

Application for Industrial Facilities Tax Exemption Certificate

Issued under authority of Public Act 198 of 1974, as amended. Filing is mandatory.

INSTRUCTIONS: File the completed application and the required attachments with the clerk of the local government unit. If you have any questions regarding the completion of this form, call 517-335-7491.

To be completed by Clerk of Local Government Unit	
Signature of Clerk	Date Received by Local Unit
STC Use Only	
Application Number	Date Received by STC

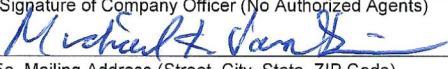
APPLICANT INFORMATION
All boxes must be completed.

▶ 1a. Company Name (Applicant must be the occupant/operator of the facility) Shyft Group USA		▶ 1b. Standard Industrial Classification (SIC) Code - Sec. 2(10) (4 or 6 Digit Code) 3361	
▶ 1c. Facility Address (City, State, ZIP Code) (real and/or personal property location) 11111 Mikesell Charlotte 48813		▶ 1d. City/Township/Village (indicate which) Charlotte	▶ 1e. County Eaton
▶ 2. Type of Approval Requested <input checked="" type="checkbox"/> New (Sec. 2(5)) <input type="checkbox"/> Transfer <input type="checkbox"/> Speculative Building (Sec. 3(8)) <input type="checkbox"/> Rehabilitation (Sec. 3(6)) <input type="checkbox"/> Research and Development (Sec. 2(10)) <input type="checkbox"/> Increase/Amendment		▶ 3a. School District where facility is located Charlotte	▶ 3b. School Code 23030
		4. Amount of years requested for exemption (1-12 Years) 12	
5. Per section 5, the application shall contain or be accompanied by a general description of the facility and a general description of the proposed use of the facility, the general nature and extent of the restoration, replacement, or construction to be undertaken, a descriptive list of the equipment that will be part of the facility. Attach additional page(s) if more room is needed. Shyft Group USA, will make a number of improvements to the Charlotte Campus and various upgrades and expansions to support the new Blue Arv EV Chassis Program. 11111 Mikesell or Plant 7 will receive paint and roof upgrades. A full listing of improvements at the facility is attached.			
6a. Cost of land and building improvements (excluding cost of land)		▶ <u>2,000,000</u>	
* Attach list of improvements and associated costs. * Also attach a copy of building permit if project has already begun.		Real Property Costs	
6b. Cost of machinery, equipment, furniture and fixtures		▶ <u>1,390,000</u>	
* Attach itemized listing with month, day and year of beginning of installation, plus total		Personal Property Costs	
6c. Total Project Costs		▶ <u>3,390,000</u>	
* Round Costs to Nearest Dollar		Total of Real & Personal Costs	
7. Indicate the time schedule for start and finish of construction and equipment installation. Projects must be completed within a two year period of the effective date of the certificate unless otherwise approved by the STC.			
	Begin Date (M/D/Y)	End Date (M/D/Y)	
Real Property Improvements	▶ <u>11/15/2022</u>	<u>06/01/2022</u>	▶ <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased
Personal Property Improvements	▶ <u>01/01/2022</u>	<u>08/01/2023</u>	▶ <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased
▶ 8. Are State Education Taxes reduced or abated by the Michigan Economic Development Corporation (MEDC)? If yes, applicant must attach a signed MEDC Letter of Commitment to receive this exemption. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
▶ 9. No. of existing jobs at this facility that will be retained as a result of this project. 348		▶ 10. No. of new jobs at this facility expected to create within 2 years of completion. 640	
11. Rehabilitation applications only: Complete a, b and c of this section. You must attach the assessor's statement of SEV for the entire plant rehabilitation district and obsolescence statement for property. The Taxable Value (TV) data below must be as of December 31 of the year prior to the rehabilitation.			
a. TV of Real Property (excluding land)		_____	
b. TV of Personal Property (excluding inventory)		_____	
c. Total TV		_____	
▶ 12a. Check the type of District the facility is located in: <input checked="" type="checkbox"/> Industrial Development District <input type="checkbox"/> Plant Rehabilitation District			
▶ 12b. Date district was established by local government unit (contact local unit)		▶ 12c. Is this application for a speculative building (Sec. 3(8))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

APPLICANT CERTIFICATION - complete all boxes.

The undersigned, authorized officer of the company making this application certifies that, to the best of his/her knowledge, no information contained herein or in the attachments hereto is false in any way and that all are truly descriptive of the industrial property for which this application is being submitted.

It is further certified that the undersigned is familiar with the provisions of P.A. 198 of 1974, as amended, being Sections 207.551 to 207.572, inclusive, of the Michigan Compiled Laws; and to the best of his/her knowledge and belief, (s)he has complied or will be able to comply with all of the requirements thereof which are prerequisite to the approval of the application by the local unit of government and the issuance of an Industrial Facilities Exemption Certificate by the State Tax Commission.

13a. Preparer Name Luke Bonner	13b. Telephone Number (734) 846-9746	13c. Fax Number	13d. E-mail Address Luke.Bonner@BonnerAG.
14a. Name of Contact Person Same As Above	14b. Telephone Number (734) 846-9746	14c. Fax Number	14d. E-mail Address Luke.Bonner@BonnerAG.
▶ 15a. Name of Company Officer (No Authorized Agents) Mike Vandieren - Mike.Vandieren@shyftgroup.com			
15b. Signature of Company Officer (No Authorized Agents) 		15c. Fax Number	15d. Date 10/25/2022
▶ 15e. Mailing Address (Street, City, State, ZIP Code) 41280 Bridge St, Novi, MI 48375		15f. Telephone Number (248) 320-2059	15g. E-mail Address Mike.Vandieren@shyftgrou

LOCAL GOVERNMENT ACTION & CERTIFICATION - complete all boxes.

