



PURCHASING DEPARTMENT

TWELVE EAST 4TH AVENUE, SUITE 106 • ROME, GEORGIA 30161

PHONE: 706.291.5118 • FAX: 706.290.6099 • www.romefloyd.com

Date: 16 February 2015

To: To Whom It May Concern

Request for Quote: Electronic Mail Merge and Mailing of Real Property, Personal Property and Tax Returns. RFQ: 15-0306

Floyd County is requesting quotes from companies with experience with WinGAP text based flat file data to provide merge and mailing services.

All quotes will be submitted on the attached quote sheet. Additional information may be submitted with quote. Quotes are to include all costs including shipping and delivery. Quotes submitted will be FOB Destination (Rome Ga. 30161).

Submissions must include a completed E-Verify Form (Contract Affidavit and Agreement). This form is provided in this RFQ. Companies that do not provide this will not be considered.

Quotes are due no later than **2pm 6 March 2015**. Quotes may be submitted by Email, Fax, US Mail or hand delivered to this office. Fax 706 290-6099 – Email: Graye@floydcountyga.org

Questions regarding this RFQ will be faxed 706 290-6099 or Email: Graye@floydcountyga.org until 25 Feb 2015. This includes requests for onsite visits. These will be by appointment only.

Quotes are to remain valid for a period of 30 days from the date of quote.

Typically award notification will be by email. Tabulations will be posted to the Floyd County Website and the Georgia Procurement Registry in approximately 24hrs after the due date/time.

Terms and Conditions

If payment is made by check, Floyd County will pay invoice(s) within 30 days of receipt of a valid invoice. Supplier may be required to send a current W-9 prior to have a Purchase Order issued. The Issued Purchase Order will serve to initiate the order when payment is going to be made by check.

If payment is made by credit card this information will be provided at the time of order, however, the successful suppliers must agree that no charge will be run until such time as the products have shipped or the service has been provided. A paid receipt or paid invoice will be provided to the card bearer.

BOARD OF COMMISSIONERS

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EVERETT GRAY, CPPB, PURCHASING AGENT

Floyd County RFQ 15-0306

Electronic Mail Merge and Mailing of Real Property, Personal Property and Tax Returns Quote Due not later than 2pm 6 March 2015

General: Floyd County will provide digital tax information to a contractor with experience with WinGAP SQL Data in order to mail merge the data into various official tax form notices. These notices will be mailed out by the contractor to Floyd County Customers. Approximately 85% of our 50,000 customer's zip codes are located in Rome, Silver Creek, Lindale, Armuchee, Coosa, and Cave Spring areas. Floyd County will at the contractors request provide funds for postage once exact numbers are generated. Labor fees will be paid within 30 days of invoice.

Contractors Qualifications and Requirements:

- Contractors will at their own expense provide all labor and materials including paper and envelopes to complete each mailing.
- Contractors will provide a minimum of 2 references from Georgia counties that are currently running WinGAP SQL.
- Contractors must have experience with WinGAP text based, flat file data and be able to convert raw WinGAP SQL data into current Official Georgia Assessment Notice format
- Must be able to furnish digital PDF file with index file of all assessment notices and personal property returns.
- Must be able to mix Black & White with some Colored Text on forms
- Must be able to print account information that will show through the envelope's window but not interfere with mail delivery
- Must be able to include additional page inserts with the forms in envelopes on an as needed basis.
- Envelopes will be provided by the Contractor. Envelopes will be double window of standard business quality. Windows will show the complete 5 line return address and complete 4 line customer address.
- Must provide a completed Contractors Affidavit (AKA E-Verify) IAW O.C.G.A. § 13-10-91(b)(1)

Forms & Envelopes (form examples are attached for reference)

Real Property Notices – Estimated at 50,000 notices annually

Personal Property – Estimated at 5000 notices annually

Tax Returns. Within Tax Returns there are several forms – Total Estimated at 8000 notices annually

- Business, Aircraft, & Marine Personal Property, and Freeport Exemption Inventory

Real Property Requirements: Mail date range is 2nd – 3rd week of May.

Estimated 50,000 assessment notices on 8.5 x 11 & 50,000 window envelopes

Personal Property Requirements: Assessment Notices: Mail date range is 2nd week of June.

Estimated 5,000 assessment notices on 8.5 x 11 and 5,000 window envelopes

Tax Returns: Typical mail date range is the last week of December.

Provide for an estimated 8,000 annual tax returns & 8,000 window envelopes & handle multiple forms

Estimated 1,000 single page inserts

Floyd County RFQ 15-0306 (Quote Page)

Electronic Mail Merge and Mailing of Real Property, Personal Property and Tax Returns

Timeline of Tax information to Mailout and verification

<u>Entity</u>	<u>Turn-around</u>	<u>Task</u>
County:	N/A	Notifies Contractor of data availability on the FTP Server
Contractor:	10 Days	Will provide a (Printed) sampling of selected files for approval (and) Provide the final data version of WinGAP Text Based data
County	1 Day	Review and Approve Data
Contractor	5 Days	Mail Out
Contractor	2 Days	Provide proof of mailing

Agreement

The initial agreement will be for a one (1) year with fixed pricing. This agreement also allows for two (2) annual roll-overs as long as both parties agree under the same terms and conditions. Roll-over agreement must be in writing prior to the expiration of the current agreement. Should postage increase/decrease due to USPS this will not affect the agreement.

Quote

<u>Description</u>	<u>Price</u>
One time Set up fee if applicable – Includes all fees associated with setting up, receiving and importing data	\$ _____
Price Per Piece; included Labor to Sort, Print, Stuff Envelopes, &Transport for mailing	\$ _____
Postage Rate for Bulk Mailing	\$ _____

We the undersigned agree to provide the services in accordance with the specifications, terms and conditions issued for the same at the pricing noted above.

