Description of Business:

## Direct Questions To:

Name: $\qquad$
Address: $\qquad$
City/State/Zip: $\qquad$ Telephone Number: $\qquad$
Fax Number: $\qquad$


# WINḊSシOR <br> First in Connecticut. First for its citizens. 

Form P-1
Assessment Date: October 1, 2019 Return Date: November 1, 2019

Type of Ownership: (Check one below:)
Sole Proprietor $\qquad$ Other (Describe) $\qquad$

## Location of Accounting Records:

| \#10-Machinery \& Equipment |  |  |  |
| :---: | :---: | :---: | :---: |
| Year | Original <br> Cost | $\%$ <br> Good | Net <br> Value |
| 2019 |  | $95 \%$ |  |
| 2018 |  | $90 \%$ |  |
| 2017 |  | $80 \%$ |  |
| 2016 |  | $70 \%$ |  |
| 2015 |  | $60 \%$ |  |
| 2014 |  | $50 \%$ |  |
| 2013 |  | $40 \%$ |  |
| Prior |  | $30 \%$ |  |
| Total |  |  |  |

\#16A - Test Equipment \& Copiers Fax Machines \& Telephone Systems

| Fax Machines \& Telephone Systems |  |  |  |
| :---: | :---: | :---: | :---: |
| Year | Original <br> Cost | $\%$ <br> Good | Net <br> Value |
| 2019 |  | $95 \%$ |  |
| 2018 |  | $80 \%$ |  |
| 2017 |  | $60 \%$ |  |
| 2016 |  | $40 \%$ |  |
| Prior |  | $20 \%$ |  |
| 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 <br> Cost | $\%$ <br> Good | Net <br> Value |
| :---: | :---: | :---: | :---: |
| 2019 |  | $95 \%$ |  |
| 2018 |  | $80 \%$ |  |
| 2017 |  | $60 \%$ |  |
| 2016 |  | $40 \%$ |  |
| Prior |  | $20 \%$ |  |
| Total |  |  |  |


| \#16-Furniture, Fixtures \& Equipment |  |  |  |
| :---: | :---: | :---: | :---: |
| Year | Original <br> Cost | $\%$ <br> Good | Net <br> Value |
| 2019 |  | $95 \%$ |  |
| 2018 |  | $90 \%$ |  |
| 2017 |  | $80 \%$ |  |
| 2016 |  | $70 \%$ |  |
| 2015 |  | $60 \%$ |  |
| 2014 |  | $50 \%$ |  |
| 2013 |  | $40 \%$ |  |
| Prior |  | $30 \%$ |  |
| Total |  |  |  |


| \#20 - EDP Equipment ONLY |  |  |  |
| :---: | :---: | :---: | :---: |
| Year | Original <br> Cost | $\%$ <br> Good | Net <br> Value |
| 2019 |  | $90 \%$ |  |
| 2018 |  | $60 \%$ |  |
| 2017 |  | $40 \%$ |  |
| 2016 |  | $20 \%$ |  |
| Prior |  | $10 \%$ |  |
| Total |  |  |  |


| \#22 - Utility Equipment: Cables, Conduits, |
| :---: | :---: | :---: | :---: |
| Poles, Towers, Mains \& Wires |

DPUC Regulated Utilities Check Here

Pursuant to the Freedom of Information Commission this return is confidential and exempt from public disclosure. All information on this return may be subject to audit by the Assessor or his agent.

| \#24 - All Other Goods, Chattels \& Effects |
| :---: | :---: | :---: | :---: |
| (Including Leasehold Improvements) |


| \#24A - Rental Video Tapes |  |  |  |
| :---: | :---: | :---: | :---: |
| Year | Original <br> Cost | $\%$ <br> Good | Net <br> Value |
| 2019 |  | $95 \%$ |  |
| 2018 |  | $80 \%$ |  |
| 2017 |  | $60 \%$ |  |
| 2016 |  | $40 \%$ |  |
| 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 2018 |  |  |
| November 2018 |  |  |
| December 2018 |  |  |
| January 2019 |  |  |
| February 2019 |  |  |
| March 2019 |  |  |
| April 2019 |  |  |
| May 2019 |  |  |
| June 2019 |  |  |
| July 2019 |  |  |
| August 2019 |  |  |
| September 2019 |  |  |
| TOTAL |  |  |
| MONTHLY AVERAGE |  |  |

## Questions:

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

Balance as of October 1, 2018

|  | Cost | Depr. | Net | Cost | Depr. | Net |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Machinery \& Equipment |  |  |  |  |  |  |
| Furniture \& Fixtures |  |  |  |  |  |  |
| EDP Equipment |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |

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:

