

**COUNCIL ACTION FORM**

**SUBJECT: ENDORSEMENT OF IOWA ECONOMIC DEVELOPMENT AUTHORITY APPLICATION FOR FINANCIAL ASSISTANCE FOR BERDEX, USA WITH LOCAL MATCH IN THE FORM OF A GRANT**

**BACKGROUND:**

Berdex, USA is the North American branch of a Netherlands-based company that designs and manufactures trailers for livestock transport. The company has been in business since 1947 and is a leader in the biosecure transport of livestock. This project would bring the manufacturing of Berdex trailers to the former Caremoli site in Ames.

The project will include leasing 18,000 square feet of space at the former Caremoli facility to setup and begin manufacturing three types of livestock trailers. Ames will also be the Berdex, USA headquarters. Investment for the project is expected to be \$1.895 million. Local funding in the form of a \$11,420 grant funded half by the City of Ames and half by the Ames Economic Development Commission (AEDC) will provide a local match for \$57,100 in tax incentives from the State of Iowa. The project is expected to add 16 manufacturing and 4 administrative jobs with benefits and pay rates starting at just over 100% of the Story County median laborshed rate and expected to exceed 130% after 36 months.

IEDA will review the Berdex application for assistance at its February 18, 2022, meeting. The local match from the City will be contingent upon approval of the final agreement by the City Council. For the IEDA to continue consideration of this project, the City Council must adopt a resolution supporting the submittal of the Berdex, USA application for IEDA assistance. Terms of the grant agreement will be determined after the IEDA award.

**If Council supports the application for assistance, the local match for the project will be a \$11,420 grant loan to be funded with \$5,710 from the City of Ames (from the available balance in the Economic Development Fund) and \$5,710 from the AEDC. The AEDC Executive Board approved their funding of the required local match at a meeting on Friday, February 4, 2022.**

**ALTERNATIVES:**

1. Adopt a resolution supporting the submittal of the application from Berdex, USA requesting economic development assistance from IEDA with local match to be provided in the form of a grant in the amount of \$11,420; \$5,710 from the City of Ames from available balance in the Economic Development Fund and \$5,710 from the AEDC.
2. Do not adopt a resolution of support for Berdex USA's application.

**CITY MANAGER'S RECOMMENDED ACTION:**

Berdex, USA is an established company and leader in the design in manufacture of livestock transport trailers and has selected Ames as the location to invest capital and establish operations in North America, providing high paying jobs without the cost of additional City infrastructure. In keeping with the Council's goal to promote economic development, this project will expand the number of quality jobs within our city.

In addition, an analysis of their proposal utilizing the evaluation matrix for industrial and manufacturing companies indicates that they would qualify for the City's "best terms" within 36 months of establishing operations. This high score is influenced by good wage rates, number of jobs, and no requirement for investment in City infrastructure.

Therefore, it is the recommendation of the City Manager that the City Council adopt Alternative #1, as described above.



Debi V. Durham, Executive Director  
Iowa Economic Development Authority

# **Business Financial Assistance Application**

Business Finance - Business Development Division  
Iowa Economic Development Authority  
1963 Bell Avenue, Suite 200  
Des Moines, IA 50315  
[iowaeda.com](http://iowaeda.com)  
Email: [businessfinance@iowaeda.com](mailto:businessfinance@iowaeda.com)

## **Application Instructions**

**To Complete Electronic Form:** Click on TEXT BOX to add text. Double click on YES/NO boxes and select "Checked".

1. All applicants must complete the Business Financial Assistance Application, and attach only those additional sections for the components to which the applicant is applying.

<b>STATE of IOWA – Financial Assistance Program</b>
High Quality Jobs Program (HQJ)
<input checked="" type="checkbox"/> Tax Credits
<input type="checkbox"/> Direct Financial Assistance

2. Before filling out this application form, please read all applicable sections of the Iowa Code and Iowa Administrative Code (rules). <https://www.legis.iowa.gov/law/administrativeRules>
3. Only typed or computer-generated applications will be accepted and reviewed. Any material changes to the format, questions or wording of questions presented in this application will render the application invalid, and it will not be accepted.
4. Complete the applicable sections of the application fully. If questions are left unanswered or required attachments not submitted, an explanation must be included.
5. Use clear and concise language. Attachments should only be used when requested or as supporting documentation.
6. Any inaccurate information of a significant nature may disqualify the application from consideration.
7. The following must be submitted to Business Finance at Iowa Economic Development Authority (IEDA) to initiate the review process:
  - One signed application form and all required attachments submitted electronically to the project manager.

