

2025 5YR MANUFACTURING REPORT					
5YR COMPANY NAME	ACCT NO.	COST	MARKET	ASSESSED	TXD
AERO COMPONENTS (MACHINE COMPONENT MFG)					
XM-1	P3124213	1,814,015	1,668,894	229,472	300
XM-2	P3122015	3,187,368	2,740,308	376,792	300
XM-3	P3118723	2,030,190	1,608,211	229,129	300
AMAZON.COM (DISTRIBUTION CENTER)					
XM-4	P3117047	45,946,218	38,245,567	5,258,765	302
AMERICAN TISSUE INDUSTRY (TISSUE MFG)					
XM-1	P3124598	1,404,596	1,292,227	177,681	541
BALON CORP (VALVE MFG)					
XM-1	P3124273	1,461,068	1,344,183	184,825	353
XM-2	P3122020	2,404,548	2,048,079	281,610	353
XM-3	P3118545	2,336,240	1,566,428	215,383	353
XM-4	P3118343	590,311	491,207	67,540	353
XM-5	P3118342	828,982	483,734	66,513	353
GLOBAL X DIGITAL (BITCOIN MINING DATA CTR)					
XM-4	P3118348	29,316,952	9,989,524	1,373,559	541
XM-5	P3117050	3,050,829	701,691	96,482	541
HUBBELL MANUFACTURING (ELECTRICAL PRODUCTS MFG)					
XM-1	P3124566	7,129,060	6,398,532	879,798	252
XM-2	P3121930	22,402,199	15,722,347	2,161,822	252
XM-3	P3118999	9,307,163	4,519,879	621,483	252
XM-4	P3122167	883,459	735,140	101,081	252
KIMRAY INC (OIL & GAS EQUIPMENT MFG)					
XM-1	P3124274	3,573,871	3,287,961	452,094	200

XM-2	P3121988	2,967,329	2,553,520	351,109	200
XM-3	P3118546	3,446,117	2,701,574	371,466	200
XM-4	P3118548	2,016,822	1,640,844	225,616	200
KRATOS UNMANNED AERIAL SYSTEMS (DEFENSE EQUIPMENT MFG)					
XM-1	P3124275	2,292,958	2,109,520	290,059	341
XM-2	P3122166	13,663,243	12,239,481	1,682,928	341
XM-3	P3118542	2,350,608	1,807,276	248,500	341
XM-4	P3118350	1,594,919	1,024,282	140,838	341
XM-5	P3118349	1,646,626	1,042,941	143,404	341
LETICA CORP (PLASTICS MFG)					
XM-1	P3124356	1,560,489	1,435,650	197,401	341
XM-2	P3122021	1,312,011	1,098,199	151,002	341
XM-3A	P3124093	902,774	441,456	60,700	341
XM-4	P3118731	1,152,250	863,555	118,738	341
MALARKEY ROOFING PRODUCTS (ROOFING PRODUCTS MFG)					
XM-1	R143503115	1,921,495	1,921,495	211,364	341
XM-1	P3124233	1,918,273	1,764,811	242,661	341
XM-4	P3118358	32,746,617	27,248,984	3,746,735	341
XM-5	P3118357	265,330	204,768	28,155	341
MD BUILDING PRODUCTS (BUILDING MATERIALS MFG)					
XM-1	P3124402	5,598,249	5,738,454	789,037	200
XM-2	P3122016	2,054,884	1,534,376	210,976	200
XM-5	P3118354	509,309	294,698	40,520	200
XM-5	R133206315	892,019	1,156,755	103,028	200
MIDWEST HOSE SPECIALTY (COMMERCIAL USE HOSE MFG)					
XM-1	P3124276	1,289,768	1186587	163155	253
XM-2	P3122089	954,133	775,932	106,690	253
XM-4	P3118727	966,980	728,692	100,195	253

