



**RESOLUTION TO APPROVE A COMMERCIAL REHABILITATION
EXEMPTION CERTIFICATE APPLICATION, PA 210 OF 2005, AS
AMENDED, HASLETT VILLAGE SQUARE COMMERCIAL
REHABILITATION DISTRICT NO. 1**

Minutes of a regular meeting of the Township Board of the Meridian Charter Township, held on March 7, 2023 Meridian Township Hall in Township Hall Room at 6:00 pm.

PRESENT: Supervisor Jackson, Clerk Guthrie, Treasurer Deschaine, Trustees Hendrickson, Sundland, Wilson, and Wisinski

ABSENT: None

The following preamble and resolution were offered by Trustee Wisinski, and supported by

**Approving Commercial Rehabilitation Exemption Certificate Application for SP
Holding Company, LLC, Located at 1655 and 1621 Haslett Road**

WHEREAS, Meridian Charter Township legally established the HASLETT VILLAGE SQUARE COMMERCIAL REHABILITATION DISTRICT NO. 1 on June 7, 2022, after a public hearing held on June 7, 2022; and

WHEREAS, the taxable value of the property proposed to be exempt plus the aggregate taxable value of property previously exempt and currently in force under Public Act 210 of 2005 or under Public Act 198 of 1974 (IFT's) does not exceed 5% of the total taxable value of Meridian Charter Township; and

WHEREAS, the application was approved at a public hearing as provided by section 4(2) of Public Act 210 of 2005 on February 21, 2023; and

WHEREAS, the applicant SP Holding Company, LLC is not delinquent in any taxes related to the facility; and

WHEREAS, the application was approved for 10 years and no additional opportunities for extending the exemption; and

WHEREAS, the application is for commercial property as defined in section 2(a) of Public Act 210 of 2005; and

WHEREAS, the applicant SP Holding Company, LLC has provided answers to all required questions under the application instructions to Meridian Charter Township; and

WHEREAS, the Meridian Charter Township requires that rehabilitation of the facility shall be completed by 2028; and

WHEREAS, the commencement of the rehabilitation of the facility did not occur more than six months prior to the filing of the application for exemption; and

WHEREAS, the application relates to a rehabilitation program that when completed constitutes a qualified facility within the meaning of Public Act 210 of 2005 and that is situated within a Commercial Rehabilitation District established under Public Act 210 of 2005; and

WHEREAS, completion of the qualified facility is calculated to, and will at the time of issuance of the certificate, have the reasonable likelihood to, increase commercial activity, create employment, retain employment, prevent a loss of employment, revitalize urban areas, and increase the number of residents in the community in which the facility is situated; and

WHEREAS, the rehabilitation includes improvements aggregating 10% or more of the true cash value of the property at commencement of the rehabilitation as provided by section 2(j) of Public Act 210 of 2005.

NOW, THEREFORE, BE IT RESOLVED by the Township Board of Meridian Charter Township

Be and hereby is granted a Commercial Rehabilitation Exemption for the real property, excluding land, located in Commercial Rehabilitation District, Haslett Village Square Commercial Rehabilitation District No. 1 at 1655 and 1621 Haslett Road, Haslett, MI 48840, for a period of 10 years, beginning December 31, 2023, and ending December 30, 2033 pursuant to The provisions of PA 210 of 2005, as amended.

AYES: Treasurer Deschaine, Trustees Hendrickson, Sundland, Wilson, and Wisinski, Supervisor Jackson, Clerk Guthrie

NAYS: NONE

RESOLUTION DECLARED ADOPTED.



Deborah Guthrie
Township Clerk

I hereby certify that the foregoing constitutes a true and complete copy of a resolution adopted by the Township Board of the Meridian Charter Township, County of Ingham, Michigan at a regular meeting held on March 7, 2023

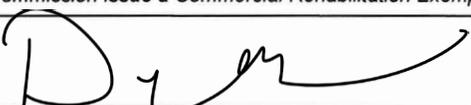
Application for Commercial Rehabilitation Exemption Certificate

Issued under authority of Public Act 210 of 2005, as amended.

LOCAL GOVERNMENT UNIT USE ONLY	
▶ Application No.	▶ Date Received
STATE USE ONLY	
▶ Application No.	▶ Date Received

Read the instructions page before completing the form. **This application should be filed after the commercial rehabilitation district is established.** The applicant must complete Parts 1, 2 and 3 and file the application form (with required attachments) with the clerk of the local governmental unit (LGU). Attach the legal description of property on a separate sheet. This project will not receive tax benefits until approved by the State Tax Commission (STC). Applications received after October 31 may not be acted upon in the current year. This application is subject to audit by the STC.

