

ORIGINAL

RESOLUTION NO. 2011-002

RESOLUTION APPROVING DEDUCTION FROM ASSESSED VALUE
OF NEW MANUFACTURING EQUIPMENT IN AN ALREADY DECLARED
ECONOMIC REVITALIZATION AREA
(Kendon Corporation a subsidiary of Bridgestone Americas Holding)

WHEREAS, the Indiana General Assembly has enacted a statute, I.C. 6-1.1-12.1 (the "Act"), authorizing certain deductions from the assessed value of new manufacturing equipment (as defined in the Act) for purposes of taxation of such equipment if installed during the period beginning March 1, 1983 and ending December 31, 2011, or such other date as extended by Indiana Code, in an area that is declared an economic revitalization area; and

WHEREAS, Kendon Corporation, a subsidiary of Bridgestone Americas Holding, will install new manufacturing equipment at its plant located at 3904 South Hoyt Avenue, Muncie, Indiana, 47302 during the above-described period; and

WHEREAS, by previously adopted resolutions, the Delaware County Council declared and affirmed that the area commonly described as 3904 South Hoyt Avenue, which is identified on the attached map and legal description (the "Area"), is an economic revitalization area, and authorizes deductions from assessed value of new manufacturing equipment, installed in the area for purposes of taxation; and

WHEREAS, as a condition of approval of the ensuing abatement, Kendon Corporation, a subsidiary of Bridgestone Americas Holding, agrees to update the County Council on a semi-annual basis with regard to the status of employment at the facility during the term of the life of the abatement.

NOW, THEREFORE, BE IT RESOLVED by the County Council of the County of Delaware in the State of Indiana:

1. The Delaware County Council finds and determines that the new manufacturing equipment to be installed in the above referenced area by Kendon Corporation, a subsidiary of Bridgestone Americas Holding, shall be allowed a deduction for five (5) years from the assessed value of such equipment, in accordance with the provisions of I.C. 6-1.1-12.1-4.5.

2. The Delaware County Auditor shall take such further actions as may be required to carry out the purposes of this Resolution and to insure the eligibility of the new manufacturing equipment for the deduction hereinabove described.

3. This Resolution shall be in full force and effect from and after its passage by the Delaware County Council and such publications as may be required by law.

| | Yeas | Nays | Abstained | Absent |
|--------------------------------------|------|------|-----------|--------|
| Mary Chambers <i>Mary Chambers</i> | — | — | — | — |
| Mike Jones <i>Mike Jones</i> | — | — | — | — |
| James King <i>James King</i> | — | — | — | — |
| Chris Matchett <i>Chris Matchett</i> | — | — | — | — |
| Kevin Nemyer <i>Kevin Nemyer</i> | — | — | — | — |
| Rick Spangler <i>Rick Spangler</i> | — | — | — | — |
| Ron Quakenbush | — | — | — | X |

Passed by the County Council of Delaware County, Indiana this 25 day of January 2011.

[Signature]
 James King, President County Council
 Delaware County, Indiana

ATTEST:

[Signature]
 Judy Rust, Auditor
 Delaware County, Indiana

This Resolution is approved in form by *[Signature]*
 Amanda Dunnuck
 Legal Counsel

APPLICATION FOR TAX ABATEMENT

New Manufacturing Equipment

This completed application, including a map identifying the general location of the facility, should be signed by the owner (or representative) of the new manufacturing equipment and submitted to:

**Delaware County Council
c/o Bruce Baldwin, Vision 2011
P.O. Box 842
Muncie, IN 47308-0842
PH: 765.288.6681
Please type or print.**

Date: 11/19/10 Name of Company: Kendon

Address of Property: 3904 S. Hoyt Avenue

Township: Center

Is legal description attached? Yes No

Property Owner (s): Bridgestone Americas Holding

Name Bridgestone Americas Holding

Address 535 Marriott Drive

Nashville, TN 37214

Owner's Representative:

Name Cara Fuller Telephone 563-262-1400

Address 2905 N. HWY. 61 Muscatine, IA 52761

Is property / facility served by adequate utilities?

Yes No

Are present utilities adequate for new equipment?

Yes No

If not, please explain:

Briefly describe the use of the new equipment and its purchase price: This computer controlled machining center and automatic palletizing machine will be used to produce precision steel mold segments for new tire presses. The cost to purchase and install this machining center is approximately \$750, 000.