MORRISON CUP SOLUTIONS (PLASTIC & FOAM CUPS MFG)					
XM-1	P3124449	1,251,253	1,151,153	158,283	512
XM-2	P3122141	1,684,570	1,387,654	190,802	512
XM-3	P3122142	1,447,824	1,133,445	155,848	512
NESTLE PURINA PETCARE (PET FOOD MFG)					
XM-1	P3124277	5,122,116	4,712,347	647,947	212
XM-2	P3122132	3,778,580	3,167,563	435,539	212
XM-3	P3111475	1,957,787	1,421,033	195,392	212
XM-4	P3118363	5,324,686	4,045,544	556,262	212
XM-5	P3118362	5,106,627	3,809,959	523,869	212
PURFOODS/MOMS MEALS (MEAL PREP & DISTRIBUTION)					
XM-1	P3124350	4,698,295	4,322,431	594,334	341
XM-2	P3121863	11,148,554	9,767,590	1,343,043	341
XM-2	R218941000	17,838,617	17,838,618	1,962,247	341
SCRAP MNGMT (METAL RECYCLING)					
XM-1	P3124323	3,374,682	3,104,707	426,897	252
XM-1	R143921055	1,023,672	159,354	17,528	252
XM-2	P3121980	24,786,889	21,348,650	2,935,439	252
XM-2	R143921051	2,982,833	2,432,275	267,550	252
T & T INDUSTRIAL INC					
XM-1	P3124337	753,074	6,726,002	92,482	541
TOTALS					
		312,156,316	249,217,193	32,772,296	

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-1

To: Applicant: AERO Components Co
Address: 535 SE 82ND ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,814,015

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,814,015

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

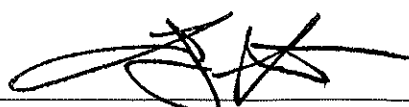
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-2

To: Applicant: AERO Components Co
Address: 535 SE 8th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,187,308

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,187,308

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

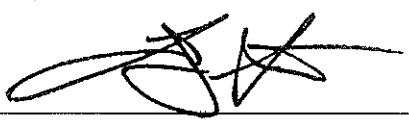
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: XM-3

To: Applicant: AERO Components Co
Address: 535 SE 82ND ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,030,190

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,030,190

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XIM-4

To: Applicant: Amazon
Address: 8991 S Portland Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 45,946,218
by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 45,946,218
by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: American Tissue
Address: 50 N Council Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,404,596

by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,404,596

by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

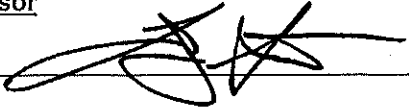
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County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

To: Applicant: BALON CORP Application Number: LM-1
Address: 3245 S HATTIE AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,461,068

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,461,068

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

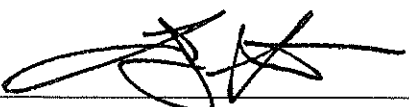
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-2

To: Applicant: BHLOX CORP
Address: 3245 S HATTIE AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,404,548

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,404,548

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

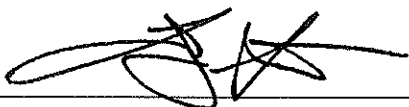
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-3

To: Applicant: BALON CORP
Address: 3245 S HATTIE AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,336,240

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,336,240

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-4

To: Applicant: BALOW CORP
Address: 3245 S HATTIE AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 590,312

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 590,312

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-5

To: Applicant: BALON CORP
Address: 3245 S HATTIE AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 828,982

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 828,982

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-4

To: Applicant: GLOBAL X Digital
Address: 7725 W PENO AVE

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 29,316,952

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 29,316,952

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-5

To: Applicant: Global x Digital
Address: 7725 W Reno Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,050,829

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,050,829

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

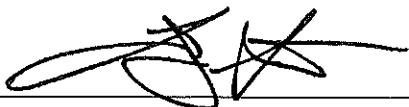
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-1

To: Applicant: Hubbell Manufacturing OKC Inc
Address: 6801 S Sunnylane Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 7,129,060
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 7,129,060
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

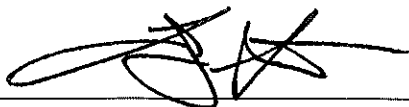
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

