

A RESOLUTION approving a Waiver of Noncompliance for a Late-Filed Application for the Economic Revitalization Area Deduction on Personal Property Improvements (Form 103-ERA and Form 103-EL) for 12714 Coldwater Road, (Sedation Dentistry of Fort Wayne) under Confirming Resolution R-35-12

WHEREAS, Common Council has previously designated and declared by Declaratory Resolution and Confirming Resolution property at 12714 Coldwater Road for Sedation Dentistry of Fort Wayne (Confirming Resolutions R-35-12) 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; and

WHEREAS, the original Statement of Benefits and economic revitalization area designation application submitted by sedation Dentistry of Fort Wayne and approved under Confirming Resolution R-35-12 was for \$400,000 in personal property improvements; and

WHEREAS, representatives of Sedation Dentistry of Fort Wayne have informed the City of Fort Wayne that their schedule of deduction from assessed valuation personal property in economic revitalization areas (Form 103-ERA) and the equipment list for new additions to ERA deduction personal property in an economic revitalization area (Form 103-EL) for 2016 were not filed in a timely manner; and

WHEREAS, this oversight was an unusual occurrence for Sedation Dentistry of Fort Wayne which has made diligent efforts in good faith to make all required Indiana tax abatement filings on a timely basis; and

WHEREAS, the Common Council finds that Sedation Dentistry of Fort Wayne has fulfilled its pledge to purchase and install new equipment; and

WHEREAS, Sedation Dentistry of Fort Wayne has retained its workforce as reported on the approved statement of benefits forms; and

WHEREAS, Sedation Dentistry of Fort Wayne with Statement of Benefits forms (CF-1/PP) for 2016 were approved by Fort Wayne Common Council on June 28, 2016; and

WHEREAS, the Common Council acknowledges that Sedation Dentistry of Fort Wayne has requested a waiver of non compliance which the Common Council has the power and authority to approve, under I.C. 6-1.1-12.1-9.5 and I.C. 6-1.1-12.1-11.3; and

WHEREAS, the Common Council intends that Sedation Dentistry of Fort Wayne receive the tax abatement benefits to which they would have been entitled had no non compliance event occurred, so long as the waiver of non compliance and the granting of those benefits does not prejudice the City of Fort Wayne; and

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WHEREAS, the Common Council has concluded that granting of the ERA deduction for 2016 payable 2017 tax year would not create a strain on the City of Fort Wayne's fiscal budget; and

WHEREAS, I.C. 6-1.1-12.1-9.5 and I.C. 6-1.1-12.1-11.3 permit tax abatement non compliance events such as the untimely filing of deduction application paperwork to be waived; and

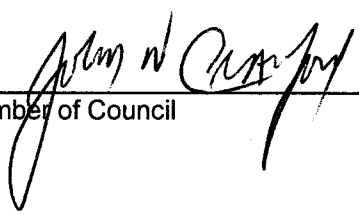
WHEREAS, the noncompliance event has been corrected and a public hearing of the Common Council has been held on the waiver.

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


SECTION 1. That, Common Council hereby waives all clerical and technical errors and nonconformities that are waivable under State and local law, including without limitation those errors and nonconformities described in I.C. 6-1.1-12.1-9.5 and I.C. 6-1.1-12.1-11.3.

SECTION 2. As authorized by I.C. 6-1.1-12.1-9.5(d), the Common Council will permit Sedation Dentistry of Fort Wayne to receive their personal property economic revitalization area deductions for 2016 payable 2017 under Confirming Resolution R-35-12. The Allen County Assessor shall be supplied with a copy of this Resolution, upon passage, and instructed to apply the deduction amounts. This resolution shall have no effect on the assessed value or taxes payable with respect to Sedation Dentistry of Fort Wayne's real property.

SECTION 3. 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



UNION CHAPEL

DENTISTRY

Dr. David Painter & Associates PC

City of Fort Wayne
Carman Young
Economic Development Specialist
Citizens Square
200 East Berry Street, Suite 320
Fort Wayne, IN 46802

6-15-16

Re: Form 113/PP – Notice of Assessment Change – Denial of abatement due to late personal property tax form filing.

