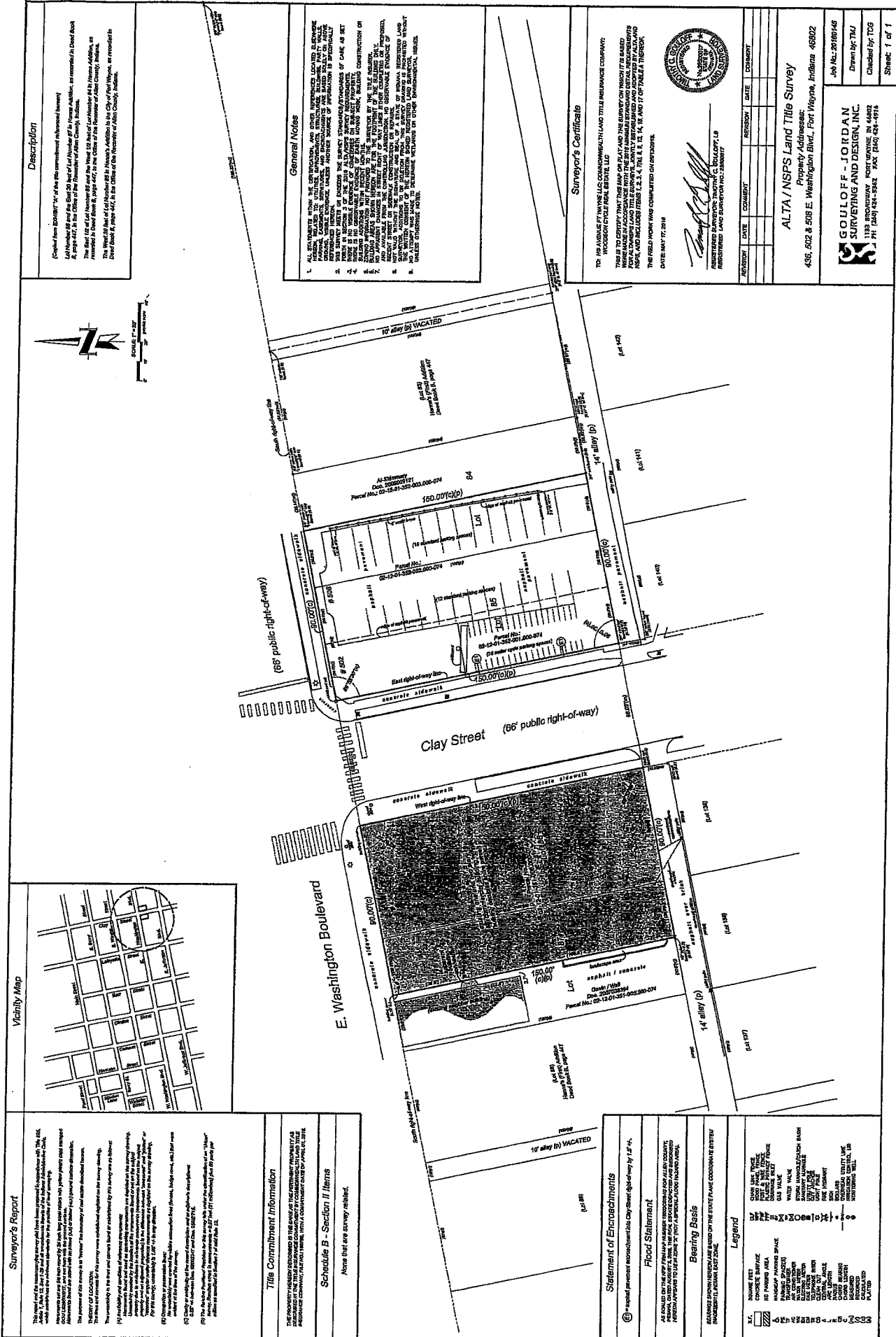


Signature of Taxpayer/Owner

Mike Mattingly, General Manager.
Printed Name and Title of Applicant

05/23/16

Date



Surveyor's Report

The Surveyor has examined the records of the Indiana Department of Transportation, the State of Indiana, the City of Fort Wayne, and the County of Allen, Indiana, and has determined that the information furnished to him is true and correct. He has also examined the survey and has determined that it is true and correct. He has also examined the survey and has determined that it is true and correct.