***Facsimile copies will not be accepted.***

Applications must be submitted to IEDA Business Finance before 4:00 p.m. on the fourth Monday of the month.

Applications will be reviewed by the IEDA Board on the third Friday of the following month.

## Public Records Policies

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During the application process, the information submitted to IEDA is exempt from disclosure under the “industrial prospects” exemption found in Section 22.7(8). However, once an award is received, the industrial prospects exemption no longer applies and *all documents submitted and generated during the application and negotiation process become public records* under Iowa’s Open Records Law ([Iowa Code, Chapter 22](#)), unless:

- 1) The information belongs to one of the classes of records automatically treated as confidential; or
- 2) You have applied for and received written notice that the information will be treated as confidential.

### Automatically Confidential Records

IEDA automatically treats the following records as confidential and will withhold them from public inspection even without a request for confidential treatment:

- Tax Records and Tax Liability Information
- *Quarterly Iowa Employer’s Contribution and Payroll Report* prepared for the Iowa Workforce Development Department
- Payroll Registers
- Business Financial Statements and Projections (unless those statements are already publicly available elsewhere, e.g., 10-K filings)
- Personal Financial Statements

### Exemptions to the Open Records Law

To have additional information treated as confidential, you must fill out the confidential treatment request form. This form is available by request. Under the Open Records Law, IEDA may lawfully treat certain information as confidential if that information falls within an exemption to the Open Records Law. The following exemptions represent records which may lawfully be treated as confidential under the Open Records law and which are most often applicable to the information submitted to IEDA:

- Release of information would give an unfair advantage to competitors – Iowa Code Sec. 15.118
- Trade secrets – See Iowa Code section 22.7(3), see also Iowa Code Ch. 550
- Information on an industrial prospect with which the IEDA is currently negotiating – See Iowa Code section 22.7(8)
- Communications not required by law, rule or regulation made to IEDA by persons outside the government to the extent that IEDA could reasonably believe that those persons would be discouraged from making them to IEDA if they were made available for general public examination – Iowa Code section 22.7(18)

### Non-Confidential Information

Information submitted to IEDA as part of the application process or that is contained in a contract for program benefits is generally considered material to the eligibility requirements of the program or to the amount of incentives or assistance to be provided. Such information is generally not given confidential treatment. Such information includes, but is not limited to, the number and type of jobs incented, the wage levels for the incented jobs, the company’s employee benefit information and the project budget.

**Additional Information Available.** Copies of [Iowa’s Open Record law](#) and IEDA’s [administrative rules](#) relating to public records are available from the IEDA upon request.

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**SECTION A**

**Applicant Information**

**Date Application Submitted:** 1/24/21

1. **Name of Business:** Berdex USA
2. **Entity Name(s) for contracting** (please include all that are involved in proposed project): **Brookstone Specialty Services, Inc**
3. **Address:** 225 Bell Ave
4. **City, State and Zip Code:** Ames, IA 50010
5. **Contact Person:** Tom Barragy **Title:** General Manager
6. **Phone:** 515.669.7586 **Fax:** **Email:** tbarragy@brookstonespecialty.com
7. **FEIN:** 35-2738296
8. **Please indicate your tax period end date:** December 31<sup>st</sup>, 2022
9. **NAICS Code for primary business operations:** 333111
10. **US DOT Number:** N/A
  
11. **Does the Business file a consolidated tax return under a different tax ID number?**  
 Yes (If yes, please also provide the tax ID number)  No
- a. **Is the contact person listed above authorized to obligate the Business?**  
 Yes  No If no, please provide the name and title of a company officer authorized to obligate the Business:
  
12. **If the application was prepared by someone other than the contact person listed above, please complete the following:**  
Name of Business: Ames Economic Development Commission  
Address: 304 Main Street  
City, State and Zip Code: Ames, Iowa 50010  
Contact Person: Brenda S. Dryer Title: Senior Vice President  
Phone: 515.232.2319 Email: brenda@ameschamber.com

