TIM PARKER, C.F.A. PROPERTY APPRAISER **PUTNAM COUNTY** PO BOX 1920 PALATKA, FL 32178-1920

201**9**

Tangible Personal Property Tax Return

Confidential §§193.074 F.S.
As Required by §§193.052 & 193.062 F.S. Return to
County Property Appraiser By April 1 to Avoid Penalties

State of Florida, County of

Business Name (DBA - Doing Business As) and Mailing Address

ACCT -		E CLOSED	
OWNER - BUSINESS -		Federal I	Employer Iden. No
ADDRESS -			l Security Number
f name and address is incorrect make necessary corrections		NAICS/S	IC
This return subject to audit with all records kept by you.	5. Date you began business in this c	ounty: Fisca	al year:
Incomplete entries are subject to penalties.	5a. Although my fiscal year ended pricadditions and deletions through D	or to December 31 of the past calendar ecember 31. YesNo	year, this return reflects property
Please give name and telephone number of Owner or Person in charge of this Business. Name	6. Describe Type or Nature of Your E	Business:	
Corporate Name	7. Trade Level (Check as many as a	pply) Retail Wholesale I	Manufacturing □
Actual Physical Location of Property for Which this Return is Filed (Street Address - Not P.O. Box)	Professional Service Ag	griculture ☐ Leasing/Rental ☐ Othe roperty Return in this county last Year?	r 🗅
Is your business or farm located within the incorporated limits of a City? Yes No What City?	If so, under what name and where	9?	
4. Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes No	9. Former owner of the Business:		
Please Show name Exactly as it Appeared on Your most recent Personal Property Tax Bill or	9a. If Business sold, to whom?		
Other Current Tax Return.	Date Sold		
Personal Property Summary THIS IS A SUMMARY SCHEDULE ONLY. The Schedules on the REVERSE SIDE must be completed in detail and TOTALS entered below. ATTACH ITEMIZED LIST or DEPRECIATION SCHEDULE showing Original Cost & Date of Acquisition.	Taxpayer's Estimate of Fair Market Value	Original Installed Cost	Appraiser's Use only
10. Office Furniture & Office Machines & Library			
11. EDP Equipment, Computers, Word Processors			
12. Store, Bar & Lounge, and Restaurant Furniture & Equipment, Etc.			
13. Machinery and Manufacturing Equipment			
14. Farm, Grove, and Dairy Equipment			
15. Professional, Medical, Dental & Laboratory Equipment			
16. Hotel, Motel, & Apartment Complex			
16a. Rental Units - Stove, Refrig., Furniture, Drapes & Appliances			
17. Mobile Home Attachments (Carport, Utility Bldg., Cabana, Porch, Etc.)			
18. Service Station & Bulk Plant Equipment - Underground Tanks, Lifts, Tools			
19. Signs - Billboard, Pole, Wall, Portable, Directional, Etc.			
20. Leasehold improvements must be grouped by type, year of installation and description			
21. Pollution Control Equipment			
22. Equipment owned by you but rented, leased or held by others			
23. Supplies - Not Held for Resale			
24. Other - Please Specify			
TOTAL PERSONAL PROPERTY			
panying schedules and statements and that the facts stated in them are true. If prepared by someone other than the taxpayer, the preparer signing this return certifies that this declara-	LESS EXEMPTION: () WIDOW () TOTAL DISABILITY () OTHE Taxable value		
			Donoltu
DATE TITLE	Deputy		Penalty
SIGNED	Please sign and date you appraiser's office by Apr		
(TAXPAYER) SIGNED	by the appraiser's office.	ıı ı, unsiyned returns ca	iniot be accepted
ADDRESS	Notice: If you are entitled		s or disability
	exemption on personal properties of the consult appraiser.		

Page 2 Tan	gible Persona	I Property	/ Tax Sched	dules (E	nte	er Total	s on Page	1)							
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GENERAL INSTRUCTIONS

Complete this Personal Property Tax Return in accordance with the instructions provided herein as your declaration of personal property situated in this county. If any schedule has insufficient space, attach a separate sheet. Please print or type except for signature.

Social security numbers are used by the Florida property appraisers as identifiers for the administration of Florida's property taxes. Social security numbers obtained for tax administration purposes are confidential under sections 119.071 and 192.0105, Florida Statutes, and not subject to disclosure as public records.

