

**RESOLUTION NO. 2018-11-CM**

**BOARD OF COMMISSIONERS OF TIPPECANOE COUNTY  
APPROVING APPLICATION FOR PROPERTY TAX  
DEDUCTIONS FOR LUDO FACT USA, LLC**

WHEREAS, On January 14, 2014, the Tippecanoe County Council adopted a certain Declaratory Resolution No. 2014-04-CL, and on February 11, 2014, adopted confirmatory Resolution No. 2014-08-CL, designating certain real estate located in Tippecanoe County with respect to which Ludo Fact USA, LLC (Applicant) has proposed installation of new manufacturing equipment as an Economic Revitalization Area. The designation of the area as an Economic Revitalization Area permits the Applicant to qualify for certain property tax deductions; and

WHEREAS, The property consists of a certain acre portion of a 3.752 acre parcel located in Wea Township, Tippecanoe County, Indiana, at 4775 Dale Drive, Lafayette, Indiana ; the abbreviated legal description of the parcel is 52 South Industrial SD Ph 2 Sec 6 Lot 7 & PT S SE Sec 12 Twp 22 R4 2.575 A, further identified as Parcel ID 79-11-12-452-006.000-031. A more detailed description of the Economic Revitalization Area is available for inspection in the Tippecanoe County Assessor's Office. All of said property is located within the McCarty Lane-Southeast Industrial Expansion Economic Development Area; and

WHEREAS, Applicant has requested the Tippecanoe County Council to determine that it shall be entitled to the deductions from the assessed value of the manufacturing equipment in such Economic Revitalization Area; and

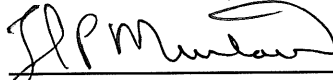
WHEREAS, IC 6-1.1-12.1-2 requires that if property located in an economic revitalization area is also located in an allocation area, an application for property tax deduction may not be approved unless the legislative body of the unit that approved the designation of the allocation area adopts a resolution approving the application; and

WHEREAS, the Board of Commissioners of Tippecanoe County has considered the application of Ludo Fact USA, LLC and other information brought to its attention, and hereby determines that it is in the best interest of Tippecanoe County, Indiana, to approve the the deductions under Indiana Code §6-1.1-12.1-4.5 as requested by Applicant with respect to the real property for a period not to exceed five (5) years according to a schedule set by the Tippecanoe County Council.

NOW THEREFORE BE IT RESOLVED, that the statement of benefits of Ludo Fact USA, LLC for the deductions from the assessed value of the manufacturing equipment in such Economic Revitalization Area is hereby approved pursuant to IC 6-1.1-12.1-2(k).

Adopted this 5<sup>th</sup> day of March 2018.

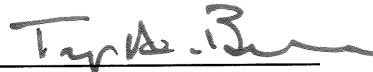
BOARD OF COMMISSIONERS OF  
TIPPECANOE COUNTY



Thomas P. Murtaugh, President

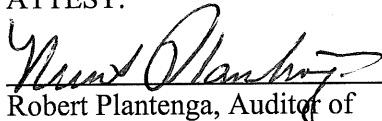


David S. Byers, Vice President



Tracy A. Brown, Member

ATTEST:



Robert Plantenga, Auditor of  
Tippecanoe County



STATEMENT OF BENEFITS
PERSONAL PROPERTY

State Form 51764 (R4 / 11-15)
Prescribed by the Department of Local Government Finance

FILED

FEB 02 2018

FORM SB-1 / PP

AUDITOR OF TIPPECANOE CO

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.

INSTRUCTIONS

- 1. This statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing...
2. The statement of benefits form must be submitted to the designating body and the area designated an economic revitalization area...
3. To obtain a deduction, a person must file a certified deduction schedule with the person's personal property return...
4. Property owners whose Statement of Benefits was approved, must submit Form CF-1/PP annually...
5. For a Form SB-1/PP that is approved after June 30, 2013, the designating body is required to establish an abatement schedule...