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**Sponsor Information** (A sponsor organization is a city or county)

13. **Sponsor Organization:** City of Ames
14. **Official Contact (e.g. Mayor, Chairperson, etc.):** John Haila **Title:** Mayor
15. **Address:** 515 Clark Ave.
16. **City, State & Zip Code:** Ames, Iowa 50010
17. **Phone:** 515.239.5101 **Email:** john.haila@cityofames.org
  
18. **If IEDA needs to contact the sponsor organization with questions, should we contact the person listed above?**  
 Yes  No, please contact the following person:  
  
Name: Duane Pitcher Title: Financial Officer  
Address: 515 Clark Ave  
City, State and Zip Code: Ames, Iowa 50010  
Phone: 515.239.5101 Email: dpitcher@city.ames.ia.us

If necessary, please list information on additional sponsors in an attachment.

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**SECTION B**

**Business Information**

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1. **Provide a brief description and history of the Business. Include information about the Business' products or services and its markets and/or customers.**

Although new to the United States, Berdex has been developing and producing chassis and bodywork for national and international transport since 1947.

Tested and proven over years, Berdex trailers comply with the most stringent health, safety and quality requirements. Berdex continues to develop their products using the latest materials and solutions to ensure that their products perform as promised, keep pace with biosecurity measures, and put animal well-being top of mind.

The Berdex factory is located in the Netherlands, in the heart of the region with the highest density of pigs. Their partnerships within their industry – many of which go back years – and the pioneer mentality in the Peel region have contributed directly to the success of their solutions. This has made Berdex into one of Europe's leading manufacturer in the field of livestock transport. Insights and solutions from the demanding world of livestock transport are used in various other applications and transport means as well.

Berdex trailers are built on a foundation of craftsmanship and innovation. Proven and tested through many years of usage, they are compliant with all of the most stringent health, safety and quality requirements. In their R&D center, they continue to develop products using the latest materials and solutions to ensure that their products do as they promise.

2. **Business Structure:**

Cooperative                       Corporation                       Limited Liability Company  
 Partnership                       S-Corporation                       Sole Proprietorship

3. State of Incorporation: Iowa  
4. Identify the Business' owners and percent ownership: Boxmeer Holdings 100% owners  
5. Does a woman, minority, or person with a disability own the Business?  Yes  No  
6. List the Business' Iowa locations and the most current number of employees at each location. N/A  
7. What is the Business' worldwide employment? (Please include employees of parent company, subsidiaries and other affiliated entities in this figure.) 600

**Project Information**

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8. **Project Street Address:** 23959 580<sup>th</sup> Ave  
**Project City and Zip Code:** Ames, Iowa 50010                      **Project County:** Story
9. **Type of Business Project:**  
 Startup                       Expansion of Iowa Company                       New Location in Iowa
10. **Does the project site qualify as a "Brownfield" or "Grayfield" site?**  Yes                       No  
If yes, please explain and document as Attachment A6.
11. **Does the project provide a licensed child care facility for use by the business's employees?**  Yes  No  
If yes, please explain
12. **Describe the proposed project for which assistance is being sought. (Include project timeline with dates, facility size, infrastructure improvements, proposed products/services, any new markets, etc.)**  
This project involves the expansion of Berdex manufacturing capabilities to the United States, specifically to Ames, Iowa. Ames is strategically positioned at the crossroads of America / Interstates

35/80. Ames will be Berdex USA's US headquarters. Berdex USA will sign a five-year lease on 18,000 square ft in the former Carmoli facility so that manufacturing operations can commence.

Berdex USA will manufacturer three different types of livestock trailers in Ames; conventionally ventilated trailers, cross-ventilated trailers, and climatized trailers. These trailers will be targeted at top swine producers, cattle producers, and other types of livestock producers.

13.

Project Timeline <i>(add additional rows as needed)</i>	Beginning Activity Date
Initiate 5 Year Lease	March 1, 2022
Launch Manufacturing Operations	April 1, 2022
Deliver first trailer to US customers	April 15, 2022

14. **Has any part of the project started\*?**  Yes  No  
If yes, please explain.