Contact Person: _____ (Print or Type Name)

Telephone #(s): P _____ F _____ C _____

Email _____

Company Name _____

Billing Address _____

Signature _____ Date _____

Quote Check List

Contractor will submit the following minimum information for consideration

Quote Page Completed and Signed

Minimum of 2 References

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of Floyd County Georgia has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Address of Contractor

Electronic Mail Merge and Mailing of Tax Assessments, Personal Property and Tax Returns

Name of Project

FLOYD COUNTY GEORGIA

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____ in 201____ in _____(city), _____(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201____

NOTARY PUBLIC

My Commission Expires: _____ (Notary Seal or Stamp Required)

FLOYD County Board of Assessors
 REAL PROPERTY DIVISION
 4 GOVERNMENT PLAZA, SUITE 203
 ROME GA 301612803
 (706)291-5143

4 LINE ADDRESS

Notice Date: 02/13/2015

**This is not a tax bill
Do not send payment**

**Last Date To File Appeal:
03/30/2015**

County property records are available online at:
www.qpublic.net/ga/floyd

Official Tax Matter - 2015 Assessment

"The amount of your ad valorem tax bill for the year shown above will be based on the appraised (100%) and assessed (40%) values specified in this notice. You have the right to appeal these values to the County Board of Tax Assessors. All documents and records used to determine the current value are available upon request. Additional information on the appeal process may be obtained at <https://etax.dor.ga.gov/ptd/adm/taxguide/appeals.aspx>"

At the time of filing your appeal you must select one of the following:

- (1) Appeal to the County Board of Equalization with appeal to the Superior Court. (value, uniformity, denial of exemption, taxability)
- (2) To arbitration without an appeal to the Superior Court (valuation is the only grounds that may be appealed to arbitration)
- (3) For a parcel of non-homestead property with a FMV in excess of \$1 million, to a hearing officer with appeal to the Superior Court.

If you wish to file an appeal, you must do so in writing no later than 45 days after the date of this notice. If you do not file an appeal by this date, your right to file an appeal will be lost. Appeal forms are available at the local Tax Assessors Office or the forms can be downloaded from <https://etax.dor.ga.gov/ptd/adm/taxguide/appeals.aspx>.

For further information on the proper method of filing an appeal, you may contact the county Board of Tax Assessors which is located at REAL PROPERTY DIVISION 4 GOVERNMENT PLAZA, SUITE 203 ROME, GA 301612803 and which may be contacted by telephone at: (706) 291-5143. Your staff contacts are BRIAN BLAIR and BECKY BEDFORD.

Account Number	Property ID Number	Acreage	Tax Dist	Covenant Year	Homestead
58294	F14Z013	0.00	02		S1

Property Description	LT132 THE HIGHLANDS SEC1 PB25-246 LL 243 4/4				
Property Address	10 HIGHLANDER TR				
Fair Market Value	Returned Value	Previous Year Value	Current Year Value	Other Value	
100% Fair Market Value	0	114,900	115,900	0	
40% Assessed Value	0	45,960	46,360	0	

Reasons for Assessment Notice

1-year Arms Length Transaction cap removed; Parcel acreage changed.;

The estimate of your ad valorem tax bill for the current year is based on the previous year's net millage rate and the fair market value contained in this notice. The actual tax bill you receive may be more or less than this estimate. This estimate may not include all eligible exemptions.

Taxing Authority	Other Exempt	Homestead Exempt	Net Taxable	Previous Millage	Estimated Tax
State	0	2000	44,360	0.100000	4.44
County M & O	0	5000	41,360	8.767000	362.60
School M & O	0	2000	44,360	18.580000	824.21
Fire	0	5000	41,360	1.668000	68.99
Solid Waste	0	5000	41,360	0.664000	27.46
STREET LIGHT FEE	0	0	0	0.000000	56.65
Total Estimated Tax					1,344.35

FLOYD County Board of Assessors
 PERSONAL PROPERTY DIVISION
 4 GOVERNMENT PLAZA, SUITE 213
 ROME GA 301612803
 (706)291-5125

UP TO 4 LINE ADDRESS

Notice Date: 02/13/2015

**This is not a tax bill
 Do not send payment**

**Last Date To File Appeal:
 03/30/2015**

County property records are available online at:
www.qpublic.net/ga/floyd

Official Tax Matter - 2015 Assessment

"The amount of your ad valorem tax bill for the year shown above will be based on the appraised (100%) and assessed (40%) values specified in this notice. You have the right to appeal these values to the County Board of Tax Assessors. All documents and records used to determine the current value are available upon request. Additional information on the appeal process may be obtained at <https://etax.dor.ga.gov/ptd/adm/taxguide/appeals.aspx>"

At the time of filing your appeal you must select one of the following:

- (1) Appeal to the County Board of Equalization with appeal to the Superior Court. (value, uniformity, denial of exemption, taxability)
- (2) To arbitration without an appeal to the Superior Court (valuation is the only grounds that may be appealed to arbitration)
- (3) For a parcel of non-homestead property with a FMV in excess of \$1 million, to a hearing officer with appeal to the Superior Court.

If you wish to file an appeal, you must do so in writing no later than 45 days after the date of this notice. If you do not file an appeal by this date, your right to file an appeal will be lost. Appeal forms are available at the local Tax Assessors Office or the forms can be downloaded from <https://etax.dor.ga.gov/ptd/adm/taxguide/appeals.aspx>.

For further information on the proper method of filing an appeal, you may contact the county Board of Tax Assessors which is located at PERSONAL PROPERTY DIVISION 4 GOVERNMENT PLAZA, SUITE 213 ROME, GA 301612803 and which may be contacted by telephone at: (706) 291-5125. Your staff contacts are KAREN BLANTON and LYNN JEFFERSON.

Account Number	Property ID Number	Acreage	Tax Dist	Covenant Year	Homestead
88053	J14F 017		01		

Property Description	Mach, Equip, Furn, Fix; Inventory;				
Property Address	203 GLENN MILNER BLVD Unit:				
Fair Market Value	Returned Value	Previous Year Value	Current Year Value	Other Value	
100% Fair Market Value	0	22,284	21,879		
40% Assessed Value	0	8,914	8,752		

Reasons for Assessment Notice

REVALUATION;

The estimate of your ad valorem tax bill for the current year is based on the previous year's net millage rate and the fair market value contained in this notice. The actual tax bill you receive may be more or less than this estimate. This estimate may not include all eligible exemptions.