Title Commitment Information

THE PROPERTY HEREON SHOWN IS THE SUBJECT OF THE FOLLOWING INTERESTS AS REFLECTED IN THE PUBLIC RECORDS OF THE COUNTY OF ALLEN, INDIANA:

Schedule B - Section II Items

None that are storage related.

Statement of Encroachments

There are no encroachments shown on this survey.

Flood Statement

There are no flood zones shown on this survey.

Bearing Basis

ALL BEARINGS AND DISTANCES ARE BASED ON THE STREET PLANE COORDINATE SYSTEM FOR THE STATE OF INDIANA.

Legend

1.0	CONCRETE DRIVE
2.0	CONCRETE DRIVEWAY
3.0	ASPHALT DRIVEWAY
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18.0	ASPHALT DRIVEWAY
19.0	ASPHALT DRIVEWAY
20.0	ASPHALT DRIVEWAY

Description

Copy of the plat of the survey is on file in the office of the Surveyor. The Surveyor has examined the records of the Indiana Department of Transportation, the State of Indiana, the City of Fort Wayne, and the County of Allen, Indiana, and has determined that the information furnished to him is true and correct. He has also examined the survey and has determined that it is true and correct.

General Notice

1. ALL STATEMENTS WITHIN THE COMPASSION, AND OTHER REFERENCES LOCATED IN THESE PLANS, SPECIFICATIONS, CONTRACTS, AND INSTRUMENTS, SHALL BE CONSIDERED TO BE PART OF THIS SURVEY AND SHALL BE GIVEN THE SAME WEIGHT AND EFFECT AS IF THEY WERE SET FORTH IN THESE PLANS, SPECIFICATIONS, CONTRACTS, AND INSTRUMENTS.

Surveyor's Certificate

I, the undersigned, being a duly qualified and licensed Surveyor in the State of Indiana, do hereby certify that the foregoing is a true and correct copy of the original survey as shown to me by the owner thereof.

DATE MAY 17, 2018

ALTA / NSPS Land Title Survey

Property Address: 438, 502 & 508 E. Washington Blvd., Fort Wayne, Indiana 46802

GOULOFF - JORDAN SURVEYING AND DESIGN, INC.

1183 Broadway, Fort Wayne, IN 46802
 Ft. July 4th - 5382 FAX (317) 424-4916

REVISION	DATE	COMMENT	REVISION	DATE	COMMENT

Job No. 20180145

Drawn by: TML

Checked by: TCG

Sheet: 1 of 1



**STATEMENT OF BENEFITS
VACANT BUILDING DEDUCTION**

State Form 55182 (R / 2-14)
Prescribed by the Department of Local Government Finance

CITY OF FT WAYNE

JUL 07 2016

20_16 PAY 20_17

FORM SB-1 / VBD

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).

This statement is being completed for real property that qualifies as an "eligible vacant building" as defined in IC 6-1.1-12.1-1(17).

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 occupation of the eligible vacant building for which the person wishes to claim a deduction.
2. To obtain a vacant building deduction, a Form 322/VBD must be filed with the county auditor before May 10 in the year in which the property owner or his tenant occupies the vacant building or not later than thirty (30) days after the assessment notice is mailed to the property owner if it was mailed after April 10. If the property owner misses the May 10 deadline in the initial year of occupation, he can apply between March 1 and May 10 of a subsequent year.
3. A property owner who files the Form 322/VBD must provide the county auditor and the designating body with a Form CF-1/VBD to show compliance with the approved Form SB-1/VBD. The Form CF-1/VBD must also be updated each year in which the deduction is applicable.