WHAT TO REPORT ON THIS RETURN:

- 1. Tangible Personal Property include all goods, chattels, and other articles of value (but not certain vehicles) capable of manual possession and whose chief value is intrinsic to the article itself.
- 2. Items of inventory held for <u>lease</u> to customers in the ordinary course of business, rather than for sale, shall be deemed inventory only prior to the initial lease of such items and MUST be reported after their initial lease or rental as equipment and/or furniture or fixtures.
- 3. ALL FULLY DEPRECIATED ITEMS MUST BE REPORTED AT ORIGINAL COST WHETHER WRITTEN OFF OR NOT.
- _____4. Property personally owned, but used in the business must be reported.

DO NOT INCLUDE:

- 1. Intangible Personal Property that is, money, all evidences of debt owed to the taxpayer, all evidence of ownership in a corporation, etc.
- 2. Household Goods such as wearing apparel, appliances, furniture, and other items ordinarily found in the home and used for the comfort of the owner and his family, and not used for commercial purposes.
- 3. Automobiles, Trucks, and Other Licensed Vehicles These are not taxable as personal property. (EXCEPTION: The equipment, on certain vehicles, is taxable as personal property and must be reported. Example-power cranes, air compressors, and other equipment designed as a tool rather than primarily as a hauling vehicle.)
- 4. Inventory Those chattels consisting of items commonly referred to as goods, wares, and merchandise which are held for sale or lease to customers in the ordinary course of business.

VALUATION OF PERSONAL PROPERTY:

All property located in this county as of January 1 must be reported at 100 % of the original total cost. Include <u>sales tax</u>, transportation, handling, and installation charges if incurred. Report the total cost of all assets.

ADJUSTMENTS TO VALUES - TAXPAYER'S ESTIMATE OF FAIR MARKET VALUE:

Enter only UNADJUSTED figures in areas calling for Original Cost. However, Florida law provides that the taxpayer shall also provide an estimate of the current fair market value of the property. An adjustment is a variation from purchase price paid. Adjusted figures MUST be explained on an attached supplemental schedule. Such schedules are considered part of the return.

LOCATION OF PERSONAL PROPERTY:

With the exception noted in the following paragraph, a SEPARATE personal property return must be filed for each location in the county. Additional forms will be mailed on request; contact your county property appraiser's office.

Owners of vending machines, LP/Propane tanks and similar free standing property at many locations may submit a single schedule in lieu of individual property statements, but may be required by the Property Appraiser to provide a list of site addresses. Owners that previously reported on a DR-405E or other owners of a similarly integrated property may submit a single schedule.

SPECIFIC INSTRUCTIONS

In the appropriate schedule list the <u>original installed cost</u> for assets of your business. Assets in each schedule must be grouped by year of acquisition.

The figure you enter as "original cost" must include the total original installed cost of your equipment, before any allowance for depreciation. Include sales tax, freight-in, handling, and installation costs. If a trade-in was deducted from the invoice price, enter the invoice price.

Add back investment credits taken for federal income tax purposes if those were deducted from the original cost. INCLUDE ALL FULLY DEPRECIATED ITEMS AT ORIGINAL COST, WHETHER WRITTEN OFF OR NOT.

If you own equipment that is out on a loan, rental or lease basis to others, report it on the appropriate schedule and enter the totals on Line 22.

List each item of tangible personal property separately in the appropriate schedule except for "classes" of personal property. A class is defined as items which are SUBSTANTIALLY similar in function, use, and age. Do not use the terms "VARIOUS" or "SAME AS LAST YEAR". This is inadequate reporting and may subject you to penalties for <u>FAILURE TO FILE</u>.

List all items of furniture and fixtures, all machinery and equipment, supplies, and certain types of equipment attached to mobile homes. All expensed items must be entered at original cost.

For each item, report your estimate of the current fair market value of the property and your estimate of the condition of that item (Good, Average, Poor). All expensed items must be entered at original installed cost.

