

Section A -- Business Data

Description of Business: _____

Direct Questions To:

Name: _____
 Address: _____
 City/State/Zip: _____
 Telephone Number: _____
 Fax Number: _____



Form P-1

Assessment Date: October 1, 2018
Return Date: November 1, 2018

Location of Accounting Records:

Type of Ownership: (Check one below:)

Corporation Partnership LLC
 Sole Proprietor Other (Describe) _____

Section B -- Taxable Property Information

#10 - Machinery & Equipment			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		90%	
2016		80%	
2015		70%	
2014		60%	
2013		50%	
2012		40%	
Prior		30%	
Total			

#16 - Furniture, Fixtures & Equipment			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		90%	
2016		80%	
2015		70%	
2014		60%	
2013		50%	
2012		40%	
Prior		30%	
Total			

#16A - Test Equipment & Copiers Fax Machines & Telephone Systems			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		80%	
2016		60%	
2015		40%	
Prior		20%	
Total			

#20 - EDP Equipment ONLY			
Year	Original Cost	% Good	Net Value
2018		90%	
2017		60%	
2016		40%	
2015		20%	
Prior		10%	
Total			

#21 - Telecommunication Equipment (Service Providers Only)			
Excluding cables, conduits, antennae, towers, batteries, generators or any other equipment not deemed technologically advanced by the Assessor			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		80%	
2016		60%	
2015		40%	
Prior		20%	
Total			

#22 - Utility Equipment: Cables, Conduits, Poles, Towers, Mains & Wires			
Year	Original Cost	%	Net Book Value
2018			
2017			
2016			
2015			
2014			
2013			
2012			
Prior			
Total			

DPUC Regulated Utilities Check Here _____

Section B -- Taxable Property Information - continued

#24 - All Other Goods, Chattels & Effects (Including Leasehold Improvements)			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		90%	
2016		80%	
2015		70%	
2014		60%	
2013		50%	
2012		40%	
Prior		30%	
Total			

#24A - Rental Video Tapes			
Year	Original Cost	% Good	Net Value
2018		95%	
2017		80%	
2016		60%	
2015		40%	
Prior		20%	
Total			

#23 - Supplies & Non-Mercantile Inventory		
Manufacturers & Retailers exempt from inventory but not supplies. Use average monthly figures. Be sure to include supplies consumed for your own use as well as any non-mercantile (not for resale) inventory.		
MONTH	SUPPLIES	INVENTORY
October 2017		
November 2017		
December 2017		
January 2018		
February 2018		
March 2018		
April 2018		
May 2018		
June 2018		
July 2018		
August 2018		
September 2018		
TOTAL		
MONTHLY AVERAGE		

Questions:

1. How many employees work in your facilities in Windsor? _____
2. How many square feet does your firm occupy in Windsor? _____

Section C - General Ledger Information

	Balance as of October 1, 2018		
	Cost	Depr.	Net
Machinery & Equipment			
Furniture & Fixtures			
EDP Equipment			
Others			
TOTAL			

	Balance as of October 1, 2017		
	Cost	Depr.	Net

Total cost of fully depreciated assets still in use **but not included with the above balances:** _____

In compliance with the State Freedom of information Commission I hereby request that the information contained in this report be kept confidential and exempt from public disclosure. [] NOT APPLICABLE UNLESS BOX IS CHECKED.

Affidavit

I DO HEREBY declare under penalty of false statement that all sections of this declaration have been completed according to the best of my knowledge, remembrance and belief and is a true statement of all my personal property subject to taxation and that I have not misled the Assessor as to age, quantity and or quality.

Signature

Date:

Please print name here

Phone #