

## Orbinox America Inc.

2050 Bd Dagenais O, Laval, Quebec, Canada H7L 5W2

Marco Giambagno, President

Date: February 6, 2025

### Application Facts:

|             |                       |
|-------------|-----------------------|
| Industry    | <b>Manufacturing</b>  |
| NAICS       | <b>332911</b>         |
| Type of App | <b>New</b>            |
| Location    | <b>Douglas County</b> |
| RDA         | NNDA, Hayden Poinier  |

### Company Profile

Orbinox America Inc. (Orbinox) plans to establish a manufacturing facility in Douglas County. Orbinox, a global leader in knife gate valve manufacturing, has over 50 years of expertise in designing, producing, and marketing industrial valves, slide gates, dampers, and hydraulic works solutions. The Nevada facility will focus on the manufacturing, and distribution, of water valves for fresh water and waste water applications and industrial applications. Orbinox supplies a wide range of knife gate valves, penstocks/slide gates, dampers and valves for hydraulic works that are used in various industrial segments such as Water Treatment, Mining, Power Generation, Pulp and Paper, Food and Beverage, Petrochemical Industry, Steel Industry, Air Separation and Dams, Reservoirs and Hydro Solutions. Headquartered in Spain, the company operates six manufacturing plants, 12 sales offices, and an extensive distributor network, ensuring a presence in over 70 countries across Europe, the Americas, and Asia. In North America, Orbinox has its regional head office in Laval, Quebec, Canada, and operates a distribution center in Amory, Mississippi. The Amory location plays a vital role in serving, and growing the company's business, in the Eastern U.S. To further strengthen its presence in the U.S. market, Orbinox is expanding with a new facility in Minden. This second location is a key step in its growth strategy, enabling Orbinox to better serve the Western U.S. *Source: Orbinox America Inc.*

| <b>Tax Abatement Requirements:</b> | <b>Statutory</b>   | <b>Company Application</b> | <b>Meeting Requirements</b> |
|------------------------------------|--------------------|----------------------------|-----------------------------|
| Job Creation                       | <b>10</b>          | 6                          | <b>No</b>                   |
| Average Wage                       | <b>\$32.51</b>     | \$32.52                    | <b>Yes</b>                  |
| Equipment Capex (SU & MBT)         | <b>\$250,000</b>   | \$2,053,700                | <b>Yes</b>                  |
| Equipment Capex (PP)               | <b>\$1,000,000</b> |                            | <b>Yes</b>                  |

### Additional Requirements:

|                               |                                             |                                  |                                      |
|-------------------------------|---------------------------------------------|----------------------------------|--------------------------------------|
| Health Insurance              | 65%                                         | <b>100%</b>                      | <b>Yes</b>                           |
| Revenues generated outside NV | 51%                                         | <b>98%</b>                       | <b>Yes</b>                           |
| Business License              | <input checked="" type="checkbox"/> Current | <input type="checkbox"/> Pending | <input type="checkbox"/> Will comply |

|                                                     |                         |                    |
|-----------------------------------------------------|-------------------------|--------------------|
| <b>Total Tax Liability</b> (without tax abatements) | <b>Direct (company)</b> | <b>Total</b>       |
|                                                     | <b>\$218,368</b>        | <b>\$2,594,764</b> |

| <b>Tax Abatements</b>                             | <b>Contract Terms</b> | <b>Estimated Tax Abatement</b> |
|---------------------------------------------------|-----------------------|--------------------------------|
| Sales Tax Abmt.                                   | 2% for 2 years        | \$104,739                      |
| Modified Business Tax Abmt.                       | 50% for 4 years       | \$4,510                        |
| Personal Property Tax Abmt.                       | 50% for 10 years      | \$83,403                       |
| <b>Total Estimated Tax Abatement over 10 yrs.</b> |                       | <b>\$192,652</b>               |