Line 14 - Farm, Grove, and Dairy Equipment:

List all types of agricultural equipment you owned as of January
1. Describe property by type, manufacturer, model number, and year
acquired. The following is a partial list of the types of equipment which are
to be reported: bulldozers, draglines, mowers, balers, tractors, all types
of dairy equipment, pumps, irrigation pipe - show feet of main line and
sprinklers, hand and power sprayers, heaters, discs, fertilizer distributors,
etc.

Line 16, 16a - Hotel, Motel, Apartment & Rental Units (Household Goods):

List all household goods, i.e. furniture, appliances and equipment used in rental or other commercial property. Both residents and non-residents must report if house, condo, apartment, etc. is rented at any time during the year.

Line 17 - Mobile Home Attachments:

For each of the following types of mobile home attachments, enter the number of items of that type which you owned as of January 1, the year of purchase, the size (length X width), and the original installed cost: Awning, Carport, Patio Roof, Trailer Cover, Screened Porch or Room, Cabana, Open Porch, Utility Room, etc.

<u>Line 20 - Leasehold Improvements - i.e., Physical Modifications to Leased Property:</u>

If you have made any improvements (including modifications and additions) to property which you lease, list the original cost of the improvements. Improvement must be grouped by type and year of installation. Leasehold improvement - Carpeting, Paneling, Shelving, Cabinets. etc.

IMPORTANT: ATTACH ITEMIZED LIST OR DEPRECIATION SCHEDULE SHOWING INVENTORY OF INDIVIDUAL IMPROVEMENTS.

Line 23 - Supplies:

Enter the average cost of supplies that are on hand, including expensed supplies, such as stationery and janitorial supplies, linens, silverware, etc. which may not have been recorded separately on your books. Include items which you carry in your inventory account but which do NOT come within the definition of "inventory" subject to exemption. Leased, Loaned, and Rented Equipment:

If you borrow, rent or lease equipment from others complete the schedule by entering the name and address of the owner or lessor and a description of the equipment; year you acquired it; year of manufacture, if known; the rent per month; and the amount it would have originally cost had you purchased the equipment new.

INFORMATION REGARDING THE TAX LAWS OF FLORIDA

§192.042, Florida Statutes - DATE OF ASSESSMENT - Tangible Personal Property on January 1.

§193.062, Florida Statutes - DATES FOR FILING RETURNS - Tangible Personal Property Jan. 1 - Apr. 1.

§193.072, Florida Statutes - PENALTIES - For failure to file a return, 25% of the total tax levied against the property for each year that no return is filed; for filing after the due date, 5% of the total tax levied against the property covered by that return for each year, for each month, or portion thereof, that a return is filed after the due date, but not to exceed 25% of the total tax; for unlisted property, 15% of the tax attributable to the omitted property.

§196.021, Florida Statutes - TAX RETURNS TO SHOW ALL EXEMPTIONS AND CLAIMS - It is the duty of the taxpayer to set forth any legal exemption from taxation to which he may be entitled. The failure to do so shall result in any such exemption being disallowed for that tax year.

§837.06, Florida Statutes - Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in §775.082, §775.083, or §775.084.

R. 11/01

DR-405 R. 11/01

Property Appraiser 1234 Main Street Anywhere, Florida 11111-2222

Tangible Personal Property Tax Return
Confidential §§193.074 F.S.
As Required by §§193.052 & 193.062 F.S. Return to