SECTION 1		TAXPAYER INFORMATION			
Name of taxpayer HG Avenue Ft Wayne LLC f/b/o Avenue Development LLC					
Address of taxpayer (number and street, city, state, and ZIP code) 3815 River Crossing Parkway, Suite 100, Indianapolis, IN 46240					
Name of contact person Mike Mattingly		Telephone number (317) 566-2049		E-mail address	
SECTION 2		LOCATION AND DESCRIPTION OF PROPOSED PROJECT			
Name of designating body City of Fort Wayne				Resolution number	
Location of property 436 E Washington Blvd, 502 E. Washington Blvd, 508 E. Washington Blvd, Ft Wayne, IN 46802		County Allen		DLGF taxing district number 02-074	
Description of eligible vacant building that the property owner or tenant will occupy (use additional sheets if necessary). The building at 436 E. Washington Blvd. is a 15,000 sq.ft. building that has been unoccupied for at least one year. It will be renovated to become a health care clinic primarily serving the Medicare population.				Estimated occupancy date (month, day, year) 08/01/2016	
				Estimated date placed-in-use (month, day, year) 10/01/2016	
SECTION 3		ESTIMATE OF EMPLOYEES AND SALARIES AS A RESULT OF PROPOSED PROJECT			
Current number 0	Salaries 0.00	Number retained 0	Salaries 0.00	Number additional 36	Salaries 2,622,631.00
SECTION		ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT			
		REAL ESTATE IMPROVEMENTS			
		COST		ASSESSED VALUE	
Current values				380,900.00	
Plus estimated values of proposed project		2,100,000.00			
Less values of any property being replaced					
Net estimated values upon completion of project		2,100,000.00			
SECTION 5		EFFORTS TO SELL OR LEASE VACANT BUILDING			
Described efforts by the owner or previous owner to sell, lease, or rent the building during period of vacancy: The property has been listed for sale since 2013 and there is no active tenant since the former closed.					
Show amount for which the building was offered for sale, lease, or rent during period of vacancy. Listed sale price: \$530,000					
List any other benefits resulting from the occupancy of the eligible vacant building. The building will be used as a health care clinic for the Medicare population. The operator of the facility also provides community events that the public is welcome to and will open the clinic as a warming center when necessary.					
SECTION 6		TAXPAYER CERTIFICATION			
I hereby certify that the representations in this statement are true.					
Signature of authorized representative <i>Mike Mattingly</i>		Title General Manager		Date signed (month, day, year) 05/23/16	

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

B. The amount of the deduction applicable is limited to \$ unlimited.

C. Other limitations or conditions (specify) _____

D. 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

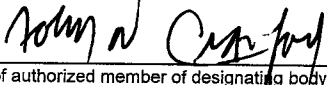
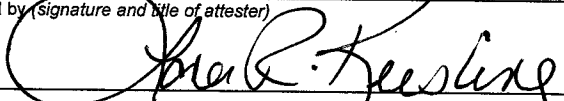
E. For a statement of benefits approved after June 30, 2013, did the designating body adopt an abatement schedule per IC 6-1.1-12.1-17?

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 <u>260-427-1221</u>	Date signed (month, day, year) <u>7-26-16</u>
Printed name of authorized member of designating body <u>John Crawford</u>	Name of designating body <u>City Council</u>	
Attested by (signature and title of attester) 	Printed name of attester <u>Lana R Keesting</u>	

* 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 6-1.1-12.1-1(17) "Eligible vacant building" means a building that

- (A) is zoned for commercial or industrial purposes; and
- (B) is unoccupied for at least one (1) year before the owner of the building or a tenant of the owner occupies the building, as evidenced by a valid certificate of occupancy, paid utility receipts, executed lease agreements, or any other evidence of occupation that the department of local government finance requires.