Dear Carman,

I am writing this letter to request the City Council for a "Waiver of Non-Compliance" for the personal property tax abatement previously granted in 2013.

The office is meeting it's predicted jobs created – which is always good news. Somehow in the tax time rush - between my accountant and me - we both missed the Business Personal Property Tax (Form 103)for this abatement. It is weird how every other form was accounted for but this one at tax time.

I apologize for the mix up. If any questions, I can be reached at 637-5000.

Thank you for your consideration,

David Painter DDS

*Fellow of the
Misch Implant Institute*

*Fellow of the International
Congress of Oral Implantologists*

*Fellow of the
Pierre Fauchard Academy*

*Fellow of the Academy
of General Dentistry*

Indiana Sedation Permit Holder

Union Chapel Dentistry PC
12714 Coldwater Road Suite A * Fort Wayne, IN 46845 * 260-637-5000



NOTICE OF ASSESSMENT / CHANGE
(By An Assessing Official)

State Form 21521 (R7 / 10-10)
 Prescribed by the Department of Local Government Finance

FORM 113 / PP

ASSESSMENT DATE
MARCH 1, 2016

Notice to the taxpayer of the Opportunity to Appeal (IC6-1.1-15-1):
 If a taxpayer does not agree with the action of the assessing official giving this notice, the County Property Tax Assessment Board of Appeals will review that action if you file a notice in writing with the Township Assessor (if any) or the County Assessor within forty-five (45) days of the mailing of this notice. This written notice should include the name of the taxpayer, the address of the property, the key number or the parcel number of the property, the address of the taxpayer (if different from the property address), and the telephone number of the taxpayer. An appeal of this assessed value requires evidence relevant to the value of the taxpayer's property as of the assessment date.

Name of Taxpayer	DBA
UNION CHAPEL DENISTRY PC	UNION CHAPEL DENISTRY
Address	
12714 COLDWATER RD FORT WAYNE, IN 46845	

You are hereby notified that the undersigned assessing official has taken the action described below with regard to the following property:

LOCATION OF PROPERTY		
County Allen	Township PERRY TOWNSHIP	Taxing District 091 091 FORT WAYNE PERRY (43)
Address where property is located (number and street, city, and ZIP code) 12714 COLDWATER RD, FORT WAYNE, 46845		

DESCRIPTION OF PROPERTY		
<input type="checkbox"/> Farmer's Personal Property (Form 102)	<input checked="" type="checkbox"/> Business Personal Property (Form 103)	<input type="checkbox"/> Public Utility Company (Form 1) (deductions only)

ACTION	
<input type="checkbox"/> Assessed value before deductions has been changed from \$ _____ to \$ _____.	
<input checked="" type="checkbox"/> Assessed value of a deduction was changed from \$ <u>238,100</u> to \$ _____.	
<input type="checkbox"/> Failure to file required assessment return. Assessment has been estimated to be \$ _____.	
<input type="checkbox"/> Other (explain) _____	

REASON(S) FOR ACTION	
<input type="checkbox"/> Failure to file required assessment return. You have the right to file an assessment return within 30 days of the first notice. (IC 6-1.1-3-15)	
<input type="checkbox"/> Mathematical error (describe below)	<input type="checkbox"/> Omitted Property (describe below)
<input type="checkbox"/> Mandatory or allowable adjustment not properly computed or disallowed: (describe and state below)	
<input type="checkbox"/> Abnormal obsolescence adjustment disallowed [be sure to specify reason(s)]	
<input checked="" type="checkbox"/> Exemption disallowed (describe and give reasons):	<input checked="" type="checkbox"/> In-whole <input type="checkbox"/> In-part
<input type="checkbox"/> Industrial waste control equipment not certified by Department of Environmental Management	<input type="checkbox"/> Air pollution control equipment not qualified
<input checked="" type="checkbox"/> Other <u>DUE TO LATE FILING (5-27-16) ABATEMENT HAS BEEN DENIED.</u>	

Description or Reasons (attach additional sheet if necessary)	02-091-4814028
You may go in front of the Fort Wayne Common Council and ask for a Waiver of Non-Compliance. If you have any questions please call Tracey at #260-449-3118.	

