

**APPLICATION FORM FOR TAX REDUCTION
BUILDING REMODEL, EXPANSION OR RECONSTRUCTION**

(As allowed under Yellowstone County Resolution 02-66, City Council Resolutions 05-18377 and 05-18378 and 15-24-1501, 15-24-1502 or 15-24-1601 MCA)

1. Name of business: FKCD, LLP / 360 Office Solutions, Inc

2. Building Remodel or Reconstruction: Start of construction (date) 8/2013
End of construction (date) 11/2013

3. Building Expansion: Start of construction (date) _____
End of construction (date) _____

4. Address of business: 3723 Pierce Parkway, Billings, MT
Actual location of business: 3723 Pierce Parkway, Billings, MT
Tax Code: C13943
Within city limits of Billings YES NO

5. Person representing business and responsible for application:
Name: Craig Bartholomew Title: Managing Partner
Address: 3723 Pierce Parkway Telephone: 406-869-0425

6. Amount of capital investment for Expansion, Remodel or Reconstruction in Billings / Yellowstone County: \$ 836,549 (attach detailed costs of materials and labor and dates of construction. County Commissioners and/or City Council may request further information, such as financial statements, business references, or other documents prior to acting on this request).

7. Approximate market value of building prior to remodel, reconstruction, or expansion:
\$ 3,089,000

8. Explain business activity – what business does: We sell office products, office furniture, and business machines (copiers and printers).

9. How long has this business been located in Billings and/or Yellowstone County?
Since 1946 (Started as Reporter Printing)

10. As of the date of this application, how many employees does the business have:
82 Full-time 2 Part-time

11. How many employees will the applicant have within 2 years after completion of construction:
112-120 Full-time 2 Part-time

12. Describe job skills required for all new employees both full and part-time: _____

We will need employees with sales skills (selling of office products, furniture, machines), furniture installation, delivery drivers and machine techs, warehouse employees and furniture layout designers, and two management level and an IT person.

13. What is the hourly pay scale of both full and part-time employees to include benefits (new employees only): Salary range is \$24,000 – \$75,000 depending on the position.

14. Other Economic impacts of capital investment: Taking a vacant building and placing a large scale, successful operation within the building that has been a part of the community for many years.

15. Planned hiring schedule: Periodically over the next 2 years.

16. List other property tax benefits business currently receives or has applied for: None.

17. Building permit (attach copy or explain absence): _____

18. A non-refundable fee of \$500 must accompany this application to cover the cost of application administration. Make checks payable to the Big Sky Economic Development Authority.

19. All items on this application must be addressed. Upon completion and accompanied by the application fee, the original can be submitted to the Big Sky Economic Development Authority, 222 N. 32nd Street, Suite 200, Billings, Montana 59101 (telephone 256-6871). If the application is complete, a duly advertised public hearing will be scheduled, after which the Commissioners and/or City Council, in their discretion, will decide whether to approve or deny the application. The applicant, or a representative of the applicant, must appear in person at the public hearings.

20. The application to the Department of Revenue, which is part of this application, must also be completed and signed by the applicant.

21. The Board of County Commissioners and/or City Council may review this applicant's tax incentive program at any time and terminate further reductions at their discretion if they find the provisions of Resolution are not being met.

22. If application is approved, applicant will comply with the following provisions. Failure to comply may lead to the previously approved tax abatement being rescinded:

- i. Provide copy of Occupancy Certificate and/or Certificate of Substantial Completion
- ii. Annual Survey to be completed and returned to Big Sky EDA by June 30 of each year
- iii. Remain current on all property taxes on the subject property
- iv. Notify Big Sky EDA of any ownership changes or change of use of the facility
- v. Comply with any other provisions set by the Board of County Commissioners and/or City Council

23. In order for this incentive program to apply to the applicant's current year taxes, Yellowstone County must receive the properly completed application by March of the year in which the reduction is desired. If within the city of Billings, City Council must approve the application by March of the year in which the reduction is desired.