To: Applicant: Hubbell Manufacturing OKC Inc Application Number: LM-2
Address: 6801 S Sunnylane Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 22,402,199

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 22,402,199

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-3

To: Applicant: Hubbell Manufacturing OKC INC
Address: 6801 S Sunnylane Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 9,307,163

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 9,307,163

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

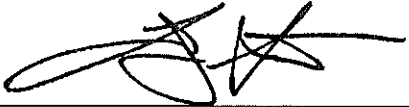
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-4

To: Applicant: Hubbell Manufacturing
Address: 6801 S Sunnyslane Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 883,459
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 883,459
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

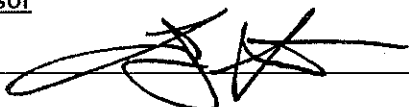
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: 4M-1

To: Applicant: Kimray Inc
Address: 52 NW 42nd ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,573,871
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,573,871
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

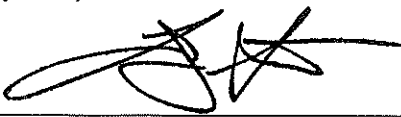
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-2

To: Applicant: KIMRAY Inc
Address: 52 NW 42ND ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,399,055

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,399,055

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

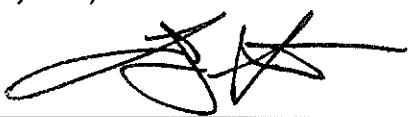
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: XM-3

To: Applicant: Kimray Inc
Address: 52 NW 42nd ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,410,441

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,410,441

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

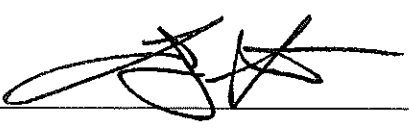
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: LM-4

To: Applicant: Kimray Inc
Address: 52 NW 42nd ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,971,893

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,971,893

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

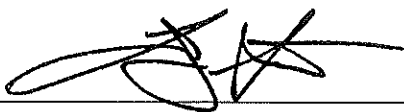
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: KRATOS Unmanned Aerial Systems Inc Application Number: XM-1
Address: 7501 SW 29th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,292,957
by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,292,957
by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: KRATOS Unmanned Aerial Systems Inc Application Number: LM-2
Address: 7501 SW 29th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 13,301,466

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 13,301,466

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

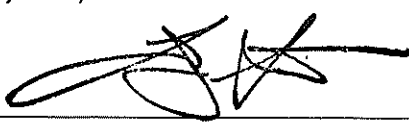
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County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-3

To: Applicant: KRATOS Unmanned Aerial System Inc
Address: 7501 SW 29th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,350,008
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,350,008
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

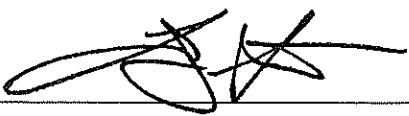
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

To: Applicant: KRATOS Unmanned Aerial Systems Inc Application Number: XM-4
Address: 7501 SW 29th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,235,800
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,235,800
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: KIZOTOS UNMANNED AERIAL SYSTEMS INC Application Number: XM5
Address: 7501 SW 29th ST

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,579,789
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,579,789
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: Letica Corp
Address: 7428 SW 29th St

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,560,489
by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,560,489
by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

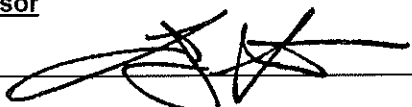
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-2

To: Applicant: Letica Corp
Address: 7428 SW 29th St.