Taxing Authority	Other Exempt	Homestead Exempt	Net Taxable	Previous Millage	Estimated Tax
State	3552	0	5,200	0.100000	0.52
County M & O	0	0	8,752	8.767000	76.73
Rome	0	0	8,752	6.800000	59.51
City School	0	0	8,752	17.450000	152.72
City Capital	0	0	8,752	1.900000	16.63
Total Estimated Tax					306.11

**BUSINESS PERSONAL PROPERTY
 TAX RETURN**

THIS RETURN IS CONSIDERED PUBLIC INFORMATION
 AND WILL BE OPEN FOR PUBLIC INSPECTION
 RETURN COMPLETED FORM TO THE RETURN ADDRESS LISTED

**THIS FORM MUST BE RETURNED WITH
 INFORMATION SUBMITTED TO OUR OFFICE**

940-500

4 LINE ADDRESS

TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER
2015	(706) 291-5125	940
DUE DATE	MAP AND PARCEL I.D. NO.	NAICS NO.
4/1/2015		532420

BUSINESS PHYSICAL LOCATION 01

PITNEY-BOWES INC
 LEASED EQUIPMENT

IF MAILING ADDRESS OR NAME IS INCORRECT,
 PLEASE CORRECT IN THE SPACE PROVIDED BELOW.

NAME:

ADDRESS:

CITY, STATE, ZIP:

TAXPAYER NAME AND ADDRESS ABOVE

To avoid a 10% penalty on items not previously returned, file no later than the due date listed above. This return is subject to audit by the Board of Tax Assessors under O.C.G.A. §48-5-299 and §48-5-300. The return and supporting schedule must be completed and returned in order for property to be properly returned. Department of Revenue Rule 560-11-10-.08 (3) (C)

The values from Schedules A, B, and C should be listed below. If these values, in your opinion, do not reflect fair market value then declare your estimate of value under the column headed Taxpayers Returned Value.

LINE ↓	PERSONAL PROPERTY STRATA	TAXPAYER RETURNED	INDICATED VALUE FROM	FOR TAX
		VALUE, AS OF JAN. 1	SCHEDULES A, B, & C	OFFICE USE
F.	Furniture/Fixtures/Machinery/Equipment — Includes all fixtures, furniture, office equipment, computer hardware, production machinery, off-road vehicles, farm equipment and implements, tools and implements of manual laborers' trade, leasehold improvements personal property in nature and construction in progress personal property in nature.			
I.	Inventory — Includes all raw materials, goods in process, finished goods, livestock and agricultural products, all consumable supplies used in the process of manufacturing, distributing, storing or merchandising of goods and services, floor planned inventory and spare parts. Does not include inventory receiving Freeport Exemption under O.C.G.A. § 48-5-48.2.			
P.	Freeport Inventory — Includes inventory receiving exemption Under O.C.G.A. § 48-5-48.2			
Z.	Other Personal — Includes all personal property not otherwise defined above.			
TOTALS →				

It shall be the duty of the county Board of Tax Assessors to investigate and to inquire into the property owned in the county for the purpose of ascertaining what property is subject to taxation and to require the proper return of the property for taxation.

TAXPAYER'S DECLARATION

"I do solemnly swear that I have carefully read (or have heard read) and have duly considered the questions propounded in the foregoing tax list, and that the value placed by me on the property returned, as shown by the list, is the true market value thereof; and I further swear that I returned, for the purpose of being taxed thereon, every species of property that I own in my own right or have control of either as agent, executor, administrator, or otherwise; and that in making this return, for the purpose of being taxed thereon, I have not attempted either by transferring my property to another or by any other means to evade the laws governing taxation in this state. I do further swear that in making this return I have done so by estimating the true worth and value of every species of property contained therein."

TAXPAYER OR AGENT X _____ Signature _____

PLEASE PRINT OR TYPE NAME _____

TITLE _____ DATE: _____ PHONE NUMBER: _____ CELL: _____



20150000940



2015



0000940



RETURN

GENERAL INFORMATION - THIS SECTION SHOULD BE COMPLETED IN DETAIL (NOTE: THIS INFORMATION IS OPEN TO PUBLIC INSPECTION)

1. CHECK TYPE OF BUSINESS: COMMERCIAL INDUSTRIAL AGRICULTURAL
2. CHECK TYPE OF GA. INCOME TAX FILED: CORPORATION INDIVIDUAL PARTNERSHIP
3. FISCAL YEAR ENDING DATE OF BUSINESS: _____
4. FEDERAL EMPLOYER IDENTIFICATION NUMBER: _____
5. STATE TAXPAYER IDENTIFICATION (S.T.I.) NUMBER: _____ STATE SALES TAX NUMBER: _____
6. NAME OF PRESIDENT OF CORPORATION OR OWNER'S NAME: _____
7. DOING BUSINESS AS: _____
8. NAME ON BUSINESS LICENSE: _____ BUSINESS LICENSE # _____
9. IF BUSINESS LOCATED WITHIN CITY LIMITS, LIST CITY NAME: _____
10. PREPARER'S NAME: _____
ADDRESS: _____ PHONE #: _____
11. PERSON WHO SHOULD BE CONTACTED CONCERNING QUESTIONS ABOUT THIS RETURN:
NAME: _____ PHONE #: _____
12. LOCATION OF SUPPORTING RECORDS: _____
13. PHONE NUMBER OF BUSINESS: _____ HOME OFFICE NUMBER: _____
TOLL FREE NUMBER: _____ FAX NUMBER: _____
EMAIL ADDRESS: _____
14. MAIN BUSINESS PRODUCT OR ACTIVITY: _____
15. NORTH AMERICAN INDUSTRY CLASSIFICATION SYSTEM (NAICS) NUMBER: _____
16. SQUARE FOOTAGE OF BUILDING: _____ IF RETAIL, SQUARE FOOTAGE OF RETAIL AREA: _____
17. IF YOU CLOSED OR SOLD YOUR BUSINESS, PLEASE LIST NEW OWNER'S NAME AND ADDRESS _____

18. DATE BUSINESS BEGAN IN THIS COUNTY: _____ WAS RETURN FILED LAST YEAR? YES NO
19. DO YOU OR YOUR BUSINESS HAVE ASSETS LOCATED IN OTHER COUNTIES IN THIS STATE? YES NO
20. DOES THE BUSINESS OWN A BOAT AND MOTOR? YES NO
AIRCRAFT? YES NO IF YES, PLEASE REQUEST MARINE FORM PT-50M OR AIRCRAFT FORM PT 50A.