PART 1: OWNER / APPLICANT INFORMATION (applicant must complete all fields)			
Applicant (Company) Name (applicant must be the owner of the facility) SP Holdings, LLC			NAICS or SIC Code
Facility's Street Address 1621 & 1655 Haslett Road	City Haslett (Meridian Twp.)	State MI	ZIP Code 48840
Name of City, Township or Village (taxing authority) Meridian Charter Township	County Ingham	School District Where Facility is Located Haslett (33060)	
<input type="checkbox"/> City <input checked="" type="checkbox"/> Township <input type="checkbox"/> Village			
Date of Rehabilitation Commencement (mm/dd/yyyy) 03/01/2023	Planned Date of Rehabilitation Completion (mm/dd/yyyy) 12/31/2028		
Estimated Cost of Rehabilitation \$60,000,000	Number of Years Exemption Requested (1-10) 10		
Expected Project Outcomes (check all that apply)			
<input checked="" type="checkbox"/> Increase Commercial Activity	<input type="checkbox"/> Retain Employment	<input checked="" type="checkbox"/> Revitalize Urban Areas	
<input checked="" type="checkbox"/> Create Employment	<input type="checkbox"/> Prevent Loss of Employment	<input checked="" type="checkbox"/> Increase Number of Residents in Facility's Community	
No. of jobs to be created due to facility's rehabilitation 38	No. of jobs to be retained due to facility's rehabilitation 0	No. of construction jobs to be created during rehabilitation 175	
PART 2: APPLICATION DOCUMENTS			
Prepare and attach the following items:			
<input checked="" type="checkbox"/> General description of the facility (year built, original use, most recent use, number of stories, square footage)	<input checked="" type="checkbox"/> Statement of the economic advantages expected from the exemption		
<input checked="" type="checkbox"/> Description of the qualified facility's proposed use	<input checked="" type="checkbox"/> Legal description		
<input checked="" type="checkbox"/> Description of the general nature and extent of the rehabilitation to be undertaken	<input type="checkbox"/> Description of the "underserved area" (Qualified Retail Food Establishments only)		
<input checked="" type="checkbox"/> Descriptive list of the fixed building equipment that will be a part of the qualified facility	<input type="checkbox"/> Commercial Rehabilitation Exemption Certificate for Qualified Retail Food Establishments (Form 4753) (Qualified Retail Food Establishments only)		
<input checked="" type="checkbox"/> Time schedule for undertaking and completing the facility's rehabilitation			
PART 3: APPLICANT CERTIFICATION			
Name of Authorized Company Officer (no authorized agents) Chad Koster	Telephone Number (616) 437-7202		
Fax Number	E-mail Address CHAD.KOSTER@PARAMOUNTRP.COM		
Street Address 940 Floral Ave SE	City Grand Rapids	State MI	ZIP Code 49506
I certify that, to the best of my knowledge, the information contained herein and in the attachments is truly descriptive of the property for which this application is being submitted. Further, I am familiar with the provisions of Public Act 210 of 2005, as amended, and to the best of my knowledge the company 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 governmental unit and the issuance of a Commercial Rehabilitation Exemption Certificate by the State Tax Commission.			
I further certify that this rehabilitation program, when completed, will constitute a rehabilitated facility, as defined by Public Act 210 of 2005, as amended, and that the rehabilitation of this facility would not have been undertaken without my receipt of the exemption certificate.			
Signature of Authorized Company Officer (no authorized agents) 	Title MEMBER	Date 2/2/2023	

PART 4: ASSESSOR RECOMMENDATIONS (assessor of LGU must complete Part 4)			
Provide the Taxable Value and State Equalized Value of Commercial Property, as provided in Public Act 210 of 2005, as amended, for the tax year immediately preceding the effective date of the certificate (December 31 of the year approved by the STC).			
	Taxable Value	State Equalized Value (SEV)	
Land	\$325,800		
Building(s)	\$627,755		
<p>The property to be covered by this exemption may not be included on any other specific tax roll while receiving the Commercial Rehabilitation Exemption. For example, property on the Eligible Tax Reverted Property (Land Bank) specific tax roll cannot be granted a Commercial Rehabilitation Exemption that would also put the same property on the Commercial Rehabilitation specific tax roll.</p> <p><input checked="" type="checkbox"/> By checking this box I certify that, if approved, the property to be covered by this exemption will be on the Commercial Rehabilitation Exemption specific tax roll and not on any other specific tax roll.</p>			
Name of Local Government Body Meridian Charter Township			
Name of Assessor (first and last name) Ashley Winstead		Telephone Number (517) 853-4404	
Fax Number		E-mail Address winstead@meridian.mi.us	
<i>I certify that, to the best of my knowledge, the information contained in Part 4 of this application is complete and accurate.</i>			
Assessor's Signature			Date
PART 5: LOCAL GOVERNMENT ACTION (clerk of LGU must complete Part 5)			
Action Taken By LGU (attach a certified copy of the resolution):			
<input type="checkbox"/> Exemption approved for _____ years, ending December 30, _____ (not to exceed 10 years)			
<input type="checkbox"/> Exemption Denied			
Date District Established (attach resolution for district)	Local Unit Classification Identification (LUCI) Code	School Code	
PART 6: LOCAL GOVERNMENT CLERK CERTIFICATION (clerk of LGU must complete Part 6)			
Clerk's Name (first and last) Deborah Guthrie		Telephone Number (517) 853-4324	
Fax Number		E-mail Address guthrie@meridian.mi.us	
Mailing Address 5151 Marsh Road	City Okemos	State MI	ZIP Code 48864
LGU Contact Person for Additional Information Amber Clark	LGU Contact Person Telephone Number (517) 853-4568	Fax Number	
<i>I certify that, to the best of my knowledge, the information contained in this application and attachments is complete and accurate and hereby request the State Tax Commission issue a Commercial Rehabilitation Exemption Certificate, as provided by Public Act 210 of 2005, as amended.</i>			
Clerk's Signature 			Date March, 8 2023

For faster service, the LGU should email the completed application and required documents 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
 P.O. Box 30471
 Lansing, MI 48909