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,312,011
by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,312,011
by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

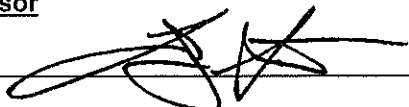
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-3A

To: Applicant: Letica Corp
Address: 7428 SW 29th St

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 543,000

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 543,000

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-4

To: Applicant: Letica Corp
Address: 7428 SW 29th St

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,152,250

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,152,250

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

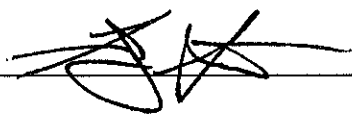
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-1

To: Applicant: MALARKY ROOFING
Address: 3400 S Council Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,918,273 (P)
by: OKLAHOMA County Assessor 1,921,495 (R)

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,918,273 (P)
by: OKLAHOMA County Board of Equalization 1,921,495 (R)

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

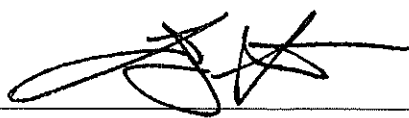
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-4

To: Applicant: MALARKEY ROOFING
Address: 3400 S Council Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 32,746,617

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 32,746,617

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

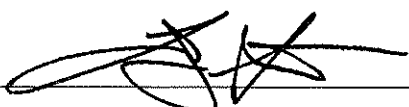
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-5

To: Applicant: Malarkey Roofing
Address: 3400 S Council Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 265,330

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ \$265,330

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

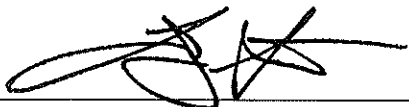
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

To: Applicant: MD Building Products Inc Application Number: LM-1
Address: 4041 N Santa Fe

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,598,249
by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,598,249
by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/25/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-2

To: Applicant: M-D Building Products
Address: 4041 N Santa Fe

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,054,884
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 2,054,884
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-5

To: Applicant: MD Building Products
Address: 4041 N Santa Fe

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 509,309 PP
by: Oklahoma County Assessor 892,019 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 509,309 PP
by: Oklahoma County Board of Equalization 892,019 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: Midwest Hose & Specialty Application Number: LM-1
Address: 3312 S I-35 Service Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,289,768
by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,289,768
by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

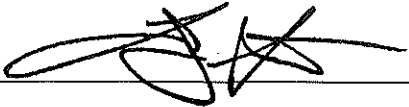
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-2

To: Applicant: MIDWEST HOSE & SPECIALTY
Address: 3312 S I-35 SERVICE RD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 954,133

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 954,133

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

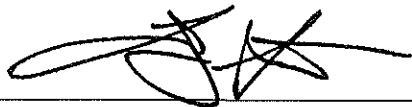
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: Midwest Hose & Specialty Application Number: LM-4
Address: 3312 S I-35 Service Rd

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 966,980
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 966,980
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

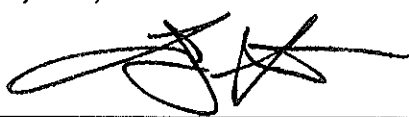
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: Morrison Cup
Address: 3600 S Kelly Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,251,253
by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,251,253
by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/2025

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-2

To: Applicant: MORRISON CUP
Address: 3400 S Kelly Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,684,570

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,684,570

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/2025

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-3

To: Applicant: Morrison Cup
Address: 3400 S Kelly Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,447,824
by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,447,824
by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

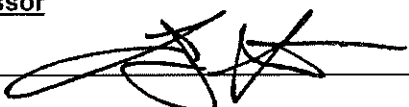
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/2025

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: Nestle Purina Petcare
Address: 13900 N LINCOLN BLVD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,122,116

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,122,116

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

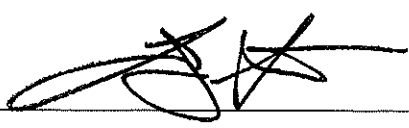
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: AM-2

To: Applicant: Nestle Purina Petcare
Address: 13900 N LINCOLN BLVD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,778,580

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,778,580

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

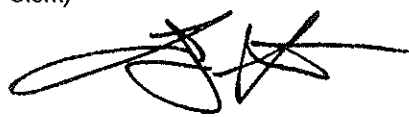
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-3

To: Applicant: Nestle Purina Petcare
Address: 13900 N LINCOLN BLVD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,957,787

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 1,957,787

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/85

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: LM-4

To: Applicant: Nestle Purina Petcare
Address: 13900 N LINCOLN BLVD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,324,080

by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,324,080

by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: Nestle Purina Petcare Application Number: LM-5
Address: 13800 N LINCOLN BLVD