REFERENCE INFORMATION

1. O.C.G.A. § 48-5-299 requires the Board of Tax Assessors to diligently investigate and inquire into the property owned in the county for the purpose of ascertaining what property, real and personal is subject to taxation in the county and require its proper return for taxation.
2. O.C.G.A. § 48-5-300 grants the Board of Tax Assessors authority to require production of books, papers, or documents, by subpoena, if necessary, which may aid in determining the proper assessment.
3. O.C.G.A. § 48-5-269 grants the State Revenue Commissioner the authority to prescribe the forms, books, and records to be used for standard property tax reporting for all taxing units, including but not limited to, the forms, books, and records to be used in the listing, appraisal and assessment of property and how the forms, books, and records shall be compiled and kept.
4. O.C.G.A. § 48-5-269.1 grants the State Revenue Commissioner the authority to adopt and require the use of uniform procedural manual for appraising tangible real and personal property.
5. In accordance with the above sections of the Georgia Code this return and schedules are submitted to you for your completion. Failure to file a completed copy of this form may lead to an audit of your records and/or the placing of an assessment on your property from the best information obtainable in accordance with O.C.G.A. § 48-5-299 (a).
6. Freeport Exemption (O.C.G.A. § 48-5-48.2) may be available in your county (exemption of inventory of goods in the process of manufacture or production, finished goods and finished goods stored for out of state shipment). Applications are available on request and must be completed and filed with the business personal property return and schedules prior to the deadline for filing.
7. Any air and water pollution control facilities owned may be exempt under O.C.G.A. § 48-5-41 (11) which states... "All property used in or which is a part of any facility which has been installed or constructed at any time for the primary purpose of eliminating or reducing air and water pollution of such facilities and has been certified by the Department of Natural Resources as necessary and adequate for the purpose intended" shall be exempt from all Ad Valorem Property Taxes in this state.
8. Most counties do not accept metered mail dates as filing dates unless counter stamped by the post office. Be sure that the date of deposit and the postmark date are the same if mailing close to the deadline.
9. O.C.G.A. § 48-5-41.1 states... "All farm products grown in this state and remaining in the hands of the producer during the one year beginning immediately after their production and harvested agricultural products which have a planting-to-harvest cycle of 12 months or less, which are customarily cured or aged for a period in excess of one year after harvesting and before manufacturing, and which are held in this state for manufacturing and processing purposes and all qualified farm products grown in this state shall be exempt from Ad Valorem Property Taxes."
10. O.C.G.A. § 48-5-43 states... "Consumers of commercial fertilizers shall not be required to return for taxation any commercial fertilizer or any manures commonly used by farmers and others as fertilizers if the land upon which the fertilizer is to be used has been properly returned for taxation."
11. Boats and motors and aircraft should be reported on a separate reporting form which will be provided upon request.
12. Computer software (O.C.G.A. § 48-1-8) shall constitute personal property only to the extent of the value of the unmounted or uninstalled medium on or in which it is stored or transmitted except that held as inventory ready for sale.

BUSINESS PERSONAL PROPERTY SCHEDULE A (FURNITURE / FIXTURES / MACHINERY / EQUIPMENT) <small>THIS SCHEDULE IS CONSIDERED CONFIDENTIAL AND WILL NOT BE OPEN FOR PUBLIC INSPECTION RETURN COMPLETED FORM TO ADDRESS LISTED BELOW</small>				TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER					
				2015	(706) 291-5125	940					
				DUE DATE	MAP AND PARCEL I.D. NO.	NAICS NO.					
				4/1/2015		532420					
COUNTY NAME AND RETURN ADDRESS				TAXPAYER NAME AND ADDRESS							
FLOYD COUNTY BOARD OF ASSESSORS PERSONAL PROPERTY DIVISION 4 GOVERNMENT PLAZA, # 213 ROME GA 30161-2803											
DID YOU OR YOUR BUSINESS OWN ANY MACHINERY, EQUIPMENT, FURNITURE, OR FIXTURES ON JANUARY 1 OF THIS YEAR? YES <input type="checkbox"/> NO <input type="checkbox"/> . IF YES, PLEASE LIST BELOW.				BUSINESS PHYSICAL LOCATION							
				LEASED EQUIPMENT							
YEAR ACQUIRED	PREVIOUSLY REPORTED ORIGINAL COST NEW	+	ADDITIONS OR TRANSFERS IN	-	DISPOSALS OR TRANSFERS OUT	=	ADJUSTED ORIGINAL COST NEW	X	COMP CONV. FACTOR	=	INDICATED BASIC COST APPROACH VALUE
GROUP 1: TYPICAL ECONOMIC LIFE OF 5-7 YEARS (EXAMPLES ON INSTRUCTION SHEET) A.C.R.S./M.A.C.R.S. NOT ACCEPTABLE											
2014		+		-		=		X	.87	=	
2013		+		-		=		X	.74	=	
2012		+		-		=		X	.58	=	
2011		+		-		=		X	.43	=	
2010		+		-		=		X	.32	=	
2009		+		-		=		X	.26	=	
2008		+		-		=		X	.21	=	
PRIOR		+		-		=		X	.20	=	
TOTAL GROUP 1											
GROUP 2: TYPICAL ECONOMIC LIFE OF 8-12 YEARS (EXAMPLES ON INSTRUCTION SHEET) A.C.R.S./M.A.C.R.S. NOT ACCEPTABLE											
2014		+		-		=		X	.92	=	
2013		+		-		=		X	.85	=	
2012		+		-		=		X	.78	=	
2011		+		-		=		X	.70	=	
2010		+		-		=		X	.63	=	
2009		+		-		=		X	.54	=	
2008		+		-		=		X	.44	=	
2007		+		-		=		X	.34	=	
2006		+		-		=		X	.28	=	
2005		+		-		=		X	.25	=	
2004		+		-		=		X	.25	=	
PRIOR		+		-		=		X	.20	=	
TOTAL GROUP 2											
GROUP 3: TYPICAL ECONOMIC LIFE OF 13 YEARS OR MORE (EXAMPLES ON INSTRUCTION SHEET) A.C.R.S./M.A.C.R.S. NOT ACCEPTABLE											
2014		+		-		=		X	.95	=	
2013		+		-		=		X	.91	=	
2012		+		-		=		X	.87	=	
2011		+		-		=		X	.82	=	
2010		+		-		=		X	.79	=	
2009		+		-		=		X	.75	=	
2008		+		-		=		X	.70	=	
2007		+		-		=		X	.63	=	
2006		+		-		=		X	.57	=	
2005		+		-		=		X	.52	=	
2004		+		-		=		X	.47	=	
2003		+		-		=		X	.41	=	
2002		+		-		=		X	.35	=	
2001		+		-		=		X	.31	=	
2000		+		-		=		X	.29	=	
1999		+		-		=		X	.28	=	
PRIOR		+		-		=		X	.20	=	
TOTAL GROUP 3											
GROUP 4: TYPICAL ECONOMIC LIFE OF 1-4 YEARS, ALSO I.R.S. ASSET CLASS 00.12 (EXAMPLES ON INSTRUCTION SHEET) A.C.R.S./M.A.C.R.S. NOT ACCEPTABLE											
2014		+		-		=		X	.67	=	
2013		+		-		=		X	.54	=	
2012		+		-		=		X	.31	=	
PRIOR		+		-		=		X	.10	=	
TOTAL GROUP 4											
TOTAL ALL GROUPS											