| <b>Net New Tax Revenues</b>                         | <b>Direct</b>    | <b>Indirect</b>    | <b>Taxes after Abatements</b> |
|-----------------------------------------------------|------------------|--------------------|-------------------------------|
| <b>Local Taxes</b>                                  |                  |                    |                               |
| Property                                            | \$612,713        | \$924,438          | \$1,537,151                   |
| Sales                                               | \$20,336         | \$193,599          | \$213,935                     |
| Lodging                                             | \$0              | \$55,017           | \$55,017                      |
| <b>State Taxes</b>                                  |                  |                    |                               |
| Property                                            | \$29,846         | \$96,783           | \$126,629                     |
| Sales                                               | \$49,049         | \$163,178          | \$212,227                     |
| Modified Business                                   | \$154,791        | \$100,728          | \$255,519                     |
| Lodging                                             | \$0              | \$1,634            | \$1,634                       |
| <b>Total Estimated New Tax Revenue over 10 yrs.</b> | <b>\$866,735</b> | <b>\$1,535,377</b> | <b>\$2,402,112</b>            |

| <b>Economic Impact over 10 yrs.</b> | <b>Economic</b> | <b>Construction</b> | <b>Total</b>  |
|-------------------------------------|-----------------|---------------------|---------------|
| Total Jobs Supported                | 54              | 6                   | 60            |
| Total Payroll Supported             | \$26,318,992    | \$352,732           | \$26,671,724  |
| Total Economic Value                | \$136,514,970   | \$1,029,646         | \$137,544,616 |

**Economic Impact Output per Abatement Dollar**

**\$709**

**New Total Tax per Abated Dollar**

**\$12.47**

### IMPORTANT TERMS & INFORMATION

**Tax Abatements are reduction or discount of tax liability and companies do not receive any form of payment.**

**Total Estimated Tax Abatement** is a tax reduction estimate. This estimated amount will be discounted from total tax liability.

**Estimated New Tax Revenue** is amount of tax revenues local and state government will collect after the abatement was given to applying company.

**Economic Impact** is economic effect or benefits that this company and it's operations will have on the community and state economy measured by total number of jobs, payroll and created output.

January 6, 2025

Tom Burns  
Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4th Floor  
Las Vegas, NV 89119

Dear Director Burns,

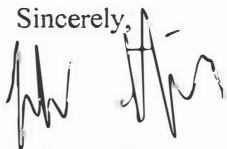
The Northern Nevada Development Authority (NNDA) is pleased to provide this letter of support for Orbinox America Inc.'s application for the Sales and Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. We believe that Orbinox America Inc.'s proposed project to establish operations in Douglas County, Nevada, will have significant positive impacts on both the county and the Northern Nevada region.

The company conducted thorough due diligence to identify the best state for their operations and determined that Nevada offers the ideal environment due to its business-friendly climate, stable and reliable utility services, and incentive programs.

Orbinox America Inc. plans to invest \$2 million in highly specialized equipment and create six new skilled labor positions with an average wage of \$32.52 per hour. This investment will not only contribute to developing a skilled manufacturing workforce but also strengthen the region's economic base and enhance Northern Nevada's reputation as a manufacturing hub.

NNDA respectfully requests that the application be considered by the Governor's Office of Economic Development Board for review and approval.

Sincerely,



Jeff Sutich, Executive Director

Tom Burns, Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4th Floor  
Las Vegas, NV 89119

December 4, 2024

**Nevada Governor's Office of Economic Development – Tax Abatement Application**

Dear Mr. Burns,

Orbinox, a global leader in knife gate valve manufacturing, has over 50 years of expertise in designing, producing, and marketing industrial valves, slide gates, dampers, and hydraulic works solutions. Headquartered in Spain, the company operates six manufacturing plants, 12 sales offices, and an extensive distributor network, ensuring a presence in over 70 countries across Europe, the Americas, and Asia.

In North America, Orbinox has its regional head office in Laval, Quebec, Canada, and operates a distribution center in Amory, Mississippi. The Amory location plays a vital role in serving and growing our business in the Eastern U.S. while continuing to create job opportunities in the region.


To further strengthen our presence in the U.S. market, we are expanding with a new facility in Minden, Nevada. This second location is a key step in our growth strategy, enabling us to better serve the Western U.S. and supporting our continued integration with the AVK Group, which has been a cornerstone since our integration with them in 2011.

The Minden expansion will initially create approximately six new jobs, with more to follow as we execute our business plan. These positions are expected to be filled locally, contributing to the economic development of Douglas County. If all goes according to plan, we anticipate occupying the new facility in February 2026.

As proud members of the AVK family, we are excited to establish operations in Nevada and contribute to AVK's expansion in Minden.

Attached with this letter is our application for the tax abatements offered by the State of Nevada GOED. Should you have any questions or require additional information, please feel free to contact me at any time.

