

TAB 01

Application
(Amended August 2016)



Application for Appraised Value Limitation on Qualified Property

SECTION 1: School District Information (continued)

3. Authorized School District Consultant (If Applicable)

Kevin _____ O'Hanlon _____
 First Name Last Name
 Attorney _____
 Title _____
 O'Hanlon, McCollom & Demerath _____
 Firm Name _____
 512-494-9949 _____ 512-494-9919 _____
 Phone Number Fax Number
 _____ kohanlon@808west.com _____
 Mobile Number (optional) Email Address

4. On what date did the district determine this application complete?

5. Has the district determined that the electronic copy and hard copy are identical? Yes No

SECTION 2: Applicant Information

1. Authorized Company Representative (Applicant)

Anthony _____ Germinario _____
 First Name Last Name
 Director, State Tax _____ Yara Freeport LLC d/b/a Texas Ammonia LLC _____
 Title Organization
 C/O BASF Corporation _____
 Street Address _____
 100 Park Avenue _____
 Mailing Address _____
 Florham Park _____ NJ _____ 07932 _____
 City State ZIP
 973-245-6558 _____
 Phone Number _____
 Mobile Number (optional) _____
 Fax Number _____
 _____ anthony.germinario@basf.com _____
 Business Email Address

2. Will a company official other than the authorized company representative be responsible for responding to future information requests? Yes No

2a. If yes, please fill out contact information for that person.

Rosemary _____ Malarkey _____
 First Name Last Name
 Director of Tax _____ Freeport Ammonia LLC _____
 Title Organization
 C/O Yara North America, Inc. _____
 Street Address _____
 100 North Tampa Street, Suite 3200 _____
 Mailing Address _____
 Tampa _____ FL _____ 33602 _____
 City State ZIP
 813-222-3813 _____
 Phone Number _____
 Mobile Number (optional) _____
 Fax Number _____
 _____ Rosemary.Malarkey@yara.com _____
 Business Email Address

3. Does the applicant authorize the consultant to provide and obtain information related to this application? Yes No

TAB 17

Signature and Certification Page (Amended August 2016)



Application for Appraised Value Limitation on Qualified Property

SECTION 16: Authorized Signatures and Applicant Certification

After the application and schedules are complete, an authorized representative from the school district and the business should review the application documents and complete this authorization page. Attach the completed authorization page in Tab 17. NOTE: If you amend your application, you will need to obtain new signatures and resubmit this page, Section 16, with the amendment request.

1. Authorized School District Representative Signature

I am the authorized representative for the school district to which this application is being submitted. I understand that this application is a government record as defined in Chapter 37 of the Texas Penal Code.

print here Danny Massey Superintendent
 Print Name (Authorized School District Representative) Title

sign here [Signature] 9-19-16
 Signature (Authorized School District Representative) Date

2. Authorized Company Representative (Applicant) Signature and Notarization

I am the authorized representative for the business entity for the purpose of filing this application. I understand that this application is a government record as defined in Chapter 37 of the Texas Penal Code. The information contained in this application and schedules is true and correct to the best of my knowledge and belief.

I hereby certify and affirm that the business entity I represent is in good standing under the laws of the state in which the business entity was organized and that no delinquent taxes are owed to the State of Texas.

print here Anthony Germinario Director, State Tax
 Print Name (Authorized Company Representative (Applicant)) Title

sign here [Signature] 9/1/16
 Signature (Authorized Company Representative (Applicant)) Date

GIVEN under my hand and seal of office this, the

1st day of September, 2016

Jeanne Hahn
Notary Public in and for the State of Texas

My Commission expires:

JEANNE HAHN
Notary Public
New Jersey
 My Commission Expires **12-06-2017**

(Notary Seal)

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Chapter 313 Agreement Assignment Information Sheet

Section 1: Assignor Information

1. Authorized Company Representative (Assignor)	
a. First Name	Christopher
b. Last Name	Witte
c. Title	Senior Vice President: Freeport Site General Manager
d. Organization	BASF Corporation
e. Street Address	602 Copper Road
f. Mailing Address	602 Copper Road
g. City State ZIP	Freeport, TX 77541
h. Phone Number	979-415-6111
i. Fax Number	
j. Mobile Number (optional)	
k. Business Email Address	christopher.witte@basf.com

2. Agreement associated with this Request for Assignment	
a. School District	Brazosport
b. Legal Name of Original Applicant/ Counterparty	BASF Corporation
c. Application #	1007
d. Agreement Execution Date	November 11 2014 / June 21 2016
e. Business Email Address	

a. Attach the agreement to be assigned as Tab 1.