24. Signature of applicant/representative: _____
25. Date of application: _____
26. County Commissioner's Public hearing held (date): _____
27. City Council's Public hearing held (date): _____

Recommendation by the Big Sky Economic Development Authority:

___ Approve ___ Deny Signature: _____ Date: _____

County Board of Planning or Laurel-Yellowstone City-County Planning Board certifies that business conforms to zoning regulations: *Allowed use in*

Enterprise Light Industrial Zoning Signature: *[Signature]* Date: *2/28/14*

If a non-public water or sewer system is used (i.e., septic tank and water well) County Health Department certifies that system conforms to acceptable standard, or will do so on completion of construction:

Signature: _____ Date: _____

County Treasurer's Office certifies that City and County taxes have been paid in full or otherwise satisfied:

Signature: _____ Date: _____

City Finance office certifies that the business has applied for the appropriate City business license:

Signature: _____ Date: _____

Action by Board of County Commissioners:

Date: _____

___ Approve ___ Deny Chair: _____ Date: _____

Member: _____ Date: _____

Member: _____ Date: _____

Action by Billings City Council (if applicable – project within City limits):

___ Approve ___ Deny

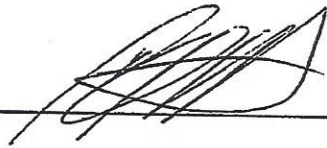
Date: _____

CITY OF BILLINGS

By: _____

ATTEST:

By: _____

24. Signature of applicant/representative: 
25. Date of application: _____
26. County Commissioner's Public hearing held (date): _____
27. City Council's Public hearing held (date): _____

Recommendation by the Big Sky Economic Development Authority:

Approve Deny Signature: _____ Date: _____

County Board of Planning or Laurel-Yellowstone City-County Planning Board certifies that business conforms to zoning regulations:

Signature: _____ Date: _____

If a non-public water or sewer system is used (i.e., septic tank and water well) County Health Department certifies that system conforms to acceptable standard, or will do so on completion of construction:

Signature: _____ Date: _____

County Treasurer's Office certifies that City and County taxes have been paid in full or otherwise satisfied:

Signature:  Date: 2/27/14

City Finance office certifies that the business has applied for the appropriate City business license:

Signature: _____ Date: _____

Action by Board of County Commissioners:

Date: _____

Approve Deny Chair: _____ Date: _____

Member: _____ Date: _____

Member: _____ Date: _____

Action by Billings City Council (if applicable – project within City limits):

Approve Deny

Date: _____

CITY OF BILLINGS

By: _____

ATTEST:

By: _____

APPLICATION TO THE DEPARTMENT OF REVENUE
BUILDING REMODEL, RECONSTRUCTION OR EXPANSION
(Title 15- Chapter 24 – Part 14 MCA)

To: Assessor
Yellowstone County

Name of Applicant: FKCD, LLP

Mailing Address: PO Box 30598, Billings, MT 59107-0598

Legal description of affected property: William D Pierce Subd, S23, T01 S, R25 E, Block 1, Lot 4B1

Date construction permit issued: _____
(If no permit is required, specify the date when certificate in lieu of building permit was issued).
This application covers the (expansion/new) construction of the _____ plant.
A public hearing on this matter of Building Expansion, Remodel, or Reconstruction was held at the
Yellowstone County Courthouse at _____ (am/pm) on the _____ day of _____, 20____.
Due notice as defined in 76-15-103 was given. True and exact copies of said notices are attached to this
application. _____ Yes _____ No

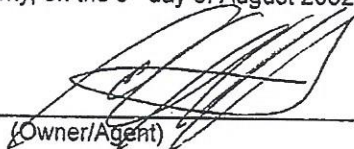
The statutory \$500,000 investment requirement for expansion or modernization has been met.
_____ Yes _____ No

The statutory 2.5% increase in value requirement for new improvements has been met.
_____ Yes _____ No

The statutory 5% increase in value requirement for new improvements has been met.
_____ Yes _____ No

The qualifying property consists of the following: See attached contractor bid and equipment quotes
(Attach site plats, construction prints, and detailed equipment list identifying the qualifying property.)

This application is made under the provisions of 15-24-1501 or 1601 MCA, and by resolution adopted by
the Commissioners of Yellowstone County, on the 9th day of August 2002. A copy of the same is
attached.



(Owner/Agent)

~~~~~

We, the undersigned, Commissioners of Yellowstone County, (approve/disapprove) this application for \_\_\_\_\_  
\_\_\_\_\_ We find that it (does/does not) conform to the criteria  
as set forth in the resolution adopted by this Board on the 9<sup>th</sup> day of August 2002.

|               |                |
|---------------|----------------|
| _____<br>Name | _____<br>Title |
| _____<br>Name | _____<br>Title |
| _____<br>Name | _____<br>Title |