This section must be completed by the clerk of the local governing unit before submitting application to the State Tax Commission. Check items on file at the Local Unit and those included with the submittal.

▶ 16. Action taken by local government unit <input type="checkbox"/> Abatement Approved for _____ Yrs Real (1-12), _____ Yrs Pers (1-12) After Completion <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Denied (Include Resolution Denying)		16b. The State Tax Commission Requires the following documents be filed for an administratively complete application: Check or Indicate N/A if Not Applicable <input type="checkbox"/> 1. Original Application plus attachments, and one complete copy <input type="checkbox"/> 2. Resolution establishing district <input type="checkbox"/> 3. Resolution approving/denying application. <input type="checkbox"/> 4. Letter of Agreement (Signed by local unit and applicant) <input type="checkbox"/> 5. Affidavit of Fees (Signed by local unit and applicant) <input type="checkbox"/> 6. Building Permit for real improvements if project has already begun <input type="checkbox"/> 7. Equipment List with dates of beginning of installation <input type="checkbox"/> 8. Form 3222 (if applicable) <input type="checkbox"/> 9. Speculative building resolution and affidavits (if applicable)	
16a. Documents Required to be on file with the Local Unit Check or Indicate N/A if Not Applicable <input type="checkbox"/> 1. Notice to the public prior to hearing establishing a district. <input type="checkbox"/> 2. Notice to taxing authorities of opportunity for a hearing. <input type="checkbox"/> 3. List of taxing authorities notified for district and application action. <input type="checkbox"/> 4. Lease Agreement showing applicants tax liability.			
16c. School Code			
17. Name of Local Government Body		▶ 18. Date of Resolution Approving/Denying this Application	

Attached hereto is an original application and all documents listed in 16b. I also certify that all documents listed in 16a are on file at the local unit for inspection at any time, and that any leases show sufficient tax liability.

19a. Signature of Clerk	19b. Name of Clerk	19c. E-mail Address
19d. Clerk's Mailing Address (Street, City, State, ZIP Code)		
19e. Telephone Number	19f. Fax Number	

State Tax Commission Rule Number 57: Complete applications approved by the local unit and received by the State Tax Commission by October 31 each year will be acted upon by December 31. Applications received after October 31 may be acted upon in the following year.

For faster service, email the completed application and additional required documentation to PTE@michigan.gov.

An additional submission option is to mail the completed application and required documents to:

Michigan Department of Treasury
State Tax Commission
PO Box 30471
Lansing, MI 48909

STC USE ONLY				
▶ LUCI Code	▶ Begin Date Real	▶ Begin Date Personal	▶ End Date Real	▶ End Date Personal

IFEC Application Affidavit of Fees

APPLICANT NAME: Shyft Group USA
PROPERTY ADDRESS: 41280 Bridge St, Novi, MI 48375

CERTIFICATION

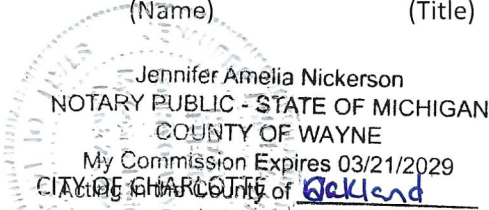
In accordance with State Tax Commission Bulletin No. 3 dated January 1998, the City of Charlotte and the applicant referenced above do hereby swear and affirm that this applicant has not made, or promised to make payment of any kind to the City of Charlotte as a condition to the approval of this Application for an Industrial Facilities Tax Exemption (IFT) Certificate. Whether payments be referred to as "fees," "payments in lieu of taxes," "donations," or by other like terms, such payments are contrary to the legislative intent of Act 198, as amended. We do hereby swear and affirm by our signatures below that "no payment of any kind in excess of the fee allowed, as amended by Public Act 323 of 1996, has been made or promised in exchange for favorable consideration of this Application for an IFEC."

IFT APPLICANT

PRINT NAME: Mike Vandieren – Shyft Group USA
TITLE: Vice President of Corporate and Business Development
SIGNATURE: Michael P. Vandieren
DATE: 10/21/2022

The forgoing certification was acknowledged this 21st day of October 2022

By Michael Vandieren, VP of Corporate and Business Development on behalf of Shyft Group USA
(Name) (Title) (Company Name)



Jennifer Amelia Nickerson
Notary Public, Wayne County, MI

PRINT NAME: Mary LaRocque
TITLE: City Clerk
SIGNATURE: _____
DATE: _____

The forgoing certification was acknowledged this ____ day of _____

By _____ on behalf of _____
(Name) (Title) (Company Name)

Notary Public, _____ County, MI

Shyft Group Charlotte Campus EV Investment (Blue Arc EV Delivery Vehicle & Isuzu)

<u>11111 Mikesell</u>	<u>Investment</u>	<u>Activity</u>	<u>Start Date</u>	<u>End Date</u>
Plant 7				
Real	\$500,000	Paint, Decal, Options, etc.	1/1/2023	6/1/2023
Personal	\$140,000	Subassembly build	1/1/2023	6/1/2023
Real	\$1,500,000	Roof upgrade	11/15/2022	12/31/2022
Personal	\$1,250,000	DVT (dyno) system	6/1/2023	8/1/2023
	subtotal			
	\$3,390,000			