3. Is the Assignor eligible to assign the Agreement.	Yes
4. Does the Assignor represent that this assignment is being made free of encumbrances or additional PILOT payments not covered in the Agreement?	Yes

Section 2: Assignee Information

5. Authorized Company Representative (Assignee)	
a. First Name	Anthony
b. Last Name	Germinario
c. Title	Director, State Tax
d. Organization	Yara Freeport LLC d/b/a Texas Ammonia LLC - Freeport Ammonia LLC
e. Street Address	100 Park Avenue
f. Mailing Address	100 Park Avenue
g. City State ZIP	Florham Park, NJ 07932
h. Phone Number	973-245-6558
i. Fax Number	
j. Mobile Number (optional)	
k. Business Email Address	anthony.germinario@basf.com

6. Will a company official other than the authorized company representative be responsible for responding to future information requests? Yes or No	No
---	----

If yes, please provide contact information for that person.

a. First Name	
b. Last Name	
c. Title	
d. Organization	
e. Street Address	
f. Mailing Address	
g. City State ZIP	
h. Phone Number	
i. Fax Number	
j. Mobile Number (optional)	
k. Business Email Address	

7. Does the assignee authorize the consultant to provide and obtain information related to this application? Yes or No	Yes
--	-----

8. Authorized Company Consultant (If Applicable)	
a. First Name	Blas
b. Last Name	Ortiz
c. Title	Tax Incentives Manager
d. Organization	Popp Hutcheson PLLC
e. Street Address	1301 South MoPac Expy, Ste. 430
f. Mailing Address	1301 South MoPac Expy, Ste. 430
g. City State ZIP	Austin, TX 78746
h. Phone Number	512-473-2661
i. Fax Number	512-479-8013
j. Mobile Number (optional)	
k. Business Email Address	blas.ortiz@property-tax.com

Section 3: Business Applicant Information

1. What is the legal name of the assignee under which this assignment is made?	1.) Yara Freeport LLC d/b/a Texas Ammonia, 2.) Freeport Ammonia LLC
2. List the Texas Taxpayer I.D. number of entity subject to Tax Code, Chapter 171 (11 digits)	1.) 32055709888, 2.) 32055653342
3. List the NAICS code	325510
4. Is the assignee a party to any other pending or active Chapter 313 agreements?	No

- a. If yes, please list application number, name of school district and year of agreement:

Chapter 313 Agreement Assignment Information Sheet

Section 1: Assignor Information

1. Authorized Company Representative (Assignor)	
a. First Name	Christopher
b. Last Name	Witte
c. Title	Senior Vice President: Freeport Site General Manager
d. Organization	BASF Corporation
e. Street Address	602 Copper Road
f. Mailing Address	602 Copper Road
g. City State ZIP	Freeport, TX 77541
h. Phone Number	979-415-6111
i. Fax Number	
j. Mobile Number (optional)	
k. Business Email Address	christopher.witte@basf.com

2. Agreement associated with this Request for Assignment	
a. School District	Brazosport
b. Legal Name of Original Applicant/ Counterparty	BASF Corporation
c. Application #	1007
d. Agreement Execution Date	November 11 2014 / June 21 2016
e. Business Email Address	

a. Attach the agreement to be assigned as Tab 1.

3. Is the Assignor eligible to assign the Agreement.	Yes
4. Does the Assignor represent that this assignment is being made free of encumbrances or additional PILOT payments not covered in the Agreement?	Yes

Section 2: Assignee Information

5. Authorized Company Representative (Assignee)	
a. First Name	Rosemary
b. Last Name	Malarkey
c. Title	Director of Tax
d. Organization	Freeport Ammonia LLC
e. Street Address	100 North Tampa Street, Ste. 3200
f. Mailing Address	C/O Yara North America, Inc. 100 North Tampa St., Ste. 3200
g. City State ZIP	Tampa, FL 33602
h. Phone Number	813-222-3813
i. Fax Number	
j. Mobile Number (optional)	
k. Business Email Address	Rosemary.Malarkey@yara.com

Authorized Signatures:

2nd Amendment 1007
November 10, 2016

1) Authorized School District Representative

Name: Danny Massey Title: Superintendent
Signature: [Signature] Date: 9-19-16

2) Assignor:

The information contained in this application is true and correct to the best of my knowledge and belief:

Name: Christopher P. Witte Title: Sr. Vice President
Signature: [Signature] Date: 8/31/16

Notary:

Given under my hand and seal of office this, the



(Notary Seal)

31st day of August, 2016

Jennifer Cary
Notary Public in and for the State of Texas

My Commission Expires: February 11, 2019

3) Assignee:

The information contained in this application is true and correct to the best of my knowledge and belief:

Name: [Signature] Title: Director, State Tax
Signature: Anthony Germinario Date: 9/1/16

Notary:

Given under my hand and seal of office this, the

(Notary Seal)

1st day of September, 2016

Jeanne Hahn
Notary Public in and for the State of NJ

My Commission Expires:



3) Assignee:

The information contained in this application is true and correct to the best of my knowledge and belief:

Name: Rosemary America Title: Asst. Secretary - Labor
Signature: [Signature] Date: 9/1/16
Rosemary America

Notary:

Given under my hand and seal of office this, the



(Notary Seal)

1st day of September, 2016

Elisabeth Price
Notary Public in and for the State of Florida

My Commission Expires: 04/18/2019