Date of this notice (month, day, year) Friday, 27 May 2016	Name (print) Personal Property Dept.
Telephone Number (260)449-7325	Title Allen County Assessor, St
Address (number and street, city, state, and ZIP code) 1 East Main Street, Ste. 407, Fort Wayne, IN 46802	
Signature <i>Steph O'Day</i>	

NOTICE OF PUBLIC HEARING
FORT WAYNE COMMON COUNCIL
(RESOLUTION NO.)

ON AUGUST 9, 2016 AT 5:30 P.M., IN THE CONFERENCE ROOM 030, CITIZENS SQUARE, FORT WAYNE, INDIANA, A PUBLIC HEARING WILL BE HELD ON THE MATTER OF A WAIVER OF NONCOMPLIANCE WITH THE PROCEDURAL REQUIREMENTS OF I.C. 6-1.1-12.1, RELATING TO THE PERSONAL PROPERTY DEDUCTION OF PROPERTY AT 12714 COLDWATER ROAD FOR SEDATION DENTISTRY OF FORT WAYNE.

THE PUBLIC HEARING ON THE WAIVER WILL BE HELD PURSUANT TO I.C. 6-1.1-12.1-9.5 AND I.C. 6-1.1-12.1-11.3.

ALL INTERESTED PERSONS ARE INVITED TO ATTEND AND BE HEARD AT THE PUBLIC HEARING.

“REASONABLE ACCOMMODATIONS” FOR PERSONS WITH A KNOWN DISABLING CONDITION WILL BE CONSIDERED IN ACCORDANCE WITH STATE AND FEDERAL LAW. ANY PERSON NEEDING A “REASONABLE ACCOMMODATION” SHOULD NOTIFY THE CITY OF FORT WAYNE PUBLIC INFORMATION OFFICE (260) 427-1120, TTY (260) 427-1200 AT LEAST (72) HOURS PRIOR TO THE PUBLIC HEARING.

DIGEST SHEET

TITLE OF RESOLUTION: Resolution Approving a Waiver of Noncompliance for a Late-Filed Application for the Economic Revitalization Area Deduction on Personal Property Improvements (Form 103-ERA and Form 103-EL) for Sedation Dentistry of Fort Wayne under confirming resolution R-35-12.

DEPARTMENT REQUESTING RESOLUTION: Community Development Division

SYNOPSIS OF RESOLUTION: This is to approve a waiver of noncompliance for late-filed personal property deduction forms for Sedation Dentistry of Fort Wayne.

EFFECT OF PASSAGE: Approval of this resolution and granting of a waiver of noncompliance will allow Sedation Dentistry of Fort Wayne to continue to receive their personal property deductions.

EFFECT OF NON-PASSAGE: Potential loss of future development by Sedation Dentistry of Fort Wayne.

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

ASSIGNED TO COMMITTEE (CO-CHAIRS): Glynn Hines and John Crawford



SEDATION

DENTISTRY

Dr. David Painter & Associates PC

Fort Wayne Community Development Division
Attn: Elissa McGauley, AICP, Economic Development Specialist
200 East Berry St.
Suite #320
Fort Wayne, IN 46802

5-9-2016

Elissa,

Enclosed is the requested tax phase in paperwork. Please review it and let me know if there is anything in need of revision.

Thank you for your assistance.