Sincerely,



Marco Giambagno  
President, Orbinox America Inc.  
Direct phone: +1-438-920-8619  
[m.giambagno@orbinox.com](mailto:m.giambagno@orbinox.com)

Sharla Hales  
Mark Gardner  
Wesley Rice  
Danny Tarkanian  
Nathan Tolbert



1594 Esmeralda Avenue  
Minden, Nevada 89423

[www.douglascountynv.gov](http://www.douglascountynv.gov)  
775-782-9821

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## BOARD OF COUNTY COMMISSIONERS

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January 16, 2025

Melanie Sheldon  
Senior Director of Business Development  
Governor's Office of Economic Development  
555 E. Washington Avenue, Suite 5400  
Las Vegas, NV 89101

Re: Sales & Use Tax Abatement, Modified Tax Abatement and Personal Property Tax Abatement for Orbinox America Inc.

Dear Ms. Sheldon:

At the January 16, 2025 meeting, the Douglas County Board of Commissioners took action to acknowledge and support the incentive request submitted by Orbinox America Inc.

The company is requesting State allowed incentives for Sales & Use Tax Abatement, Personal Property Tax Abatement and Modified Business Tax Abatement.

Douglas County supports Orbinox America Inc. in its application for the allowed State tax incentives and requests the Governor's Office of Economic Development Board act favorably upon the request.

If you have any additional questions regarding this letter, please contact Nikki Rudelbach, Economic Vitality Manager, at (775) 782-6268 or by e-mail at [nrudelbach@douglasnv.us](mailto:nrudelbach@douglasnv.us).

Sincerely,

A handwritten signature in black ink that reads 'Sharla Hales'. The signature is written in a cursive, flowing style.

Sharla Hales, Chair  
Douglas County Commission

XC: Northern Nevada Development Authority  
Nikki Rudelbach, Economic Vitality Manager



# Incentive Application

Company Name: Orbinox America Inc.  
 Date of Application: December 4, 2024

Company is an / a: (check one)  
 New location in Nevada  
 Expansion of a Nevada company

## Section 1 - Type of Incentives

Please check all that the company is applying for on this application:

- Sales & Use Tax Abatement
- Modified Business Tax Abatement
- Personal Property Tax Abatement
- Sales & Use Tax Deferral
- Recycling Real Property Tax Abatement
- Other: \_\_\_\_\_

## Section 2 - Corporate Information

|                                                                                                            |                                                                          |                                           |                       |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------|-----------------------|
| COMPANY NAME (Legal name under which business will be transacted in Nevada)<br><u>Orbinox America Inc.</u> |                                                                          | FEDERAL TAX ID #<br><u>99-3636997</u>     |                       |
| CORPORATE ADDRESS<br><u>2050 Bd Dagenais O</u>                                                             | CITY / TOWN<br><u>Laval</u>                                              | STATE / PROVINCE<br><u>Quebec, Canada</u> | ZIP<br><u>H7L 5W2</u> |
| MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above)<br><u>2155 Meridian Blvd.</u>               | CITY / TOWN<br><u>Minden</u>                                             | STATE / PROVINCE<br><u>NV</u>             | ZIP<br><u>89423</u>   |
| TELEPHONE NUMBER<br><u>775-552-1400 or 438-920-8619</u>                                                    | WEBSITE<br><a href="https://www.orbinox.us/">https://www.orbinox.us/</a> |                                           |                       |
| COMPANY CONTACT NAME<br><u>Marco Giambagno</u>                                                             | COMPANY CONTACT TITLE<br><u>President</u>                                |                                           |                       |
| E-MAIL ADDRESS<br><a href="mailto:m.giambagno@orbinox.com">m.giambagno@orbinox.com</a>                     | PREFERRED PHONE NUMBER<br><u>438-920-8619</u>                            |                                           |                       |

Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development?  Yes  No  
 If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

## Section 3 - Program Requirements

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.
- New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter following quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.
- In both urban and rural areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly wage.

Note: Criteria is different depending on whether the business is in a county where the population is 100,000 or more or a city where the population is 60,000 or more "urban" area), or if the business is in a county where the population is less than 100,000 or a city where the population is less than 60,000 (i.e., "rural" area).