Tax Assessment and Payment:

Amount of last business personal property assessment: \$ 815,220.00

Amount of last business personal property taxes: \$ 22,577.52

(Please attached a copy of your latest paid tax receipts to this form)

APPLICATION FOR NEW MANUFACTURING EQUIPMENT TAX ABATEMENT - PAGE 2

Total number of employees currently working for the company: 29

Number of Minorities: 2; Number of Females: 2; Number of Handicapped: 0

What percentage of employees are Delaware County Residents? 76 %

Number of new employees to be added as a result of abatement : 0 Actual (+-) jobs 0

Fringe Benefits: Health Insurance (Y or N) Y; % paid by employer: 60; % paid by employee: 40

Pension: (Y or N) N; % paid by employer: _____; % paid by employee: _____

Wage Package: Starting Wage: \$ 17.00; High Wage: \$ 23.88; Average Wage: \$ 19.42

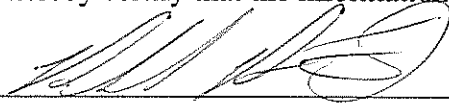
Job skill of new employees / entry level skill: Job skill of new employees / entry level skill:

- High school education.
- 3-5 years in a manufacturing environment.
- Prior CNC programming experience.
- Capable of reading blueprints for the products produced.
- Capable of reading the production schedule.
- Ability to learn new skills and apply them to increase efficiency and reduce production cycle time.
- Ability to work in a self directed team environment.
- Willing to contribute production and teaming skills wherever they are needed in the production process.
- Willing to follow work instructions and the quality plan.

Current average expected wage for jobs resulting from abatement (range): \$ 23.88

Number of jobs retained as a result of this project: 1

I hereby certify that the information and representations on this application are true and complete.

 TECHNICAL SUPPORT MANAGER 11/23/10
 Name Title Date

NOTICE: Your signature above indicates that you are aware that you must annually file both form *CF-1 (Compliance with Statement of Benefits)*, and *Form 322 ERA/PP (Application for Deduction from Assessed Valuation)* by the dates indicated on the forms in order to actually receive your tax deduction.

The amount of the deduction equals the product of the taxes on the newly installed manufacturing equipment multiplied by the following percentages:

| | |
|----------------------------|------|
| 1 st year | 100% |
| 2 nd year | 95% |
| 3 rd year | 80% |

| | |
|---|-----|
| 4 th year | 65% |
| 5 th year | 50% |
| 6 th year and thereafter | 0% |

To be eligible for the abatement, the equipment must be installed during the period beginning March 1, 1983 and ending December 31, 2011 or such other date as extended by Indiana code. The equipment must be used in the direct production, manufacture, fabrication, assembly, extraction, mining, processing, refining or finishing of other tangible personal property.

A non-refundable fee of one hundred fifty dollars (\$150.00) payable to the **Delaware County Treasurer** is required of applicants for filing of applications for designation of economic revitalization areas and for tax abatement in already approved areas.



**STATEMENT OF BENEFITS
PERSONAL PROPERTY**

State Form 51764 (R / 1-06)

Prescribed by the Department of Local Government Finance

FORM SB-1 / PP

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 statement must be submitted to the body designating the Economic Revitalization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitalization Area. Otherwise this statement must be submitted to the designating body **BEFORE** a person installs the new manufacturing equipment and/or research and development equipment, and/or logistical distribution equipment and/or information technology equipment for which the person wishes to claim a deduction. "Projects" planned or committed to after July 1, 1987, and areas designated after July 1, 1987, require a STATEMENT OF BENEFITS. (IC 6-1.1-12.1)
2. Approval of the designating body (City Council, Town Board, County Council, etc.) must be obtained prior to installation of the new manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment, **BEFORE** a deduction may be approved
3. To obtain a deduction, a person must file a certified deduction schedule with the person's personal property return on a certified deduction schedule (Form 103-ERA) with the township assessor of the township where the property is situated. The 103-ERA must be filed between March 1 and May 15 of the assessment year in which new manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment is installed and fully functional, unless a filing extension has been obtained. A person who obtains a filing extension must file the form between March 1 and the extended due date of that year.
4. Property owners whose Statement of Benefits was approved after June 30, 1991, must submit Form CF-1 / PP annually to show compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
5. The schedules established under IC 6-1.1-12.1-4.5(d) and (e) apply to equipment installed after March 1, 2001. For equipment installed prior to March 2, 2001, the schedules and statutes in effect at the time shall continue to apply. (IC 6-1.1-12.1-4.5(f) and (g))