*\* For IEDA's purposes, starting the project includes: the start of construction or rehabilitation, the purchase of a building, execution of a lease, or installation of equipment to be used in the project.*

15. **Identify the Business' competitors.** If any of these competitors have Iowa locations, please explain the nature of the competition (e.g. competitive business segment, estimated market share, etc.) and explain what impact the proposed project may have on the Iowa competitor. Wilson Trailers, Eby Trailers. We will offer a trailer competitively priced between these Iowa based Manufacturers

16. **Will any of the current Iowa employees lose their jobs if this project does not proceed?**  
 Yes  No  
If yes, please explain why and identify those jobs as "retained jobs" in the Project Jobs Section E.

17. **Is the Business actively considering locations outside of Iowa?**  Yes  No  
If yes, where and what assistance is being offered?

18. **Please identify the company project management for the project location and experience.** Arnold Van Boxmeer, Sr, (40 Plus Years) Arnold Van Boxmeer, Jr (25 years) Rene Kuunders (25 years) Tom Barragy (25 years)

**SECTION C**

**Applicant's Project Budget**

1. Does the Business plan to lease the facility?     Yes     No

*If yes, please provide the Annual Base Rent Payment (lease payment minus property taxes, insurance and operating/maintenance expenses) for three years in the budget below, and only major renovation costs your company expects to incur. Administrative rules require the lease be in place for a minimum of five years.*

2. Please complete the budget below. Include only costs the company plans to incur directly:

Use of Funds	Cost	Source A	Source B	Source C	Source D	Source E	Source F
Base Rent (3 years)	675,000						
Tenant Improvements	245,000						
Land Acquisition							
Site Preparation							
Building Acquisition							
Building Construction							
Building Remodeling							
Mfg. Machinery & Equip.	450,000						
Other Machinery & Equip.	200,000						
Racking, Shelving, etc. <sup>1</sup>							
Computer Hardware	150,000						
Computer Software	10,000						
Furniture & Fixtures	15,000						
Working Capital							
Research & Development	150,000						
Other							
<b>TOTAL</b>	<b>\$1,895,000</b>	\$	\$	\$	\$	\$	\$

<sup>1</sup> Racking, shelving and conveyor equipment used in distribution center projects only

3. Please complete the chart below with proposed financing for the project (tax benefits should be reflected as indirect financing under No. 5 below):

PROPOSED FINANCING					
Source of Funds	Amount	Form of Funds	Rate and Term	Commitment Status	Conditions/Additional Information
Add additional lines as needed		(Loan, Grant, In-Kind, Donation, etc.)			Include when funds will be disbursed; If loan, whether payments are a level term, balloon, etc.
Source A: IEDA (see No. 4 below)	\$				
Source B: Local Government	\$ 11,420	Grant			
Source C: Business	\$376,716	Owner Equity			
Source D: Traditional Financing	\$1,506,864	Loan			
Source E: Other Source	\$				
Source F: Other Source	\$				
<b>TOTAL</b>	<b>\$1,895,000</b>				

4. Direct financial assistance (loans/forgivable loans) must be secured with acceptable collateral. Please select the type of collateral your company will pledge to secure the IEDA financing and document its value in Attachment A5. \*

No collateral, funding disbursed at the end of the 5-year contract	<input type="checkbox"/>	Explain:
Irrevocable letter of credit	<input type="checkbox"/>	
Dedicated certificate of deposit (CD)	<input type="checkbox"/>	

\* The IEDA Board has the final discretion on what collateral will be accepted.

5. Please complete the chart below with tax credits and other indirect financing expected for the project:

TAX CREDITS AND INDIRECT FINANCING		
Source of Funds	Amount	Description
Investment Tax Credit	\$42,250	
Sales, Service and Use Tax Refund	\$7,350	
Research Activities Credit (3%/10%)	\$7,500	
Local Property Tax Exemption		
Tax Increment Financing		
260E Job Training Funds	\$145,600	
In-kind Contribution		
Other		
<b>TOTAL</b>	<b>\$202,700</b>	

6. There are three justifiable reasons for providing assistance. Check the box next to the reason why assistance is needed to complete this project.