## Section 4 - Nevada Facility

Type of Facility:

- Headquarters
- Technology
- Back Office Operations
- Research & Development / Intellectual Property
- Service Provider
- Distribution / Fulfillment
- Manufacturing
- Other: \_\_\_\_\_

|                                                                                                                                                              |                                                                              |                                 |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------|---------------------|
| PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA<br><u>98%</u>                                              | EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR)<br><u>Feb-2026</u> |                                 |                     |
| NAICS CODE / SIC<br><u>332911</u>                                                                                                                            | INDUSTRY TYPE<br><u>Valve manufacturing</u>                                  |                                 |                     |
| DESCRIPTION OF COMPANY'S NEVADA OPERATIONS<br><u>Manufacturing of water valves for fresh water and waste water applications and industrial applications.</u> |                                                                              |                                 |                     |
| PROPOSED / ACTUAL NEVADA FACILITY ADDRESS<br><u>2160 Meridian Blvd. (No address assigned yet)</u>                                                            | CITY / TOWN<br><u>Minden</u>                                                 | COUNTY<br><u>Douglas County</u> | ZIP<br><u>89423</u> |
| WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP?<br><u>None.</u>                               |                                                                              |                                 |                     |

**Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)**

Check the applicable box when form has been completed.

- 5 (A)  Equipment List
- 5 (B)  Employment Schedule
- 5 (C)  Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.
- 5 (D)  Company Information Form

**Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)**

| New Operations / Start Up - Plans Over the Next <u>Ten</u> Years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Expansions - Plans Over the Next <u>10</u> Years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Part 1. Are you currently/planning on leasing space in Nevada? <u>Yes</u></p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? <u>2026</u></p> <p>How much space (sq. ft.)? <u>41,000</u></p> <p>Annual lease cost of space: <u>\$520,000.00</u></p> <p>Do you plan on making building tenant improvements? <u>Yes</u></p> <p><b>If No, skip to Part 2. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? <u>Jul-2028</u></p> <hr/> <p>Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? <u>No</u></p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>How much space (sq. ft.)? _____</p> <p>Do you plan on making building improvements? <u>Yes</u></p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? <u>No</u></p> <p><b>If Yes *, continue below:</b></p> <p>When to break ground, if building (month, year)? _____</p> <p>Estimated completion date, if building (month, year): _____</p> <p>How much space (sq. ft.)? _____</p> | <p>Part 1. Are you currently leasing space in Nevada? _____</p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? _____</p> <p>How much space (sq. ft.)? _____</p> <p>Annual lease cost at current space: _____</p> <p>Due to expansion, will you lease additional space? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>Expanding at the current facility or a new facility? _____</p> <p>What year(s)? _____</p> <p>How much expanded space (sq. ft.)? _____</p> <p>Annual lease cost of expanded space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 2. Are you currently operating at an owner occupied building in Nevada? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>How much space (sq. ft.)? _____</p> <p>Current assessed value of real property? _____</p> <p>Due to expansion, will you be making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 3. Do you plan on building or buying a new facility in Nevada? _____</p> <p><b>If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>When to break ground, if building (month, year)? _____</p> <p>Estimated completion date, if building (month, year): _____</p> <p>How much space (sq. ft.)? _____</p> |
| <p><b>* Please complete Section 7 - Capital Investment for New Operations / Startup.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <p><b>* Please complete Section 7 - Capital Investment for Expansions below.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):  
 The facility will be a warehouse and manufacturing water valves for domestic and industrial applications. It will eventually bring approximately 25 jobs to Nevada.

**Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)**

| New Operations / Start Up                                                    | Expansions                                                                         |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| How much capital investment is planned? (Breakout below):                    | How much capital investment is planned? (Breakout below):                          |
| Building Purchase (if buying): <u>    \$0    </u>                            | Building Purchase (if buying): _____                                               |
| Building Costs (if building / making improvements): <u>    \$725,000    </u> | Building Costs (if building / making improvements): _____                          |
| Land: <u>    \$0    </u>                                                     | Land: _____                                                                        |
| Equipment Cost: <u>    \$2,053,700    </u>                                   | Equipment Cost: _____                                                              |
| <b>Total:</b> <u>    \$2,778,700    </u>                                     | <b>Total:</b> _____                                                                |
|                                                                              | Is the equipment purchase for replacement<br>of existing equipment? _____          |
|                                                                              | Current assessed value of personal property in NV: _____                           |
|                                                                              | (Must <b>attach</b> the most recent assessment from the County Assessor's Office.) |

**Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)**

| New Operations / Start Up                                                                                                                  | Expansions                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: <u>    6    </u> | How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: _____ |
| Average hourly wage of these <u>new</u> employees: <u>    \$32.52    </u>                                                                  | Average hourly wage of these <u>new</u> employees: _____                                                                             |
|                                                                                                                                            | How many FTE employees prior to expansion?: _____                                                                                    |
|                                                                                                                                            | Average hourly wage of these <u>existing</u> employees: _____                                                                        |
|                                                                                                                                            | Total number of employees after expansion: _____                                                                                     |

\* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- |                                                           |                                                      |                                                                               |                                           |
|-----------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------|
| <input checked="" type="checkbox"/> Overtime              | <input checked="" type="checkbox"/> Merit increases  | <input checked="" type="checkbox"/> Tuition assistance                        | <input checked="" type="checkbox"/> Bonus |
| <input checked="" type="checkbox"/> PTO / Sick / Vacation | <input checked="" type="checkbox"/> COLA adjustments | <input checked="" type="checkbox"/> Retirement Plan / Profit Sharing / 401(k) | <input type="checkbox"/> Other: _____     |

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

**Section 9 - Employee Health Insurance Benefit Program**

Is health insurance for employees and is an option for dependents offered?:  Yes (**attach health plan and quote or invoice**)  No

Package includes (check all that apply):

- Medical       Vision       Dental       Other:     Life and Disability

Qualified after (check one):

- Upon employment       Three months after hire date       Six months after hire date       Other:     Two months after hire date

| Health Insurance Costs:                                                                    | Percentage of health insurance premium by (min 65%): |
|--------------------------------------------------------------------------------------------|------------------------------------------------------|
| Plan Type: <u>    PPO with HAS    </u>                                                     |                                                      |
| Employer Contribution (annual premium per employee): <u>    \$ 15,498.00    </u>           | Company: <u>    100%    </u>                         |
| Employee Contribution (annual premium per employee) <u>    \$ -    </u>                    | Employee: <u>    0%    </u>                          |
| <b>Total Annual Premium:</b> <u>    Premium effective January 1, 2025 \$ 15,498.00    </u> |                                                      |

**Section 10 - Certification**

I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

*Marco Giambagno*

\_\_\_\_\_  
Name of person authorized for signature



\_\_\_\_\_  
Signature

*President*

\_\_\_\_\_  
Title

*December 4, 2024*

\_\_\_\_\_  
Date

**Nevada Governor's Office of Economic Development**

1 State of Nevada Way, 4th Floor, Las Vegas, Nevada 89119 • 702.486.2700 • [www.goed.nv.gov](http://www.goed.nv.gov)



# Site Selection Factors

Company Name: Orbinox America Inc.

County: Douglas

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## Section I - Site Selection Ratings

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Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

|                                      |          |                                             |          |
|--------------------------------------|----------|---------------------------------------------|----------|
| Availability of qualified workforce: | <u>5</u> | Transportation infrastructure:              | <u>5</u> |
| Labor costs:                         | <u>5</u> | Transportation costs:                       | <u>5</u> |
| Real estate availability:            | <u>3</u> | State and local tax structure:              | <u>5</u> |
| Real estate costs:                   | <u>5</u> | State and local incentives:                 | <u>5</u> |
| Utility infrastructure:              | <u>5</u> | Business permitting & regulatory structure: | <u>4</u> |
| Utility costs:                       | <u>5</u> | Access to higher education resources:       | <u>4</u> |

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Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):

The abatement program plays a crucial role in our decision to build a new warehouse in Douglas County, Nevada. By providing tax discounts, the program allows us to allocate more resources towards the initial phase of starting our operations. This financial relief not only reduces our upfront costs but also enhances our ability to invest in essential operational aspects such as infrastructure, technology, and workforce development. Consequently, the abatement program supports our long-term growth and sustainability in Douglas County, making it a strategic and economically sound choice for Orbinox.

## 5(A) Capital Equipment List

Company Name: Orbinox America Inc.