SECTION 1 TAXPAYER INFORMATION: Ludo Fact USA LLC, Steffen Kosir, 4775 Dale Drive, Lafayette, IN 47905.
SECTION 2 LOCATION AND DESCRIPTION OF PROPOSED PROJECT: Tippecanoe County Council, 4775 Dale Drive, Lafayette. Equipment: Die-cutter, laminator, chipboard machine, etc.
SECTION 3 ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT: Current 41 (36 FT, 5 PT) at \$1,427,920; Additional 32 at \$1,185,000.
SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT: Manufacturing Equipment \$1,164,140; R & D Equipment \$349,242; Logist Dist Equipment \$133,000; IT Equipment \$39,900.
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER: Estimated solid waste converted (pounds) none.
SECTION 6 TAXPAYER CERTIFICATION: I hereby certify that the representations in this statement are true. Signed by John D. Huber, General Manager, Feb. 2, 2018.

**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 \_\_\_\_\_. *NOTE: This question addresses whether the resolution contains an expiration date for the designated area.*
- 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 type="checkbox"/> No | <input type="checkbox"/> Enhanced Abatement per IC 6-1.1-12.1-18<br>Check box if an enhanced abatement was approved for one or more of these types. |
| 2. Installation of new research and development equipment; | <input type="checkbox"/> Yes | <input type="checkbox"/> No |   |
| 3. Installation of new logistical distribution equipment.  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |   |
| 4. Installation of new information technology equipment;   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |   |
- C. The amount of deduction applicable to new manufacturing equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_. (One or both lines may be filled out to establish a limit, if desired.)
- D. The amount of deduction applicable to new research and development equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_. (One or both lines may be filled out to establish a limit, if desired.)
- E. The amount of deduction applicable to new logistical distribution equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_. (One or both lines may be filled out to establish a limit, if desired.)
- F. The amount of deduction applicable to new information technology equipment is limited to \$ \_\_\_\_\_ cost with an assessed value of \$ \_\_\_\_\_. (One or both lines may be filled out to establish a limit, if desired.)
- 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 type="checkbox"/> Year 5  | <input type="checkbox"/> Enhanced Abatement per IC 6-1.1-12.1-18<br>Number of years approved: _____<br>(Enter one to twenty (1-20) years; may not exceed twenty (20) years.) |
| <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)	Telephone number (     )	Date signed (month, day, year)
Printed name of authorized member of designating body	Name of designating body	
Attested by: (signature and title of attester)	Printed name of attester	

\* 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.

# Ludo Fact USA

## SUPPLEMENT TO STATEMENT OF BENEFITS Real Estate & Personal Property

**INSTRUCTIONS:**

1. This completed SUPPLEMENT and the completed STATEMENT OF BENEFITS, along with all other requested materials, must be submitted to Greater Lafayette Commerce.
2. This SUPPLEMENT TO STATEMENT OF BENEFITS is part of the total application, and the CERTIFICATION in the STATEMENT OF BENEFITS applies to all statements in the APPLICATION.

**SECTION 1**

**APPLICANT**

Name of Taxpayer: Ludo Fact USA LLC	
Address of Taxpayer (street and number, city, state & ZIP code): 4775 Dale Drive, Lafayette, IN 47905	Telephone: 765.588.9138 E-mail:

Name of Applicant if different from Taxpayer: N/A	
Address of Applicant if different from Taxpayer (street and number, city, state & ZIP code):	Telephone: E-mail:
Description of relationship of Applicant to Taxpayer:	

Contact for this Application: Steffen Kosir	
Address of Contact if different from Taxpayer (street and number, city, state & ZIP code):	Telephone: 765.588.9138 E-mail: <a href="mailto:skosir@ludofactusa.cc">skosir@ludofactusa.cc</a>

Name of Parent Company (if any):
----------------------------------

Does the company currently conduct business at this site?	Yes	X	No	
If "No", how is the site currently used?				