- Financing Gap** - A gap exists between the financing required and the financing on-hand, and the provision of tax incentives or assistance is necessary to fill the gap.
- Rate of Return Gap** –The likely returns of the project are inadequate to motivate a company decision maker to proceed with the project even if sufficient debt or equity can be raised to finance the project, and the project’s risks outweigh its rewards, making the provision of tax incentives or assistance necessary to reduce the project’s risks.
- Location Disadvantage (Incentive)** –The business is deciding between a site in Iowa (“Iowa site”) and a site in another state (“out-of-state site”) for its project, and the cost of completing the project at the out-of-state site is demonstrably lower, making tax incentives or assistance necessary to equalize the cost differential between the two sites. *Note: The authority will attempt to quantify the cost differential between the sites.*

7. Please provide a brief explanation of the need for assistance.

Seeking support for this project will help us offset the overall costs of investment as we work to establish US operations.

## SECTION D

### Employee Benefits

There are three options to meeting the sufficient benefit requirement. These options are detailed in the chart below. Please complete questions 1-3. If your company meets Option 1 or 2, no additional information is required. To utilize Option 3, please also complete questions 4-6.

	Option 1	Option 2	Option 3
	70% single Coverage	60% Family coverage	Monetary Equivalent
Total Number of Employees in US	Pay 70% of premium costs for a standard medical plan, single coverage.	Pay 60% of premium costs for a standard medical plan, family coverage.	Provide medical and pay the monetary equivalent of Option 1 or Option 2 in supplemental employee benefits.
201+	\$1700 maximum deductible	\$3750 maximum deductible	<i>Benefits Counted Toward Monetary Equivalent: medical coverage, dental coverage, vision insurance, life insurance, pension, 401(k) (company's average contribution, short-/long-term disability insurance, child care services, other non-wage compensation</i>
50-200	\$2500 maximum deductible	\$5250 maximum deductible	
0-49	\$3000 maximum deductible	\$6000 Maximum deductible	
* In addition, the IEDA will assess the affordability of plans qualified under the deductible and premium percentage paid by the employer criteria. Plans not offered at a reasonable cost to employees will be deemed not qualified, and the business is not eligible for benefits under the High Quality Jobs Program.			

1. How many full-time, permanent employees does your company currently employ within the U.S.? 0

2. What is the total premium cost for a standard medical plan for **single employee coverage**? \$3,600

- a. What portion of this cost is paid by the business? 70%  
 b. What is the deductible associated with this plan? \$1,500
3. What is the total premium cost for a standard medical plan for **family coverage**? \$ \_\_\_\_\_  
 a. What portion of this cost is paid by the business? \_\_\_\_\_  
 b. What is the deductible associated with this plan? \$ \_\_\_\_\_

**No additional information required in this section, if the company meets the requirement for Option 1 or Option 2**

4. Does the company provide additional benefits to full-time employees?  Yes  No  
 If yes, please provide the annual amount **offered by the business, per employee** in the chart below:

<b>Benefit</b>	<b>Annual amount paid by the business (per employee):</b>
Dental Insurance – Single plan	\$
Dental Insurance – Family plan	\$
Pension (Use 3-year average calculated below)	\$
Retirement Plan - i.e. 401(k) (Use 3-year average calculated below)	\$
Profit Sharing Plan (Use 3-year average calculated below)	\$
Childcare Services	\$
Life Insurance coverage	\$
Disability Insurance coverage	\$
Health Savings Account (HSA) contribution	\$
<b>TOTAL</b>	<b>\$</b>

5. Does the Business offer a pension plan, 401(k) plan, and/or retirement-plan?  Yes  No  
 If yes, please indicate the amount contributed on a per employee basis by the Business to the plan for the last three years. For 401(k) plans, please provide information on the company match and indicate the average annual match per employee.

<b>Year Ending</b>	<b>Average Actual Match per Employee (\$)</b>
	\$
	\$
	\$
<b>Three-year Average:</b>	<b>\$</b>

6. Does the Business offer a profit-sharing plan?  Yes  No  
 If yes, please indicate total amount paid out each year for the past three years, and then determine the average annual bonus or contribution per employee for that three-year period.

<b>Year Ending</b>	<b>Average Actual Share per Employee (\$)</b>
	\$
	\$
	\$
<b>Three-year Average:</b>	<b>\$</b>

**Notes:**

1. A qualified plan must be offered to all full-time permanent employees.
2. If you have multiple health insurance plans, please provide information on each plan.