ENTER TOTAL INDICATED VALUE ON PAGE ONE LINE F UNDER INDICATED VALUE FROM SCHEDULES COLUMN.

BUSINESS PERSONAL PROPERTY SCHEDULE B INVENTORY

THIS SCHEDULE IS CONSIDERED CONFIDENTIAL AND NOT OPEN TO PUBLIC INSPECTION

SCHEDULE B - INVENTORY - SEE INSTRUCTION SHEET

Did you or your business own any inventory on January 1, this year? Yes No .
If yes, please list in space provided below. Show total 100% cost, do not include licensed motor vehicles, or dealer heavy duty equipment for sale weighing over 5,000 pounds and to be used for construction purposes.

- 1. Merchandise _____
- 2. Raw Materials _____
- 3. Goods in Process _____
- 4. Finished Goods _____
- 5. Goods in Transit _____
- 6. Warehoused _____
- 7. Consigned _____
- 8. Floor Planned _____
- 9. Spare Parts _____
- 10. Supplies _____
Includes computer, medical, office and operating supplies, fuel, and tangible prepaid expensed items
- 11. Packaging Materials _____
- 12. Livestock _____
(Non Exempt 48-5-41.1)
- 13. TOTAL INVENTORY _____

Enter total on page 1 Line I schedule column. If Freeport account enter exempt amount on Line P and taxable amount on Line I.

1. Indicate your inventory accounting method (Lower of Cost or Market, Retail Method, Weighted Average, Physical, etc.) _____
2. Check Cost Method as it applies to your inventory: Actual LIFO
 FIFO LIFO not acceptable
3. Fiscal Year ending date of business _____
If your Fiscal Year ends at a point in time other than January 1, you should attach a breakdown of how you arrived at your January 1 inventory.
4. Inventory reported on previous year Georgia Income Tax Return: _____
5. The 100% delivered cost should include freight, burden and overhead at your level of trade on January 1.
6. If you file a Corporate or Partnership Income Tax Return, a photocopy of your most current balance sheet (Corporation, Form 1120, Schedule A & L - Partnership, Form 1065, Schedule A & L) as filed with your U.S. Income Tax Return is requested. If you filed an Individual or Sole Proprietorship Income Tax Return, a photo copy of your most current Profit or Loss Statement Form 1040, Schedule C, Pages 1 & 2 as filed with your U.S. Income Tax Return is requested. These documents are requested for inventory verification purposes and will not be available for public inspection (O.C.G.A. § 48-5-314). Under GA Law you cannot be required to furnish any Income Tax Records or Returns.
7. Inventory is subject to audit and verification from your records or those you have filed with the State of Georgia Department of Revenue.
8. Do not make any deductions for anticipated mark-down or shrinkage. Do not discount, figures are to be taken directly from your books.
9. If inventory is less than the previous year an explanation for the decrease should be submitted.
10. Gross Sales for the previous calendar year: _____
11. All taxable livestock and farm products should be reported as inventory. See O.C.G.A. § 48-5-41.1 for details of exemption.

SCHEDULE C - CONSTRUCTION IN PROGRESS

Did you have unallocated costs for construction in progress on January 1 this year? Yes No . If yes, did you have tangible personal property connected with this construction in progress that has not been reported in any other section of this schedule? Yes No . If yes, please list in the space provided below. Add Indicated Value to Total on Page 1 Line F Schedule Column.

DETAILED DESCRIPTION OF ITEMS (ATTACH SUPPLEMENTAL SHEETS IF NEEDED)	YEAR ACQUIRED	USEFUL LIFE (YEARS)	TOTAL COST	X	MARKET VALUE FACTOR	=	INDICATED VALUE	OFFICE USE ONLY
				X	.75	=		

SECTION 1: CONSIGNED GOODS

Did you have any consigned goods, floor planned merchandise, or any other type of goods that were loaned, stored or otherwise held on January 1, this year, and not owned by you and was not reported in your inventory value in schedule B above of this report? Yes No . If yes, list in the space provided below.