County: Douglas

### Section I - Capital Equipment List

Directions: Please provide an estimated list of the equipment [columns (a) through (c)] which the company intends to purchase over the two-year allowable period. For example, if the effective date of new / expanded operations begins April 1, 2015, the two-year period would be until March 31, 2017. Add an additional page if needed. For guidelines on classifying equipment, visit:

tax.nv.gov/LocalGovt/PolicyPub/ArchiveFiles/Personal\_Property\_Manuals. Attach this form to the Incentives Application.

| (a)<br>Equipment Name/Description                                       | (b)<br># of Units | (c)<br>Price per Unit | (d)<br>Total Cost     |
|-------------------------------------------------------------------------|-------------------|-----------------------|-----------------------|
| Bridge crane with hoist, 5T with track                                  | 2                 | \$250,000             | \$500,000             |
| Forklift truck (electric)                                               | 1                 | \$58,000              | \$58,000              |
| Stacker lift truck (powered)                                            | 1                 | \$45,000              | \$45,000              |
| Saw                                                                     | 1                 | \$11,500.00           | \$11,500.00           |
| Lathe                                                                   | 1                 | \$20,000.00           | \$20,000.00           |
| Glue machine                                                            | 1                 | \$17,500.00           | \$17,500.00           |
| Drill & tapping machine                                                 | 1                 | \$22,000.00           | \$22,000.00           |
| JIB cranes with hoist 1000 kg                                           | 5                 | \$11,000.00           | \$55,000.00           |
| Big Ass Fans, 36'                                                       | 2                 | \$25,000.00           | \$50,000.00           |
| Backup power generator                                                  | 1                 | \$175,000.00          | \$175,000.00          |
| Pallet jack electric                                                    | 1                 | \$10,000.00           | \$10,000              |
| Office equipment (chairs, desks, conference table, partitions)          | 9                 | \$3,800.00            | \$34,200              |
| Surveillance cameras and alarm                                          | 1                 | \$25,000.00           | \$25,000              |
| Racking (set)                                                           | 1                 | \$90,000.00           | \$90,000              |
| Shelving units and cabinets for smaller items (lot)                     | 1                 | \$8,000               | \$8,000               |
| Bins and containers (lot)                                               | 1                 | \$7,500               | \$7,500               |
| Conveyor belts                                                          | 2                 | \$25,000              | \$25,000              |
| Hoists (lot)                                                            | 1                 | \$10,000.00           | \$10,000              |
| Hand truck and dollies                                                  | 2                 | \$2,000.00            | \$4,000.00            |
| PPE (lot)                                                               | 1                 | \$3,000               | \$3,000               |
| Fire extinguishers (lot as required per code)                           | 1                 | \$3,000               | \$3,000               |
| Access control systems (Key cards, biometric readers)                   | 1                 | \$20,000.00           | \$20,000.00           |
| Intercom equipment                                                      | 1                 | \$10,000.00           | \$10,000.00           |
| Computers and printers                                                  | 1                 | \$30,000.00           | \$30,000.00           |
| WMS Warehouse management system (software, barcode, scanners, labeling) | 1                 | \$80,000.00           | \$80,000.00           |
| Wrapping and packaging equipment                                        | 1                 | \$60,000.00           | \$60,000.00           |
| Shipping equip (loading dock material, bumpers, scales, carts)          | 1                 | \$20,000.00           | \$20,000.00           |
| Waste management bins and recycling (lot) - Internal                    | 1                 | \$2,000.00            | \$2,000.00            |
| Valve test/pressure benches for KGV                                     | 2                 | \$100,000.00          | \$200,000.00          |
| Assembly benches (Including small tools)                                | 6                 | \$8,000.00            | \$48,000.00           |
| IT infrastructure (Network, server room, Back up power supply)          | 1                 | \$80,000.00           | \$80,000.00           |
| LCD monitor for Board room + furniture                                  | 1                 | \$20,000.00           | \$20,000.00           |
| Semi-automated sandblast booth                                          | 1                 | \$250,000.00          | \$250,000.00          |
| Paint booth                                                             | 1                 | \$60,000.00           | \$60,000.00           |
|                                                                         |                   |                       |                       |
|                                                                         |                   |                       |                       |
|                                                                         |                   |                       |                       |
| <b>Total</b>                                                            |                   |                       | <b>\$2,053,700.00</b> |

Is any of this equipment\* to be acquired under an operating lease?

Yes

No

\*Certain lease hold equipment does not qualify for tax abatements

## 5(B) Employment Schedule

Company Name: Orbinox America Inc.