Annual Report & History of Company	
Company Certified Public Accountant:	Roedel and Partner
Company Commercial Bankers:	Old National Bank
Company Counsel:	Reiling, Teder, and Schrier

**To be completed by GLC Staff**

Is this area currently designated as an Economic Revitalization Area?	Yes	✓	No	
Has it ever been so designated in the past?	Yes		No	
Is this property in a Tax Increment Finance (TIF) district (requires RD Commission Approval)?	Yes	✓	No	

# Ludo Fact USA

## SECTION 2

## JURISDICTION & PURPOSE

Jurisdiction:

Lafayette \_\_\_\_\_  
West Lafayette \_\_\_\_\_  
Tippecanoe \_\_\_\_\_ X

Purpose of Application:

Real Estate Tax Abatement - \_\_\_\_\_ years  
Personal Property Tax Abatement - 5 \_\_\_\_\_ years

Type of Industry:

Research & Development \_\_\_\_\_  
Manufacturing \_\_\_\_\_ X  
Logistics \_\_\_\_\_  
Information Technology \_\_\_\_\_  
Other \_\_\_\_\_ Please specify:

Describe proposed project.

Ludo Fact USA intends to expand current production capabilities - laminating, die-cutting, game fulfillment, and rigid box manufacturing - as well as add the new capability of producing playing card decks. All the new equipment is in support of the company's expanded efforts in the general packaging, board game, and jigsaw puzzle markets.

## SECTION 3

## PROPERTY DESCRIPTION

Assessor's Personal Property Key Number(s): 79-131-55605-02

Location of Real Property (street and number, city, state & ZIP code): 4775 Dale Drive, Lafayette, IN 47905

**\*\*ATTACH LEGAL DESCRIPTION & PLAT MAP WITH LOCATION\*\***

## SECTION 4

## NATURE OF REAL ESTATE IMPROVEMENTS

Describe any Real Property Improvements:

N/A

Size of facility to be constructed and /or renovated

Rehabilitation of existing structure(s), especially architecturally significant or historic structures

Demolition of architecturally significant or historic structure(s)

Estimated Investment \_\_\_\_\_

# Ludo Fact USA

## SECTION 5

## PERSONAL PROPERTY

Type of Project:

Research & Development \_\_\_\_\_

Machinery & Equipment \_\_\_\_\_ X

Logistics \_\_\_\_\_

Information Technology \_\_\_\_\_

Other \_\_\_\_\_ Please specify: \_\_\_\_\_

Estimated Investment \_\_\_\_\_ \$2,550,000

**\*\*ATTACH DEPRECIATION SCHEDULE\*\***

**\*APPLIES ONLY FOR THE CITY OF LAFAYETTE\***

Please note that all Personal Property tax abatements are subject to a Memorandum of Agreement that may require repayment of all or a portion of the tax savings realized in a designated ERA if it is terminated because the property is removed from the City of Lafayette by the applicant. Please contact the City of Lafayette Economic Department for details.

## SECTION 6

## EMPLOYMENT

How many do you employ today? \_\_\_\_\_ 41 (36 FT, 5 PT)

How many will you employ after the project is complete? \_\_\_\_\_ 73

How many jobs will be created? \_\_\_\_\_ 32 Full-time \_\_\_\_\_ Part-time

How many jobs are retained? \_\_\_\_\_ 36 Full-time \_\_\_\_\_ 5 Part-time

How many jobs will be eliminated? \_\_\_\_\_ 0 Full-time \_\_\_\_\_ 0 Part-time

Will any of the new positions be temporary or filled by contract employees Yes \_\_\_\_\_ No \_\_\_\_\_ X

If "Yes", describe the contract: \_\_\_\_\_

Will new employees be hired from the Tippecanoe region? Yes \_\_\_\_\_ X No \_\_\_\_\_

If any positions are to be eliminated, please explain the circumstances and if any of the employees from these positions will be eligible for the new positions.