Yours,

David Painter DDS

Thanks!
oo

*Indiana Sedation
Permit Holder*

*Fellow of the
Misch Implant Institute*

*Fellow of the International
Congress of Oral Implantologists*

*Fellow of the
Pierre Fauchard Academy*

*Fellow of the Academy
of General Dentistry*

Sedation Dentistry of Fort Wayne PC
12714 Coldwater Road Suite ZZZ * Fort Wayne, IN 46845 * 260-637-8687 * 260-NER-VOUS



**COMPLIANCE WITH STATEMENT OF BENEFITS
PERSONAL PROPERTY**

State Form 51765 (R3 / 11-15)
Prescribed by the Department of Local Government Finance

CITY OF FT WAYNE
CITY
FORM CF-1 / PP

MAY 16 2016 *Gene*

COMMUNITY DEVL

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

SECTION 1		TAXPAYER INFORMATION						
Name of taxpayer	Sedation Dentistry of Fort Wayne		County Allen					
Address of taxpayer (number and street, city, state, and ZIP code)	12714 Coldwater Road, Fort Wayne, IN 46845		DLGF taxing district number Perry 057					
Name of contact person	Dr. David Painter		Telephone number (260) 837-8687					
SECTION 2		LOCATION AND DESCRIPTION OF PROPERTY						
Name of designating body	Resolution number	Estimated start date (month, day, year)						
Fort Wayne Common Council	R-35-12	11/01/2012						
Location of property	Actual start date (month, day, year)							
12714 Coldwater Road, Fort Wayne, IN 46845	5/01/2013							
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired.	Estimated completion date (month, day, year)							
Dental Equipment; Imaging Equipment; Business Systems; Software; Office Equipment; Furniture; Computer Systems4	1/15/2013							
	Actual completion date (month, day, year)							
	5/01/2013							
SECTION 3		EMPLOYEES AND SALARIES						
EMPLOYEES AND SALARIES		AS ESTIMATED ON SB-1	ACTUAL					
Current number of employees								
Salaries								
Number of employees retained								
Salaries		4.00	10.00					
Number of additional employees								
Salaries		160,300.00	247,819.55					
SECTION 4		COST AND VALUES						
AS ESTIMATED ON SB-1	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project							400,000.00	400,000.00
Less: Values of any property being replaced							400,000.00	400,000.00
Net values upon completion of project								
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project							471,956.00	
Less: Values of any property being replaced								
Net values upon completion of project							471,956.00	
NOTE: The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6(c).								
SECTION 5		WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER						
WASTE CONVERTED AND OTHER BENEFITS		AS ESTIMATED ON SB-1	ACTUAL					
Amount of solid waste converted								
Amount of hazardous waste converted								
Other benefits:								
SECTION 6		TAXPAYER CERTIFICATION						
I hereby certify that the representations in this statement are true.								
Signature of authorized representative	Title	Date signed (month, day, year)						
<i>David Painter</i>	<i>Owner/DDS</i>	5-9-16						

PUBLIC BENEFIT INFORMATION ANNUAL UPDATE

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. 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

CITY OF FT WAYNE

Current Full-Time Employment on Approved Statement of Benefits Form/s

MAY 16 2016

Occupation	Occupation Code	Number of Jobs	Total Payroll

COMMUNITY DEVL.

Current Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll

Retained Full-Time Employment on Approved Statement of Benefits Form/s

Occupation	Occupation Code	Number of Jobs	Total Payroll

Retained Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll

Additional Full-Time Employment on Approved Statement of Benefits Form/s

Occupation	Occupation Code	Number of Jobs	Total Payroll
Hygienist	29-2021	1	51893
Assistant	31-9091	2	35113
Front Desk	43-4171	4	91185
Dentist	291021	1	48750

Additional Full-Time Employment

Occupation	Occupation Code	Number of Jobs	Total Payroll

Current Part-Time or Temporary Jobs on Approved Statement of Benefits Form/s

Occupation	Occupation Code	Number of Jobs	Total Payroll

Current Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll

Retained Part-Time or Temporary Jobs on Approved Statement of Benefits Form/s

Occupation	Occupation Code	Number of Jobs	Total Payroll

Retained Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll

Additional Part-Time or Temporary Jobs on Approved Statement of Benefits Form/s

Occupation	Occupation Code	Number of Jobs	Total Payroll
Maintenance	49-9071	1	8333
Computer Tech	15-1151	1	12000
Front Desk	434171	1	543