DETAILED DESCRIPTION OF ITEMS (ATTACH SUPPLEMENTAL SHEETS IF NEEDED)	FULL COST	NAME AND ADDRESS OF LEGAL OWNER

SECTION 2: LEASED OR RENTED EQUIPMENT

Did you have in your possession or was there located at your business on January 1, this year, any machinery, equipment, furniture, fixture, tools, vending machines (coffee, cigarette, candy, games etc.) or other type personal property which was leased, rented, stored or otherwise located at your business and not owned by you? Yes No . If yes, list the equipment in the space provided below (exclude licensed motor vehicles). Attach supplemental sheet if necessary.

NAME/ADDRESS OF OWNER	DESCRIPTION OF ITEM	SELLING PRICE	RENTAL AMOUNT PER MONTH	DATE OF MANUFACTURE	DATE INSTALLED	LENGTH OF LEASE

SECTION 3: ADDITIONS OR ITEMS TRANSFERRED IN

Did you have items which were added or transferred in for prior years or the current year that were not previously reported? Yes No . If yes, list in the space provided below.

DETAILED DESCRIPTION OF ITEMS (ATTACH SUPPLEMENTAL SHEETS IF NEEDED)	YEAR ACQUIRED	ORIGINAL COST NEW

SECTION 4: DISPOSALS OR ITEMS TRANSFERRED OUT

Did you have items which have been sold, junked, transferred or otherwise no longer located at the business January 1 this year? Yes No . If yes, list in the space provided below.

DETAILED DESCRIPTION OF ITEMS (ATTACH SUPPLEMENTAL SHEETS IF NEEDED)	YEAR ACQUIRED	DATE DISPOSED	ORIGINAL COST NEW	REASON	IF EQUIPMENT SOLD, NAME AND ADDRESS OF PURCHASER SHOULD BE LISTED BELOW

INSTRUCTION SHEET

INSTRUCTIONS FOR PAGE ONE - BUSINESS PERSONAL PROPERTY TAX RETURN

1. If taxpayer name or address has changed or is incorrect, provide correct name and address in the space provided.
2. To avoid a 10% penalty on assets that have not been previously returned, this return must be filed no later than date listed under the due date column on page one.
3. Taxpayer return value: Georgia Law (O.C.G.A. § 48-5-6) requires the taxpayer to return property at its fair market value. If the values indicated from Schedules A, B, or C do not in your opinion reflect fair market value, you may list your opinion here. Attachments must be provided by you listing the reasons for change.
4. Value from Schedule A, B, & C: Schedules A, B, & C should be completed and the total values from these schedules should be listed in this column.
5. Taxpayers Declaration: This declaration must be signed by the taxpayer or agent and dated in order for this to be a valid return.

INSTRUCTIONS FOR PAGE TWO - GENERAL INFORMATION AND IMPORTANT INFORMATION

1. The information requested in the general information section is very important. This area should be completed in detail. The information in this section is open for public inspection.
2. The information found in the reference information section may be of great interest to the taxpayer. This section contains information about various laws and exemptions that may be available to the taxpayer.

INSTRUCTIONS FOR PAGE THREE - SCHEDULE A - FURNITURE / FIXTURES / MACHINERY / EQUIPMENT

1. This section provides for the uniform calculation of value for all assets of the business owned on January 1 of this year. Expensed assets as well as capitalized assets should be listed and valued using indicated schedule. Leasehold improvements personal property in nature and trade fixtures should also be reported on this schedule. Leasehold improvements such as walls, doors, floor covering, electrical, plumbing, heating and air distribution systems, ceiling and lighting that are attached to and form an integral part of the building should not be reported as personal property.
2. The indicated basic cost approach value of assets for tax purposes is computed by multiplying the total adjusted original cost new by the composite conversion factor of each year's acquisition listed in the appropriate economic life group. Cost amounts are subject to audit. Cost should include installation, trade-in allowances, sales tax, investment credits, transportation, etc.
3. Internal Revenue Service Publication 946 "How to Depreciate Property" Appendix B - Table of Class Lives and Recovery Periods - column headed "Class Life in Years", should be used for determining the economic life group of an asset for Ad Valorem Tax purposes. See examples of economic life groups listed below. ACRS and MACRS should not be used for determining the economic life of an asset for Ad Valorem Tax purposes.
4. Deduct cost of items disposed of or transferred out from the cost of assets acquired during the corresponding year; add cost of items transferred in. (Disposals include only those items which have been sold, junked, transferred or otherwise no longer located at the business on January 1, this year). List disposals and items transferred in or out and reasons for disposals or transfer on page 4 under sections three or four.
5. A copy of the most current asset listing indicating the date of acquisition, original cost, and description of each asset should be submitted with this schedule. If an asset listing is not available please submit a copy of your most current I.R.S. form 4562 Depreciation Schedule and all supplemental schedules utilized to develop depreciation deduction for A.C.R.S. assets and assets listed under the column headed "Other Depreciation" as well as supplemental depreciation schedule used for M.A.C.R.S. assets. This information is needed for verification purposes and is not available for public inspection (O.C.G.A. § 48-5-314).