How many additional employees are:

	Number	Hourly Average
Production	<u>23</u>	<u>15.9</u>
Administrative	<u>6</u>	<u>19</u>
Management	<u>1</u>	<u>32.25</u>
Professional/Technical		
Other (Sales)	<u>2</u>	<u>28.8</u>
Total/Average Wage		<u>17.8</u>

How many retained employees are:

	Number	Hourly Average
Production	<u>33 (29 FT)</u>	<u>13.75</u>
Administrative	<u>4</u>	<u>23.8</u>
Management	<u>2</u>	<u>57</u>
Professional/Technical		
Other	<u>2</u>	<u>25.25</u>
Total/Average Wage		<u>17.83</u>

What is the anticipated time frame for reaching full employment and the salary goals, per SB-1, from completion of improvement?

Year	1 yr	2 yrs	3 yrs	4 yrs	5 yrs	> 5
Employment (Add'l)	<u>15</u>	<u>17</u>				
Salary	<u>555,000</u>	<u>630</u>				

**\*\*IF GREATER THAN FIVE YEARS PROVIDE DETIALED TIMETABLE\*\***

# Ludo Fact USA

Does the company provide benefits to full time employees?		Yes	<u>  X  </u>	No	<u>          </u>
If "Yes", explain and list:					
Health Insurance	<u>  65%  </u>	% paid			
Life insurance	<u>  100  </u>	% paid	(\$10,000)		
Disability	<u>          </u>	% paid			
Childcare	<u>          </u>	% paid			
Vacation	<u>  12  </u>	min. # of days	(Paid time off)		
Retirement	<u>          </u>	% paid			
Other	<u>          </u>	% paid			

To be completed by GLC Staff.

Is the average wage at or above the Tiptecanoe County average?	Yes	<u>  ✓  </u>	No	<u>          </u>
--	-----	--------------	----	-------------------

**SECTION 7 IMPACTS & STATUS**

Please estimate the % of your products or services sold outside this 8-county economic region?	<u>  98  </u> %
--	-----------------

Does the applicant supply any local firms?	Yes	<u>          </u>	No	<u>  x  </u>
If yes, please list:				

Will any additional public utilities, city services or other infrastructure be required by this project?	Yes	<u>          </u>	No	<u>  x  </u>
If "Yes", explain: Will use more electrical and water.				

Will any environmental permits be needed?	Yes	<u>          </u>	No	<u>  x  </u>
If "Yes", explain:				

Current Zoning	<u>  I3  </u>			
Will any changes, special exceptions be required?	Yes	<u>          </u>	No	<u>  X  </u>
Have they been approved?	Yes	<u>          </u>	No	<u>  N/A  </u> <u>  X  </u>

Has the applicant or any predecessor of the applicant defaulted in any material respect the performance of financial obligations by the applicant?	Yes	<u>          </u>	No	<u>  X  </u>
--	-----	-------------------	----	--------------

Is there any pending litigation materially affecting the applicant?	Yes	<u>          </u>	No	<u>  X  </u>
If "Yes", please describe giving procedural posture of the case(s):				

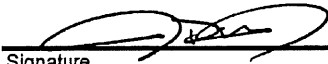


# Ludo Fact USA

Are there any restrictions contained in the applicant's Articles or Certificate of Incorporation, Charter, Bylaws, Code of Regulations or any agreements to which the applicant is a party that could affect the applicant's ability to engage in this project?	Yes	_____
	No	<u>    X    </u>
If "Yes", explain:		

**SECTION 8 AFFIRMATION OF TAX PAYMENTS**

I affirm that the applicant is current with all local, state, and federal tax obligations and understand that failure to have paid said taxes in a timely manner may render the applicant, during the course of this tax abatement, noncompliant and, therefore, ineligible for tax abatement.

 _____ Signature	<u>2 Feb 18</u> _____ Date
<u>John D. Huber</u> _____ Name Printed	<u>General Manager</u> _____ Title
<u>dutch@LudoFactusa.com</u> _____ E-mail	<u>765.588.9138</u> _____ Phone