IC 6-1.1-12.1-17

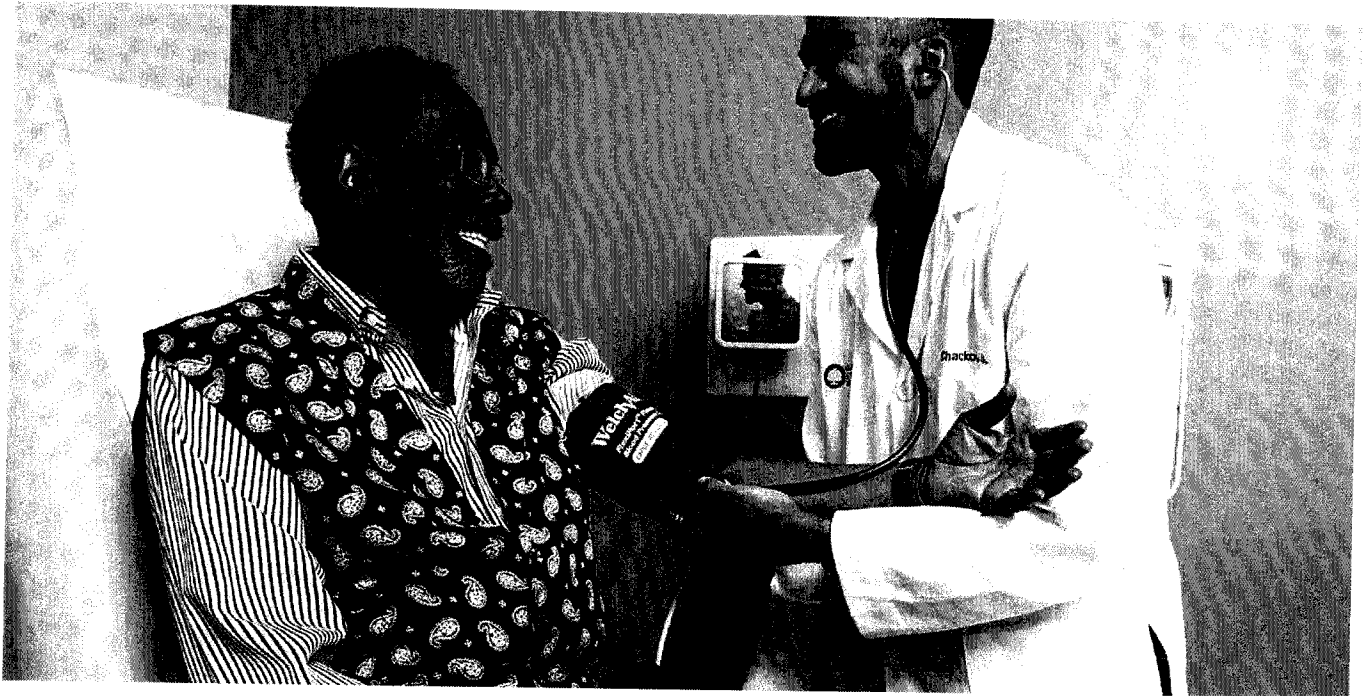
Abatement schedules

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.



We are Oak Street Health

We're real people who are passionate about your health and well-being.

WE CARE ABOUT YOU

We know that investing in our patients' everyday health is the best way to improve their quality of life. That's why our providers take the time to listen to each patient, understand their individual circumstances, and develop comprehensive care plans that address their needs.

Oak Street Health is tailored to the unique healthcare needs of people with Medicare. Our doctors see fewer patients than most doctors, so they spend more time with you. This allows us to take the time to understand your individual circumstances and develop a comprehensive care plan for you.

We are committed to the communities we serve.

We are proud to reflect the diversity of the patients we serve through our community clinics. Each clinic features a community room with unique programming including fitness classes, computer lessons, and movie nights. Many of our patients take advantage of our door-to-door transportation options for their appointments. Ask today to see if you can as well!