**SECTION E**

**Project Jobs**

1. List the jobs to be created and/or retained as the result of this project. (A retained job is an existing job that would be eliminated or moved to another state if the project does not proceed in Iowa.) For jobs to be created, include the starting and final hourly base wage rate. Overtime, bonus or other benefits should not be included in the proposed wage. For retained jobs, include the current hourly wage rate.

<b>Full-Time CREATED Jobs</b>	<i>(Add additional rows as needed)</i>		
Job Title	Number of <b>CREATED</b> Jobs	Starting Hourly Wage	Wage at 36 months following the award
Welder, Assembler	16	\$25.00	\$30.00
Office, Administration	4	\$25.00	#30.00
<b>Total Full-Time CREATED Jobs</b>	<b>20</b>		

<b>Full-Time RETAINED Jobs</b>	<i>(Add additional rows as needed)</i>	
Job Title (AT-RISK jobs only)	Number of <b>RETAINED</b> Jobs	Current Hourly Wage
<b>Total Full-Time RETAINED Jobs</b>		

2. Is the hourly wage rate based on a 40-hour work week, 52 weeks per year?  Yes  No  
If no, please explain:

SECTION F

**Business Taxes**

IEDA is required to calculate the return on state and local government investments in this project. Data from other parts of the application will be combined with the estimates requested below to calculate the required return on investment information. Please read the following directions carefully:

- IEDA is asking for a best estimate on the increase in taxes associated with this project.
- Estimates should only include the expected increase in tax liability resulting from this project.
- At minimum, IEDA needs estimates for the first three years of the project.
- Show data as if no tax abatements or tax credits awarded for this project were taken.
- For partnership forms of ownership (e.g. limited partnerships, s-corporations, LLC, etc.), estimate the partners' increase in Iowa tax liability due to this project.
- Sales and use taxes refer to the taxes paid on materials, etc. the Business purchases, not taxes collected from its sales to customers.
- Applicants will not be held to these numbers with respect to any award from or contract with IEDA.
- This page of the application will automatically be treated as **confidential**.

**Increase in Tax Collections Associated with this Project**

State Business Taxes	Year 1	Year 2	Year 3	Year 4	Year 5
State Corporate Income Tax*	\$0	\$0	\$100K		
State Business Sales and Use Tax	\$12K	\$9K	\$5K		

\* Insurance Companies: Provide State Insurance Premium Tax

Local Business Taxes	Year 1	Year 2	Year 3	Year 4	Year 5
Local Real Estate Property Tax	\$5K	\$8K	\$10K		
Local Option Sales Tax	\$5K	\$4K	\$2K		

**CONFIDENTIAL**

## SECTION G

### Attachments

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Please attach the following documents:

**A1 Project Plan**

Please provide an executive summary for your project. This information should include, at a minimum, expanded information about the company's products and services and any other project related information not already been described in the application for financial assistance.

*Please note, a traditional business plan, including an executive summary, market analysis, organization and management structure, marketing and sales management, service and product line narrative, financial projections, feasibility study and patent status, as well as any other relevant information, may be requested by the Iowa Economic Development Authority to evaluate the feasibility of this project.*

**A2 Payroll Information (Confidential)**

- Copies of the Business' **Quarterly Iowa Employer's Contribution and Payroll Report** for the past year. This report should include the monthly employment totals.
- **A copy of the most recent payroll report for one pay period.** The copy of the most recent payroll report for one pay period must be in Excel format and include the following information:
  - Company name, date of payroll and source of payroll information
  - Employee name and/or employee identification number
  - Current hourly wage - do not include bonuses, overtime or other benefit values
  - Indicate if the employee is full time (40 hours per week, 52 weeks per year) or part time.
  - A sample Excel spreadsheet can be provided by IEDA staff

**A3 Affidavit** stating the Business has not, within the last five years, violated state or federal statutes, rules and regulations, including environmental, worker safety regulations and antitrust laws, or, if such violations have occurred, that there were mitigating circumstances or such violations did not seriously affect public health or safety or the environment. A sample affidavit can be provided by IEDA staff.

**A4 Financial Information (Confidential, unless already publicly available) (Existing Businesses Only)**

- Profit and loss statements and balance sheets for past three year-ends;
- Current YTD profit and loss statement and balance sheet;
- Schedule of aged accounts receivable;
- Schedule of aged accounts payable; and
- Schedule of other debts.