County: Douglas

### Section 1 - Full-Time Equivalent (FTE) Employees

Directions: Please provide an estimated list of full time employees [columns (a) through (d)] that will be hired and employed by the company by the end of the first eighth quarter of new / expanded operations. For example, if the effective date of new / expanded operations is April 1, 2015, the date would fall in Q2, 2015. The end of the first eighth quarter would be the last day of Q2, 2017 (i.e., June 30, 2017). Attach this form to the Incentives Application. A qualified employee must be employed at the site of a qualified project, scheduled to work an average minimum of 30 per week, if offered coverage under a plan of health insurance provided by his or her employer, is eligible for health care coverage, and whose position of a "primary job" as set forth in NAC 360.474.

Please use the Bureau of Labor Statistics Standard Occupational Classification System (SOC) link to populate section (b): [https://www.bls.gov/soc/2018/major\\_groups.htm#11-0000](https://www.bls.gov/soc/2018/major_groups.htm#11-0000)

| (a)<br>New Hire Position Title/Description                 | (b)<br>Position SOC Code | (c)<br>Number of Positions | (d)<br>Average Hourly Wage | (e)<br>US Bureau of Labor Statistics Average Hourly Wage | (f)<br>Average Weekly Hours | (g)<br>Annual Wage per Position | (h)<br>Total Annual Wages |
|------------------------------------------------------------|--------------------------|----------------------------|----------------------------|----------------------------------------------------------|-----------------------------|---------------------------------|---------------------------|
| General and Operations Managers                            | 11-1021                  | 1                          | \$55.85                    | \$62.94                                                  | 40                          | \$116,168.00                    | \$116,168.00              |
| First-Line Supervisors of Production and Operating Workers | 51-1011                  | 1                          | \$37.85                    | \$41.53                                                  | 40                          | \$78,728.00                     | \$78,728.00               |
| Miscellaneous Assemblers and Fabricators                   | 51-2098                  | 2                          | \$23.85                    | \$21.79                                                  | 40                          | \$49,608.00                     | \$99,216.00               |
| Inspectors, Testers, Sorters, Samplers, and Weighers       | 51-9061                  | 1                          | \$27.85                    | \$29.46                                                  | 40                          | \$57,928.00                     | \$57,928.00               |
| Administrative Services Managers                           | 11-3012                  | 1                          | \$25.85                    | \$39.98                                                  | 40                          | \$53,768.00                     | \$53,768.00               |
| <b>TOTAL</b>                                               |                          | <b>6</b>                   | <b>\$32.52</b>             | <b>\$36.25</b>                                           |                             |                                 | <b>\$405,808.00</b>       |

### Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete columns (b) and (c). These estimates are used for state economic impact and net tax revenue analysis that this agency is required to report. The company will not be required to reach these estimated levels of employment. **Please enter the estimated new full time employees on a year by year basis (not cumulative)**

| (a)<br>Year | (b)<br>Number of New FTE(s) | (c)<br>Average Hourly Wage | (d)<br>Payroll |
|-------------|-----------------------------|----------------------------|----------------|
| 3-Year      | 8                           | \$32.52                    | \$541,132.80   |
| 4-Year      | 9                           | \$32.52                    | \$608,774.40   |
| 5-Year      | 11                          | \$32.52                    | \$744,057.60   |

\* Column (e) determines if wage is commensurate to current wage ranges in the region the company plans to locate/is located. For these purposes the mean average hourly wage for the location has been used.

U = Unknown / data set for region is not currently available.

**Source: Lighcast™ county wages based on the Bureau of Labor Statistics Occupational Employment and Wage Statistics program and county-level administrative wage data.**

# 5(C) Evaluation of Health Plans Offered by Companies

Company Name: Orbinox America Inc. County: Douglas

Total Number of Full-Time Employees: 6  
 Average Hourly Wage per Employee \$32.52  
 Average Annual Wage per Employee (implied) \$67,634.67

**COST OF HELATH INSURANCE**

Annual Health Insurance Premium Cost: \$ 15,498.00  
 Percentage of Premium Covered by:  
 Company 100%  
 Employee 0%

**HEALTH INSURANCE PLANS:**

**Base Health Insurance Plan\*:** Anthem HSA

Deductible - per employee \$ 3,300  
 Coinsurance 100%(plan coverage) / 00%  
 Out-of-Pocket Maximum per employee \$ 3,300