(773) 922-7884 (tel:1-773-922-7884)

info@oakstreethealth.com (mailto:info@oakstreethealth.com)

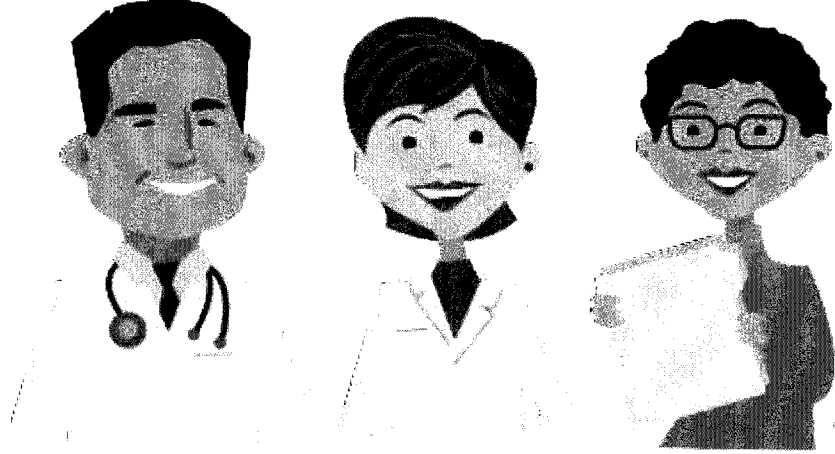
To make an appointment, schedule a tour, or learn more about Oak Street Health, send us an email or give us a call.

[Media \(/media\)](#) [Careers \(/careers\)](#) [Leadership \(/leadership\)](#) [Insurance Advisors \(/insurance_advisors\)](#) [FAQ \(/faq\)](#)

[HIPAA Notice \(/hipaa\)](#) [Privacy Policy \(/privacy\)](#)

 (<https://twitter.com/oakstreethealth>)  (<https://www.facebook.com/OakStreetHealth>)

@ 2015 Oak Street Health
213 N Racine, Chicago, IL 60607



MEMORANDUM



TO: City Council
FROM: Carman Young, Economic Development Specialist
DATE: July 19, 2016
RE: Request for designation by Avenue Development, LLC as an ERA for eligible vacant building improvements

BACKGROUND

PROJECT ADDRESS:	436, 502, 508 E. Washington Blvd.	PROJECT LOCATED WITHIN:	Economic Development Target Area
PROJECT COST:	\$2,100,000	COUNCILMANIC DISTRICT:	5

COMPANY PRODUCT OR SERVICE:	Avenue Development, LLC is a commercial property developer that primarily develops medical facilities for health and wellness. Avenue Development, LLC will develop a health care clinic and lease it to Oak Street Health.
PROJECT DESCRIPTION:	

CREATED		RETAINED	
JOBS CREATED (FULL-TIME):	37	JOBS RETAINED (FULL-TIME):	0
JOBS CREATED (PART-TIME):	0	JOBS RETAINED (PART-TIME):	0
TOTAL NEW PAYROLL:	\$2,622,633	TOTAL RETAINED PAYROLL:	\$0
AVERAGE SALARY (FULL-TIME NEW):	\$70,881	AVERAGE SALARY (FULL-TIME RETAINED):	\$0

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 designated has been vacant for at least one year.

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 DE- Downtown Edge. The Downtown Edge district permits medical facilities.

Yes No N/A

Project encourages the improvement or replacement of a deteriorated or obsolete structure? **The property to be designated has been vacant for at least one year and is currently is a state of disrepair. This project will include the rehabilitation of the building and the parking lot across the street.**

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:

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: 37 full-time jobs will be created

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 eligible vacant building is one year.

Under Fort Wayne Common Council's tax abatement policies and procedures, Avenue Development, LLC is eligible for a one year deduction on eligible vacant building improvements. Attached is a spreadsheet that shows how the application scored under the review system. Also attached is a calculation of property taxes saved/paid with the deduction.