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,106,627

by: Oklahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 5,106,627

by: Oklahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

To: Applicant: PURFOODS LLC DBA MOMS MEALS Application Number: XM-1
Address: 6849 S Rockwell Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 4,698,295
by: OKLAHOMA County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 4,698,295
by: OKLAHOMA County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

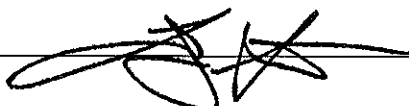
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

To: Applicant: PUTRFOODS LLC DBA MOMS MEALS Application Number: LM 2
Address: 6849 S Rockwell Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 11,148,554 PP
by: OKLAHOMA County Assessor 17,838,617 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 11,148,554 PP
by: OKLAHOMA County Board of Equalization 17,838,617 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

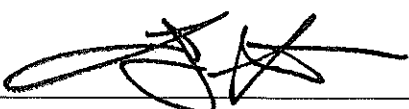
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission
**Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization**

Application Number: XM-1

To: Applicant: Scrap Management of Oklahoma
Address: 5200 SE 59th St.

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,374,682 PP
by: OKlahoma County Assessor 1,023,672 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,374,682 PP
by: OKlahoma County Board of Equalization 1,023,672 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____
by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____
by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-2

To: Applicant: Scrap Management of Oklahoma
Address: 5200 SE 59th St.

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 24,786,889 PP
by: Oklahoma County Assessor 2,982,833 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 24,786,889 PP
by: Oklahoma County Board of Equalization 2,982,833 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

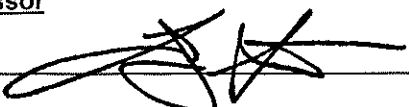
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: Scrap Management of Oklahoma
Address: 5200 SE 59th St.

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,374,682 PP
by: Oklahoma County Assessor 1,023,672 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 3,374,682 PP
by: Oklahoma County Board of Equalization 1,023,672 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number:

XM-2

To: Applicant: Scrap Management of Oklahoma

Address: 5200 SE 59th St.

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 24,786,889 PP

by: Oklahoma County Assessor

2,982,833 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 24,786,889 PP

by: Oklahoma County Board of Equalization

2,982,833 RE

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing, and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature: 

Date: 3/15/25

Oklahoma Tax Commission

Notice of Approval or Disapproval of Manufacturer's Ad Valorem Tax Exemption
by County Assessor and County Board of Equalization

Application Number: XM-1

To: Applicant: TET Industrial Inc
Address: 1021 S Rockwell Ave

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 735,074

by: OKlahoma County Assessor

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Assessor

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Assessor

For the following reasons:

Please Complete the Following:

The application for exemption has been **APPROVED** for the total requested in the amount of \$ 735,074

by: OKlahoma County Board of Equalization

The application for exemption has been **APPROVED IN PART** in the amount of \$ _____

by: _____ County Board of Equalization

The following property has been disapproved for exemption for the reasons indicated:

The application for exemption has been **DISAPPROVED** in the amount of \$ _____

by: _____ County Board of Equalization

For the following reasons:

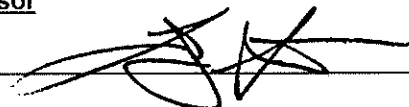
All applications approved by the County Assessor, in whole or in part, are subject to review and approval by the County Board of Equalization and the Oklahoma Tax Commission. Any person whose previously approved application for exemption has been denied or changed by the Board of Equalization may, **WITHIN TEN (10) DAYS** from receipt of this notice, file a complaint with the County Clerk requesting a hearing thereon. The complaint shall set forth the reasons why the exemption should be allowed and all pertinent facts in relation thereto. The applicant will be notified of the time and place of such hearing; and will be afforded the opportunity to present evidence in support of his claim for exemption. If complaint is not filed within the time specified, the determination of the board will become final.

County Board of Equalization

Signature: _____
Sec. (County Clerk)

Date: _____

County Assessor

Signature:  _____

Date: 3/15/25