| SECTION 1 | | TAXPAYER INFORMATION | | | | | | | |
|---|------------------------------|--|---|---|----------------------|---|----------------|--------------|----------------|
| Name of taxpayer KENDON | | | | | | | | | |
| Address of taxpayer (number and street, city, state, and ZIP code) 3904 S. HOYT AVENUE MUNCIE IN 47302 | | | | | | | | | |
| Name of contact person DICK ELIAS | | Telephone number 765-282-1515 | | | | | | | |
| SECTION 2 | | LOCATION AND DESCRIPTION OF PROPOSED PROJECT | | | | | | | |
| Name of designating body DELAWARE COUNTY COUNCIL | | Resolution number (s) | | | | | | | |
| Location of property 3904 S. HOYT AVENUE | County DELAWARE | DLGF taxing district number | | | | | | | |
| Description of manufacturing equipment and/or research and development equipment and/or logistical distribution equipment and/or information technology equipment. (use additional sheets if necessary) THIS SAXIS MACHINING CENTER WILL BE USED TO MANUFACTURE STEEL MOLD SEGMENTS FOR TRUCK AND BUS TIRE PRESSES | | ESTIMATED | | | | | | | |
| | | | START DATE | COMPLETION DATE | | | | | |
| | | Manufacturing Equipment | 1/2/11 | 2/15/11 | | | | | |
| | | R & D Equipment | | | | | | | |
| | | Logist Dist Equipment | | | | | | | |
| IT Equipment | | | | | | | | | |
| SECTION 3 | | ESTIMATE OF EMPLOYEES AND SALARIES AS RESULT OF PROPOSED PROJECT | | | | | | | |
| Current number 29 | Salaries 1,385,000 | Number retained 29 | Salaries 1,385,000 | Number additional 0 | Salaries - | | | | |
| SECTION 4 | | | | | | ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT | | | |
| NOTE: Pursuant to IC 6-1.1-12.1-5.1 (d) (2) the COST of the property is confidential. | | MANUFACTURING EQUIPMENT | | R & D EQUIPMENT | | LOGIST DIST EQUIPMENT | | IT EQUIPMENT | |
| | | COST | ASSESSED VALUE | COST | ASSESSED VALUE | COST | ASSESSED VALUE | COST | ASSESSED VALUE |
| | | Current values | 815,220 | | | | | | |
| | | Plus estimated values of proposed project | 750,000 | | | | | | |
| | | Less values of any property being replaced | | | | | | | |
| Net estimated values upon completion of project | | | | | | | | | |
| SECTION 5 | | | | | | WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER | | | |
| Estimated solid waste converted (pounds) 0 | | | Estimated hazardous waste converted (pounds) 0 | | | Other benefits: | | | |
| SECTION 6 | | TAXPAYER CERTIFICATION | | | | | | | |
| I hereby certify that the representations in this statement are true. | | | | | | | | | |
| Signature of authorized representative | | Title TECHNICAL SUPPORT MANAGER | | Date signed (month, day, year) 11/23/10 | | | | | |

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 _____.

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 |
| 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 \$ _____.

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

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

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

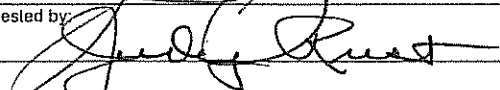
G. Other limitations or conditions (specify) _____

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 on or after July 1, 2000, is allowed for:

- | | |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> 1 year | <input type="checkbox"/> 6 years |
| <input type="checkbox"/> 2 years | <input type="checkbox"/> 7 years |
| <input type="checkbox"/> 3 years | <input type="checkbox"/> 8 years |
| <input type="checkbox"/> 4 years | <input type="checkbox"/> 9 years |
| <input type="checkbox"/> 5 years ** | <input type="checkbox"/> 10 years ** |

** For ERA's established prior to July 1, 2000, only a 5 or 10 year schedule may be deducted.

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: (signature and title of authorized member) | Telephone number | Date signed (month, day, year) 7/25/2011 |
| Attested by:  | Designated body | |

* If the designating body limits the time period during which an area is an economic revitalization area, it does not limit the length of time a taxpayer is entitled to receive a deduction to a number of years designated under IC 6-1.1-12.1-4.5

**EQUAL EMPLOYMENT
OPPORTUNITY STATEMENT**

The undersigned company agrees to comply with Executive Orders 11246 and 11478, and the rules, regulations and relevant orders of the Secretary of Labor. No segregated facilities will be maintained on said company's premises as required by Title VI of Civil Rights Act of 1964. Furthermore, the undersigned company attests to and agrees to the following policies regarding equal employment opportunity and affirmative action.

There will be no discrimination against any employee or applicant for employment because of race, religion, color, age sex, handicap, or national origin.

Affirmative action will be taken to ensure that applicants are employed and that employees are treated during employment without regard to their race, religion, color, age, sex, handicap, or national origin.

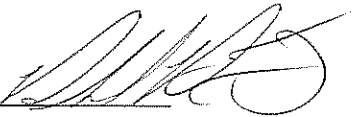
All qualified applicants will receive consideration for employment without regard to race, religion, color, age, sex, handicap, or national origin.

There will be no discrimination against any employee or applicant for employment because he or she is a disabled veteran or a veteran of the Vietnam Era in regard to any position for which the employee or applicant for employment is qualified.

Affirmative action will be taken to treat qualified disabled veterans and veterans of the Vietnam Era without discrimination based upon their disability or veteran status.

The company further agrees to post in conspicuous places, available to both employees and applicants for employment, notices to be provided setting forth the provisions of these nondiscriminating clauses and policies.

The previous policies will be adhered to in such employment practices as hiring, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.

RICHARD ELIAC 
Name/Title
TECHNICAL SUPPORT MANAGER

KENNON
Company Name

11/23/10
Date