**A5 Collateral documentation** (If requesting direct financial assistance only)

**A6 Brownfield or Grayfield site documentation** (if applicable)

SECTION H

Certification and Release of Information

- 1. Are there any judgments or court actions completed or pending against the applicant entity, or any current or prospective officer, principal, director or owner?
2. Has any current or prospective officer, principal, director or owner been accused or convicted of any wrongdoing or crime, other than a simple misdemeanor?
3. Have there been any current or past bankruptcies on the part of the applicant entity (or predecessor entities), or on the part of any current (or prospective) officer, principal, owner or in any business dealings of current (or prospective) officers, principals or owners of the applicant entity?
4. In the last five years have there been, or are there currently any investigations of potential violations of public health, safety (including workplace safety) or environmental laws by the applicant entity, or any current or prospective officer, principal, director or owner?
5. In the last five years have there been, or are there currently any violations of antitrust laws by the applicant entity, or any current or prospective officer, principal, director or owner?
6. If yes to any of the above, please provide additional explanation:

I hereby give permission to the Iowa Economic Development Authority (IEDA) to research the Business' history, make credit checks, contact the Business' financial institutions, insurance carriers and perform other related activities necessary for reasonable evaluation of this application. I also hereby authorize the Iowa Department of Revenue to provide to IEDA state tax information pertinent to the Business' state income tax, sales and use tax, and state tax credits claimed.

I understand that all information submitted to IEDA related to this application is subject to Iowa's Open Record Law (Iowa Code, Chapter 22), unless specifically marked as confidential section.

I understand the IEDA reserves the right to negotiate the financial assistance.

I understand this application is subject to final approval by IEDA and the Project may not be initiated until final approval is secured. Furthermore, I am aware that funds will not be disbursed until a contract has been executed and the appropriate terms met.

I understand that upon execution of the contract and prior to the issuance of a tax credit number or the disbursement of Award Funds, a recipient shall pay IEDA a one-time compliance cost fee in the amount of \$500. In addition, if tax benefits are greater than \$100,000, the Recipient shall remit to IEDA a compliance cost fee 0.5% of the value of the Tax Incentives claimed pursuant to the contract. The fee will be due and payable upon filing the Recipient's annual tax return for each tax year in which tax credits are claimed under the contract.

I hereby certify that all representations, warranties or statements made or furnished to IEDA in connection with this application are true and correct in all material respect. I understand that it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring economic development assistance from a state agency or subdivision.

For the Business:

For the Sponsor(s):

Handwritten signature and date for the Business representative.

Signature and Date labels for the Sponsor(s) section.

Tom Barragy
Name and Title (typed or printed)

Name and Title (typed or printed)

IEDA will not provide assistance in situations where it is determined that any representation, warranty or statement made in connection with this application is incorrect, false, misleading or erroneous in any material respect. If assistance has already been provided prior to discovery of the incorrect, false, or misleading representation, IEDA may initiate legal action to recover incentives and assistance awarded to the Business.

Affidavit

State of Iowa  
County of Story

I, Tom Barragy, depose and say that I have examined the following statement and have found it to the best of my knowledge to be accurate and true.

Berdex USA has not, within the last five years, violated state or federal statutes, rules, and regulations, including environmental and worker safety regulations, or, if such violations have occurred, that there were mitigating circumstances or such violations did not seriously affect public health or safety or the environment.

I have submitted a report detailing the circumstances of all such violations to the Economic Development Authority and such report represents a full and complete description of such circumstances.

I hereby certify that the information presented to the Iowa Economic Development Authority on [insert date] is fully complete, true, and correct. I understand that it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring economic development assistance from a state agency or subdivision, as provided in Iowa Code section 15A.3 and other applicable law.

Furthermore, I understand that providing false, misleading, or fraudulent information to the Board may result in civil and/or criminal liabilities and penalties against the Recipient and its representatives.

I further depose that the signature below is my own proper signature.

Dated: January 24, 2022

*Tom Barragy*  
Signature

Subscribed and sworn to before me on  
this 25 day of January 2022  
Amy Sue Howard (Notary Public)  
Story County  
My commission expires on June 8, 2024