	County Prope	County Property Appraiser By April 1 to Avoid Penalties	o Avoid Penalties	DESCRIPTION 555 Copier mod 19
	Business Name Mailing Address	State of Fiorida, County of Business As) and Business Name (DBA - Doing Business As) and Mailing Address	Business As) and	
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	Any Business 5678 Main St	5 9	0 0 0 0 0 0 Security Number	Address
	Allover, FL 55555-9890			
If name and address is incorrect make necessary corrections		NAICS/SIC	000000	LINE 10 Enter Applica
This return subject to audit with all records kept by you. Incompile entries are subject to penalties.	 Date you began business in this county: 1976 Although my fiscal year ended prior to December : 	31 of the past cale	Fiscal year: Oct. 1 to Sept. 30 andar year, this return reflects property	DESCRIPTION OF ITE
		cember 31. Yes X No	-	Computer Desk with file
Name Person in charge	Describe Type or Nature of Your Business:	siness: Oalds		Telephone - 2 lines
Corporate Name OUIDUI attiUI UOA Corporate Name OuIDUI attiUI UOA Actival Division I coston of Property for Which this Battern is Elled (Street Address - Not P.O. Box	7. Trade Level (Check as many a	Retail XI Wholesale XI	Manufacturing	
	œ	perty Return in this county last	Yes X No	Can Stolage Capillet
What City?		П		Oak Bookcase
 Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes NoA Please Show name Exactly as it Appeared on Your most recent Personal Property Tax Bill or 	Former owner of the Business: 9a. If Business sold, to whom?	II applicable		Delinio Office Office
Other Current Tax Return.	Date Sold			
PERSONAL PROPERTY SUMMARY THIS IS A SUMMARY SCHEDULE DUX. The Schedules on the BECERSE SIDE must be completed in detail and DEALS controlledow ATTACH ITERATEDLEST or DEPRECIATION SCHEDULE stowing Original Cost & Date of Acquisition.	TAXPAYER'S ESTIMATE OF FAIR MARKET VALUE	ORIGINAL INSTALLED COST	APPRAISER'S USE ONLY	Enter TOTALS on Front - Continue on
10. Office Furniture & Office Machines & Library	840.00	1233.00		DESCRIPTION OF ITE
11. EDP Equipment, Computers, Word Processors	2000.00	4043.00		QQQ Computer
	6840.00	11342.00		DP Printer 600
13. Machinery and Manufacturing Equipment 14. Farm Grove and Dairy Equipment				Mouse
15. Professional, Medical, Dental & Laboratory Equipment				
16. Hotel, Motel, & Apartment Complex				
16a Rental Units - Stove, Refrig., Furniture, Drapes & Appliances				
17. Mobile Home Attachments (Carport, Utility Bldg., Cabana, Porch, Etc.)				TOTALS on Front -
Service Station & Bulk Plant Equipment - Underground Tarks, Lifts, Tools Sinns - Rillhoard Bole, Wall Portable, Directional, Fire				
				5 - Wooden Tables
21. Pollution Control Equipment				3 - Custom made glass r
22. Equipment owned by you but rented, leased or held by others	5000.00	1000.00		
23. Supplies - Not Held for Hesale 24. Other - Please Specify		1000:00		12 - Large display racks
TOTAL PERSONAL PROPERTY	14680.00	25618.00		2 - Cash Registers
Under penalties of perjury, I declare that I have read the foregoing tax return and the accompanying schedules and statements and that the facts stated in them are true. If reconsid the companying schedules and statements are the accompanying schedules and statements are the facts stated in them are true. If reconside the company of the control of the statement	LESS EXEMPTION: () WIDOW (() TOTAL DISABILITY () OTHER) WIDOWER () BLIND		Enter TOTALS on Erent - Continue on
this declaration is based on all information of which he/she has any knowledge. TITLE TATE TA	DEPUTY		PENALTY	LINE 22 EQUIPMENT
Ö	PLEASE SIGN AND DATE	YOUR RETURN, SEND	THE ORIGINAL TO	LEASE NO.
(TAXPAYER)	THE COUNTY APPRAISER'S OFFICE BY APRIL 1, UNSIGNED	R'S OFFICE BY APRIL 1,	UNSIGNED	13 - 4030 Le
(PREPARER)	REI ORNS CANNOI DE A		Alven o Orrice.	
PHONE NO. PREPARER'S I.D. #	NOTICE: IF YOU ARE ENTITLED TO A WIDOWS, WIDOWER'S OH DISABILITY EXEMPTION ON PERSONAL FROMPERTY (NOT ALREADY OF ANGED ON BEANTEED OF THE ADDRAISED OF THE ADDR	TE) CONSULT ABBRAIS	RTY (NOT ALREADY	
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	3 - Custom made glass racks	lass racks	ω	92	180.00	×	1	714.00		\dagger		
	12 - Large display racks	acks	ω	92	500.00	×		700.00		\dagger		
	2 - Cash Registers		ω	92	100.00	×		300.00		$\dagger \dagger$		
	Enter TOTALS on Front - Continue on Separate Sheet if Necessary	inue on Separate Sheet if Ne	essary		6840.00	M	/ \ .≓	11342.00		\bigvee		
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