COMMENTS

Signed and Reviewed:


Economic Development Specialist

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

*New tax abatement percentages have been changed to reflect change in state law

Avenue Development, LLC

REAL PROPERTY TAX ABATEMENT - 1yr Schedule

Year	Cash Value	True Tax Value	Assessed Value	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	0.035045	\$0	\$73,595
										<u>\$73,595</u>
						TOTAL TAX SAVED REAL PROPERTY		(1 yr on 1 yr deduction)		
						TOTAL TAX PAID REAL PROPERTY		(1 yr on 1 yr deduction)		<u>\$0</u>

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

Real Property Abatements

Tax Abatement Review System

Avenue Development LLC

Points Possible	Points Awarded
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INVESTMENT (30 points possible)

Total new investment in real property (new structures and/or rehabilitation)

Over \$1,000,000	\$2,100,000	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	10
\$18,500 to \$34,999	\$56,756	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	
\$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	5
\$10,000 to \$29,999	\$2,622,633 x .0135= \$35,405	4	
\$5,000 to \$9,999		3	
\$3,000 to \$4,999		2	
less than \$3,000		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	29-2061 Nurse	1.23	5	5
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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	
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	37	6	6
10-24		4	
1 to 9		2	

WAGES (20 points possible)

Median salary of the jobs created and/or retained

Over \$45,000	\$61,633	20	20
\$40,000 to \$44,999		16	
\$35,000 to \$39,999		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	

SUSTAINABILITY

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

Total 63

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.

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 Crawford.

Read the second time by title and referred to the Finance Committee.

Read the third time in full and on motion by Councilman Crawford, placed on passage by the following vote:


<u>TOTAL VOTES</u>	<u>AYES</u>	<u>NAYS</u>	<u>ABSTAINED</u>	<u>ABSENT</u>
ARP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BARRANDA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CRAWFORD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIDIER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ENSLEY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FREISTROFFER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HINES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JEHL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PADDOCK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DATED: July 26, 2016


LANA R. KEESLING, CITY CLERK

Passed and adopted by the Common Council of the City of Fort Wayne, Indiana, as Resolution No. R-16-07-10 on the 26th day of July, 2016

ATTEST:

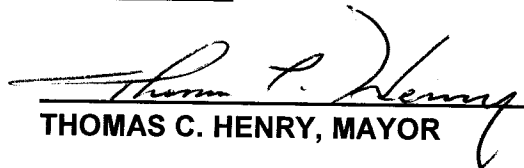

LANA R. KEESLING
CITY CLERK


PRESIDING OFFICER

Presented by me to the Mayor of the City of Fort Wayne, Indiana, on the 27th of July 2016, at the hour of 9:00 o'clock P.M. E.S.T.


LANA R. KEESLING, CITY CLERK

Approved and signed by me this 1st day of Aug 2016, at the hour of 4:30 O'clock P.M. E.S.T.


THOMAS C. HENRY, MAYOR

BILL NO. R-16-07-10

**REPORT OF COMMITTEE ON FINANCE
JULY 26, 2016**

John Crawford Chair

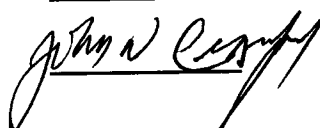
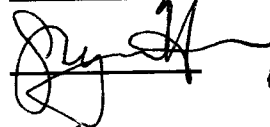
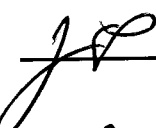

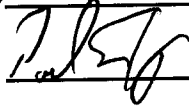
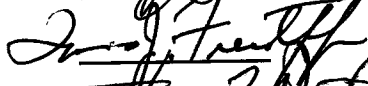
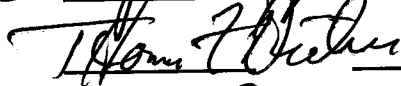

Glynn Hines Co-Chair

All Council Members

A DECLARATORY RESOLUTION designating an
"Economic Revitalization Area" under I.C. 6-1.1-12.1
for property commonly known as 436, 502, 508 E.
Washington Blvd., Fort Wayne, Indiana 46802
(Avenue Development LLC)

Involving a total estimated cost of \$2,100,000.00

**COMMITTEE ON FINANCE HAVE HAD SAID Ordinance under consideration
and beg leave to report back to the Common Council that said Ordinance**

<u>DO PASS</u>	<u>DO NOT PASS</u>	<u>ABSTAIN</u>	<u>NO REC</u>
			
			
			
			
			
			

**LANA R. KEESLING
CITY CLERK**