Additional Part-Time or Temporary Jobs

Occupation	Occupation Code	Number of Jobs	Total Payroll

Please confirm whether the existing jobs are provided the listed benefits. Check the boxes below:

- | | | |
|--|---|---|
| <input type="checkbox"/> Pension Plan | <input 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:



**COMPLIANCE WITH STATEMENT OF BENEFITS
REAL ESTATE IMPROVEMENTS**

State Form 51766 (R3 / 2-13)
Prescribed by the Department of Local Government Finance

2016 CITY
CITY OF FT WAYNE

20 PAY 20
FORM CF-1 / Real Property

MAY 16 2016

Emc

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

INSTRUCTIONS:

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))
5. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

COMMUNITY DEVELOPMENT

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer 3rd Well LLC (DBA - Sedation Dentistry of Fort Wayne)	County Allen
Address of taxpayer (number and street, city, state, and ZIP code) 12714 Coldwater Road Suite ZZZ, Fort Wayne, IN 46845	DLGF taxing district number 91
Name of contact person David Painter	Telephone number (260) 637-8687

SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY		
Name of designating body FORT WAYNE COMMON COUNCIL	Resolution number R-35-12	Estimated start date (month, day, year) 7-1-12
Location of property 12714 Coldwater Road Suite ZZZ, Fort Wayne, IN 46845		Actual start date (month, day, year) 10-1-12
Description of real property improvements New Dental Office		Estimated completion date (month, day, year) 121-1-12
		Actual completion date (month, day, year) 5-1-12

SECTION 3 EMPLOYEES AND SALARIES		
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees		
Salaries		
Number of employees retained		
Salaries		
Number of additional employees	4	10
Salaries	160,300	247,819.55

SECTION 4 COST AND VALUES		
COST AND VALUES	REAL ESTATE IMPROVEMENTS	
	AS ESTIMATED ON SB-1	ACTUAL
	COST	ASSESSED VALUE
Values before project	205000	196000
Plus: Values of proposed project	1300000	1300000
Less: Values of any property being replaced		
Net values upon completion of project	1505000	1496000
	COST	ASSESSED VALUE
Values before project	205000	1964000
Plus: Values of proposed project	1300000	500500
Less: Values of any property being replaced		
Net values upon completion of project	1505000	696900

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER		
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted		
Amount of hazardous waste converted		
Other benefits:		

SECTION 6 TAXPAYER CERTIFICATION		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative 	Title Owner DDS	Date signed (month, day, year) 5-9-16

From: Tracey Maraviov
To: Carman Young
Subject: RE: Union Chapel Dentistry Waiver
Date: Tuesday, August 02, 2016 3:07:16 PM

Carman,

Yes, I have all of my paperwork from them, 130Long, 103ERA, Equipment List, 104, CF-1, SB-1, and Resolution.

Thank you,

From: Carman Young
Sent: Tuesday, August 02, 2016 2:45 PM
To: Tracey Maraviov
Subject: RE: Union Chapel Dentistry Waiver

Tracey,

Did Sedation Dentistry submit their 103-ERA and 103-EL forms to you at all?

Are these the forms they submit to you?

I'm trying to anticipate and cover all my bases before Council on next Tuesday.

Thank you for your help!
Carman

From: Tracey Maraviov
Sent: Wednesday, July 27, 2016 12:58 PM
To: Carman Young
Subject: RE: Union Chapel Dentistry Waiver

Thanks for the heads up! Could you let me know when you waive it so that I can get corrective paperwork to the Auditor?

Thanks again,

Tracey Maraviov
Sr. Personal Property Deputy
Allen County Assessor's Office
One E. Main St. Ste 407
Fort Wayne, IN 46802

Ph #260-449-3118

Fx #260-449-4693

tracey.maraviiov@co.allen.in.us

Web page: www.allencountyassessor.org

How are we doing? Take this brief [customer survey](#)

From: Carman Young
Sent: Wednesday, July 27, 2016 12:09 PM
To: Leisa Patrick; Tracey Maraviiov
Subject: Union Chapel Dentistry Waiver

Hello,

Sedation Dentistry of Fort Wayne/Union Chapel Dentistry has applied for a Waiver of Noncompliance for a Late-Filed Application for the Economic Revitalization Area Deduction on Personal Property Improvements for property located at 12714 Coldwater Road. A public hearing and vote on this application will be held on Tuesday, August 9th at 5:30pm.