**Additional Health Insurance Plan\*:** Anthem PPO

Deductible - per employee \$ 1,500  
 Coinsurance 80%/20%  
 Out-of-Pocket Maximum per employee \$ 6,000

**Additional Health Insurance Plan\*:**

Deductible - per employee \$ -  
 Coinsurance 0% / 0%  
 Out-of-Pocket Maximum per employee \$ -

\*Note: *Please list only "In Network" for deducatable and out of the pocket amounts .*

**Generalized Criteria for Essential Health Benefits (EHB)**

*[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]*

|                                                              |         |     |
|--------------------------------------------------------------|---------|-----|
| Covered employee's premium not to exceed 9.5% of annual wage | 0.0%    | MEC |
| Annual Out-of-Pocket Maximum not to exceed \$9,200 (2025)    | \$6,000 | MEC |

Minimum essential health benefits covered (Company offers PPO):

- (A) Ambulatory patient services
- (B) Emergency services
- (C) Hospitalization
- (D) Maternity and newborn care
- (E) Mental health/substance use disorder/behavioral health treatment
- (F) Prescription drugs
- (G) Rehabilitative and habilitative services and devices
- (H) Laboratory services
- (I) Preventive and wellness services and chronic disease management
- (J) Pediatric services, including oral and vision care

No Annual Limits on Essential Health Benefits

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached a qualified plan with information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

Marco Giambagno  
 Name of person authorized for signature

  
 Signature

President  
 Title

4-Dec-24  
 Date

## 5(D) Paid Family and Medical Leave (PFML)

Company Name: Orbinox America Inc.

County: Douglas County

*After October 1, 2023, if the business will have at least 50 full-time employees on the payroll of the business by the eighth calendar quarter following the calendar quarter in which the abatement becomes effective the business, by the earlier of the eighth calendar quarter following the calendar quarter in which the abatement becomes effective or the date on which the business has at least 50 full-time employees on the payroll of the business, has a policy for paid family and medical leave and agrees that all employees who have been employed by the business for at least 1 year will be eligible for at least 12 weeks of paid family and medical leave at a rate of at least 55 percent of the regular wage of the employee.*

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that the Applicant will meet this threshold for PFML.

**Marco Giambagno**

Name of person authorized for signature



Signature

**President**

Title

**4-Dec-24**

Date

## 5(D) Company Information

Company Name: Orbinox America Inc.

County: Douglas

### Section 1 - Company Interest List

Directions: Please provide a detailed list of owners and/or members of the company. *The Governor's Office of Economic Development strives to maintain the highest standards of integrity, and it is vital that the public be confident of our commitment. Accordingly, any conflict or appearance of a conflict must be avoided. To maintain our integrity and credibility, the applicant is required to provide a detailed list of owners, members, equity holders and Board members of the company.*

| (a)<br>Name                     | (b)<br>Title                                    |
|---------------------------------|-------------------------------------------------|
| Marco Giambagno                 | President, Board Member of Orbinox America Inc. |
| Joseba Azurmendi Zabaleta       | Board Member of Orbinox America Inc.            |
| Ricardo Ireneo Iturrioz Arregui | Board Member of Orbinox America Inc.            |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |
|                                 |                                                 |

### Section 2 - Company Affiliates and/or Subsidiaries

Are there any subsidiary or affiliate companies sharing tax liability with the applicant company? No  Yes

#### If Yes, continue below:

Directions: In order to include affiliates/subsidiaries, under the exemption letter, they must to be added to the Contract. Per standard practice GOED requires a corporate schematic to understand the exact relationships between the companies. Please populate the below table to show the exact relationships between the companies and include:

1. The names as they would read on the tax exemption letter.
2. Which entity(ies) will do the hiring?
3. Which entity(ies) will be purchasing the equipment?

| Name of Subsidiary or Affiliate Entity, Role and Legal Control Relationship |
|-----------------------------------------------------------------------------|
|                                                                             |
|                                                                             |
|                                                                             |

Please include any additional details below:

## Entity Information

### Entity Information

**Entity Name:**

ORBINOX AMERICA INC.

**Entity Number:**

E41230172024-8

**Entity Type:**

Domestic Corporation (78)

**Entity Status:**

Active

**Formation Date:**

06/13/2024

**NV Business ID:**

NV20243140463

**Termination Date:**

**Annual Report Due Date:**

6/30/2025