If you have any questions please just ask!

Carman Young
Economic Development Specialist
Division of Community Development
City of Fort Wayne-Citizens Square
200 E. Berry Street Suite 320
Fort Wayne, IN 46802
Phone:260-427-5814
Fax: 260-427-1132

Public Hearing Date: August 9, 2016.


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:

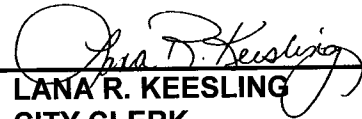
<u>TOTAL VOTES</u>	<u>AYES</u>	<u>NAYS</u>	<u>ABSTAINED</u>	<u>ABSENT</u>
ARP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
BARRANDA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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: August 9, 2016


LANA R. KEESLING, CITY CLERK

Passed and adopted by the Common Council of the City of Fort Wayne, Indiana, as
Resolution No. R-16-07-18 on the 9th day of August, 2016

ATTEST:

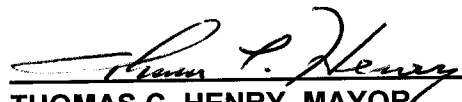

LANA R. KEESLING
CITY CLERK


PRESIDING OFFICER

Presented by me to the Mayor of the City of Fort Wayne, Indiana, on the 10th
of August 2016, at the hour of 9:30 o'clock P.M. E.S.T.


LANA R. KEESLING, CITY CLERK

Approved and signed by me this 12th day of August
2016, at the hour of 9:00 O'clock Am. E.S.T.


THOMAS C. HENRY, MAYOR

The Journal Gazette

Account # 1060008 - 1251331

Allen County, Indiana

FW Common Council

PUBLISHER'S CLAIM

LINE COUNT

Display Master (Must not exceed two actual lines, neither of which shall total more than four solid lines of the type in which the body of the advertisement is set) -- number of equivalent lines

Head -- number of lines

Body -- number of lines

Tail -- number of lines

Total number of lines in notice

59

COMPUTATION OF CHARGES

59 lines, 1 column(s) wide equals

59 equivalent lines at \$ 0.436 cents per line

\$ 25.72

Additional charges for notices containing rule or tabular work
(50 per cent of above amount)

-

Charge for extra proofs of publication
(\$2.00 for each proof in excess of two)

-

TOTAL AMOUNT OF CLAIM

\$ 25.72

DATA FOR COMPUTING COST

Width of single column in picas 9.8 Size of type 7point.

Number of Insertions 1

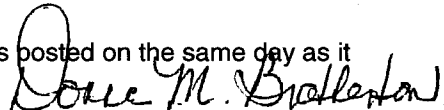
Pursuant to the provisions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

I also certify that the printed matter attached hereto is a true copy, of the same column width and type size, which was duly published in said paper 1 times.

The dates of publication being as follows:

7/29/2016

Additionally, Newspaper has a Web site and this public notice was posted on the same day as it was published in The Journal Gazette.



Donna M. Brotherton
Legal Clerk

Date: July 29, 2016

ATTACH COPY OF ADVERTISEMENT HERE

NOTICE OF PUBLIC HEARING

FORT WAYNE COMMON COUNCIL
CONFIRMING RESOLUTION
NO. R-16-07-18

NOTICE IS HEREBY GIVEN THAT THE FORT WAYNE COMMON COUNCIL OF THE CITY OF FORT WAYNE, INDIANA, WILL CONDUCT A PUBLIC HEARING ON AUGUST 9TH, 2016, AT 5:30 P.M. IN ROOM 030 - COUNCIL DISCUSSION ROOM - GARDEN LEVEL CITIZENS SQUARE, 200 E. BERRY, FORT WAYNE, INDIANA 46802; APPROVING A WAIVER ON NONCOMPLIANCE FOR A LATE-FILED APPLICATION FOR THE ECONOMIC REVITALIZATION AREA ON PERSONAL PROPERTY IMPROVEMENTS (FORM 103-ERA AND FORM 103-EL) UNDER CONFIRMING RESOLUTION R-35-12 FOR A PROPERTY COMMONLY KNOWN AS:

12714 COLDWATER ROAD
FORT WAYNE, INDIANA 46845
(SEDATION DENTISTRY
OF FORT WAYNE)

COMMON COUNCIL WILL CONDUCT A PUBLIC HEARING ON WHETHER THE ABOVE DESCRIBED RESOLUTION SHOULD BE CONFIRMED, MODIFIED AND CONFIRMED, OR RESCINDED ON TUESDAY, AUGUST 9TH, 2016.

IF CONFIRMED, SAID DESIGNATION SHALL EXPIRE DECEMBER 31, 2016.

ALL INTERESTED PERSONS ARE INVITED TO ATTEND AND BE HEARD AT THE PUBLIC HEARING.

"REASONABLE ACCOMMODATIONS" FOR PERSONS WITH A KNOWN DISABLING CONDITION WILL BE CONSIDERED IN ACCORDANCE WITH STATE AND FEDERAL LAW. ANY PERSON NEEDING A "REASONABLE ACCOMMODATION" SHOULD NOTIFY PUBLIC INFORMATION OFFICE (260) 427-1120, TTY (260) 427-1200, AT LEAST SEVENTY-TWO HOURS PRIOR TO THE MEETING.

LANA R. KEESLING
CITY CLERK
1251331 nspaxip

The News-Sentinel

Account # 1060008 - 1251331
FW Common Council

Allen County, Indiana

PUBLISHER'S CLAIM

LINE COUNT

Display Master (Must not exceed two actual lines, neither of which shall total more than four solid lines of the type in which the body of the advertisement is set) -- number of equivalent lines _____

Head -- number of lines _____

Body -- number of lines _____

Tail -- number of lines _____

Total number of lines in notice 59

ATTACH COPY OF ADVERTISEMENT HERE

COMPUTATION OF CHARGES

59 lines, 1 column(s) wide equals
59 equivalent lines at \$ 0.436 cents per line \$ 25.72

Additional charges for notices containing rule or tabular work
 (50 per cent of above amount) -

Charge for extra proofs of publication
 (\$2.00 for each proof in excess of two) -

TOTAL AMOUNT OF CLAIM \$ 25.72

DATA FOR COMPUTING COST

Width of single column in picas 9.8 Size of type 7point.
 Number of Insertions 1

Pursuant to the provisions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

I also certify that the printed matter attached hereto is a true copy, of the same column width and type size, which was duly published in said paper 3 times.

The dates of publication being as follows:

<u>7/29/2016</u>	-	-	-
-	-	-	-
-	-	-	-

Additionally, Newspaper has a Web site and this public notice was posted on the same day as it was published in The News-Sentinel.

Donna M. Brotherton

Donna M. Brotherton
Legal Clerk

Date: July 29, 2016

NOTICE OF PUBLIC HEARING

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FORT WAYNE, INDIANA 46845
(SEDATION DENTISTRY
OF FORT WAYNE)

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LANA R. KEESLING
CITY CLERK
1251331 hspaxip

REPORT OF COMMITTEE ON FINANCE

August 9, 2016

John Crawford Chair

Glynn Hines Co-Chair

All Council Members

A RESOLUTION approving a Waiver of Noncompliance for a Late-Filed Application for the Economic Revitalization Area Deduction on Personal Property Improvements (Form 103-ERA and Form 103-EL) for 12714 Coldwater Road, (Sedation Dentistry of Fort Wayne) under Confirming Resolution R-35-12

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

DO PASS

DO NOT PASS

ABSTAIN

NO REC

John Crawford
Glynn Hines
[Signature]
[Signature]

Jeff Ballard

[Signature]
[Signature]
[Signature]

**LANA R. KEESLING
CITY CLERK**

Lana R. Keesling