DEPRECIATION GROUPING EXAMPLES

GROUP 1: ECONOMIC LIFE OF 5-7 YEARS	GROUP 2: ECONOMIC LIFE OF 8-12 YEARS	GROUP 3: ECONOMIC LIFE OF 13 YEARS OR MORE	GROUP 4: ECONOMIC LIFE OF 1-4 YEARS <small>ALSO ASSET CLASS 00.12 IRS PUBLICATION 946</small>
1) Copiers, Duplicating Equip., Typewriters 2) Calculators, Adding and Accounting Machines 3) Electronic Instrumentation Mfg. 4) Construction Equipment 5) Timber Cutting Equipment 6) Mfg. of Electronic Components & Products 7) Radio and T.V. Broadcasting Equipment 8) Drilling of Oil and Gas Wells 9) Temporary Sawmills 10) Any Semiconductor Mfg. Equipment 11) Telegraph and Satellite Communications 12) Vending Equipment, Coin Operated 13) Rental Appliances and Televisions 14) Hand Tools 15) Nuclear Fuel Assemblies 16) Fishing Equipment 17) Cattle, Breeding, or Dairy Equipment	1) Office Furniture, Fixtures and Equipment 2) Agriculture Machinery and Equipment 3) Recreation or Entertainment Services 4) Mining and Quarrying 5) Mfg. of Textile Products 6) Mfg. of Wood Products and Furniture 7) Permanent Sawmills 8) Mfg. of Chemicals and Allied Products 9) Mfg. of finished Plastics Products 10) Mfg. of Leather and Leather Products 11) Mfg. of Electrical and Non-electrical Machinery 12) Mfg. of Athletic, Jewelry and Other Goods 13) Retail Trades Furniture, Fixtures and Equipment 14) Restaurant and Bar Equipment 15) Hotel and Motel Furnishing and Equipment 16) Automobile Repair and Shop Equipment 17) Personal and Professional Services	1) Petroleum Refining Equipment 2) Grain and Grain Mill Products (Mfg.) 3) Mfg. of Sugar and Sugar Products 4) Mfg. of Vegetable Oils and Products 5) Mfg. of Tobacco and Tobacco Products 6) Mfg. of Pulp and Paper 7) Mfg. of Rubber Products 8) Mfg. of Cement 9) Mfg. of Stone and Clay Products 10) Mfg. of Primary Nonferrous Metals 11) Mfg. of Foundry Products 12) Mfg. of Primary Steel Mill Products 13) Tanks and Storage 14) Billboards/Signs 15) Radio/T.V. Antennas and Towers 16) Cold Storage and Ice Making Equipment 17) Mfg. of Glass Products	1) Computers - Non Production 2) Peripheral Computer Equipment 3) Jigs, Dies, Molds, Patterns 4) Special Tools and Gauges 5) Returnable Containers 6) Special Transfer and Shipping Devices 7) Pallets 8) Rental Movies 9) Card Readers 10) High Speed Printers 11) Data Entry Devices 12) Teleprinters 13) Plotters 14) Terminals, Tape Drives, Disc Drives 15) Magnetic Tape Feeds 16) Optical Character Readers

INSTRUCTIONS FOR PAGE FOUR - BUSINESS PERSONAL PROPERTY SCHEDULE B - INVENTORY

1. Inventory should be reported at 100% cost on January 1, this year. Cost should include, but not be limited to, freight in, overhead or burden, Federal, State, or Local Taxes, or any other charges imposed upon the item that makes it more valuable to the owner. Costs will be arrived at by converting anything other than current cost back to cost. "LIFO" is not acceptable.
2. The name and address of the legal owner of any consigned goods or any other type goods not owned by you and not reported under Schedule B should be listed under Section 1, Consigned Goods. This will insure that the taxes are charged to the legal owner.
3. Schedule C - Construction in Progress - if you had any unallocated cost for Construction in Progress, which is personal property in nature, that was not reported under Schedule A it should be reported under Schedule C. A description of the property, year acquired, useful life in years, and total cost should be reported.
4. If you had in your possession on January 1 any leased or rented equipment, machinery, furniture, fixtures, tools, vending machines, or other types of property, the legal owners name and address should be listed under Section 2 headed Leased or Rented Equipment. This will insure that the taxes are charged to the legal owner.

NOTE: Schedules A, B, and C and all documents furnished by the taxpayer are considered confidential and not open to public inspection. O.C.G.A. § 48-5-314. Returns are public information.

NOTICE

IN ORDER TO PROCESS INFORMATION FROM LEASING COMPANIES INCLUDE THE FOLLOWING INFORMATION IN EXCEL FORMAT WITH YOUR PERSONAL PROPERTY RETURN AND SUBMITT THE FOLLOWING INFORMATION IN EXCEL FORMAT FORMAT DIGITALLY. YOU CAN EMAIL THIS INFORMATION TO:

ppdclk@floydcountyga.org

OR SUBMITT THIS INFORMATION ON A DISK WITH YOUR RETURN

THE FOLLOWING INFORMATION SUBMITTED SHOULD INCLUDE:

LEASEE NAME, LEASEE ADDRESS, DESCRIPTION OF PROPERTY, LEASE NUMBER, LENGTH OF LEASE, DATE OF MANUFACTURE, DATE INSTALLED, ORIGINAL COST INCLUDING INSTALLATION COST OR ORIGINAL SELLING PRICE

LEASEE NAME	LEASEE ADDRESS	DESC OF PROPERTY	LEASE NUMBER	LENGTH OF LEASE	DATE OF MFG	DATE INSTALLED	ORIGINAL COST OR SELLING PRICE

PLEASE INCLUDE CONTACT INFORMATION AND THE ORIGINAL RETURN DOCUMENT WITH BARCODES. THIS WILL HELP US IDENTIFY YOUR RETURN AND INFORMATION SUBMITTED.

IF YOU NEED FURTHER INFORMATION ABOUT THIS PROCESS PLEASE CONTACT OUR OFFICE AT (706) 291-5125
FLOYD COUNTY PERSONAL PROPERTY DIVISION

THIS FORMAT SHOULD HELP US PROVIDE BETTER INFORMATION FOR YOU TO BILL YOUR LEASEE.

Acct: 0000940

FLOYD COUNTY BOARD OF ASSESSORS
 PERSONAL PROPERTY DIVISION
 4 GOVERNMENT PLAZA, SUITE 213
 ROME GA 30161-2803

AIRCRAFT PERSONAL PROPERTY TAX RETURN

THIS RETURN IS CONSIDERED PUBLIC INFORMATION
 AND WILL BE OPEN FOR PUBLIC INSPECTION
 RETURN COMPLETED FORM TO THE RETURN ADDRESS LISTED

**THIS FORM MUST BE RETURNED WITH
 INFORMATION SUBMITTED TO OUR OFFICE**

534-300

4 LINE ADDRESS



TAXPAYER NAME AND ADDRESS ABOVE

To avoid a 10% penalty on aircraft not previously returned, file this return no later than the due date listed above. This return is provided to you so you may return the fair market value of your aircraft for this tax year. The return and supporting schedule must be completed and returned in order for the aircraft to be properly returned. Department of Revenue Rule 560-11-10-.08 (3) (C).

TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER
2015	(706) 291-5125	534
DUE DATE	OWNERS PHONE NUMBER (LIST)	
4/1/2015	(706) 232-2508	

TAXPAYER NAME AND ADDRESS	
REED LARRY E 3366 SW CAVE SPRING RD	
TAX SITUS (WHERE YOU LIVE) CHECK ONE	02
<input type="checkbox"/> UNINCORPORATED AREA <input type="checkbox"/> CITY OF (LIST):	
IF MAILING ADDRESS OR NAME IS INCORRECT, PLEASE CORRECT IN THE SPACE PROVIDED BELOW.	
NAME:	
ADDRESS:	
CITY, STATE, ZIP:	

PERSONAL PROPERTY STRATA		AIRCRAFT SHALL BE RETURNED TO THE COUNTY WHERE PRIMARY HOME BASE IS LOCATED. LIST THE FAIR MARKET VALUE OF ALL AIRCRAFT UNDER TAXPAYER RETURN COLUMN BELOW.	
A. AIRCRAFT INCLUDES AIRPLANES, ROTOCRAFT, AND LIGHTER THAN AIR VEHICLES, COMMERCIAL AIRLINE AIRCRAFT ARE RETURNED TO THE STATE REVENUE COMMISSIONER.		TAXPAYER RETURN VALUE AS OF JAN. 1 THIS YEAR	FOR TAX OFFICE USE ONLY (TAX ASSESSORS VALUE)
AIRCRAFT NUMBER 1 REGISTRATION N #:	N88590		
AIRCRAFT NUMBER 2 REGISTRATION N #:			
AIRCRAFT NUMBER 3 REGISTRATION N #:			
AIRCRAFT NUMBER 4 REGISTRATION N #:			
AIRCRAFT NUMBER 5 REGISTRATION N #:			
TOTAL			

It shall be the duty of the County Board of Tax Assessors to investigate and to inquire into the property owned in the county for the purpose of ascertaining what property is subject to taxation and to require the proper return of the property for taxation.

TAXPAYER'S DECLARATION

"I do solemnly swear that I have carefully read (or have heard read) and have duly considered the questions propounded in the foregoing tax list, and that the value placed by me on the property returned, as shown by the list, is the true market value thereof; and I further swear that I returned, for the purpose of being taxed thereon, every species of property that I own in my own right or have control of either as agent, executor, administrator, or otherwise; and that in making this return, for the purpose of being taxed thereon, I have not attempted either by transferring my property to another or by any other means to evade the laws governing taxation in this state. I do further swear that in making this return I have done so by estimating the true worth and value of every species of property contained therein."

TAXPAYER OR AGENT X _____ TITLE _____ DATE _____
 OWNERS PHONE NUMBER: (HOME) _____ (CELL) _____



20150000534



2015



0000534



RETURN

INSTRUCTIONS

INSTRUCTIONS FOR PAGE ONE - AIRCRAFT PERSONAL PROPERTY TAX RETURN

1. Aircraft shall be returned to the county where principally hangered or tied down and out of which its flights normally originate.
2. The return is considered public information and will be open for public inspection.
3. If taxpayer name or address is incorrect, please correct in the space provided.
4. To avoid a 10% penalty, on aircraft not previously returned, this return must be filed no later than date listed under the due date column on page one.
5. This tax return is provided for the taxpayer to report the fair market value of all aircraft owned on January 1, this year.
6. The fair market value should be listed under the column headed taxpayer return value as of January 1, this year, page 1.
7. Taxpayer declaration: This declaration must be signed by the owner or agent and dated in order for this to be a valid return.

INSTRUCTIONS FOR PAGE THREE - SCHEDULE E (AIRCRAFT)

1. This schedule is considered confidential information and not open to public inspection O.C.G.A. § 48-5-314. Returns are public information.
2. All information about the aircraft should be listed in order for the Board of Assessors to determine the proper assessment.
3. If the aircraft has been sold or traded and you did not own it on January 1, this year, please list the name and address of new owner in order for the items to be removed from your account.
4. Listing anything that is functionally wrong with your aircraft on the bottom of page three. This will help the Board of Assessors make a proper assessment.
5. Additional aircraft may be listed on the back of Schedule E. Attach additional sheets if necessary.
6. Avionics and extra equipment should be listed under the column headed avionics and extra equipment.

REFERENCE INFORMATION

1. O.C.G.A. § 48-5-299 requires the Board of Tax Assessors to diligently investigate and inquire into the property owned in the county for the purpose of ascertaining what property, real and personal, is subject to taxation in the county and to require its proper return for taxation.
2. O.C.G.A. § 48-5-300 grants the Board of Tax Assessors authority to require production of books, papers or documents, by subpoena if necessary, which may aid in determining the proper assessment.
3. O.C.G.A. § 48-5-269 grants the State Revenue Commissioner the authority to prescribe, the forms, books and records to be used for standard property tax reporting for all taxing units, including but not limited to, the forms, books and records to be used in the listing, appraisal and assessment of property and how the forms, books and records shall be compiled and kept.
4. O.C.G.A. § 48-5-269.1 grants the State Revenue Commissioner the authority to adopt and require the use of a uniform procedural manual for appraising tangible real and personal property.
5. This return and schedule is submitted to you for your completion in accordance with the above sections of the Georgia Code.

AIRCRAFT # 3

AIRPORT WHERE AIRCRAFT PRIMARY HOME BASED - CITY _____ COUNTY _____ STATE _____	
REGISTRATION "N" #:	AVIONICS AND EXTRA EQUIPMENT
MFG. NAME: (MAKE)	
MODEL NAME OR #:	
YEAR BUILT:	
SERIAL NUMBER:	
DATE PURCHASED	
PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/>	
COST:	
HOURS BETWEEN OVERHAULS (TBO):	
HOURS SINCE LAST OVERHAUL:	
LAST OVERHAUL: MAJOR <input type="checkbox"/> TOP <input type="checkbox"/>	NOTE: Please submit a copy of your log book to substantiate T.B.O. and airframe hours.
TOTAL HOURS ON AIRFRAME AS OF JAN. 1:	

AIRCRAFT # 4

AIRPORT WHERE AIRCRAFT PRIMARY HOME BASED - CITY _____ COUNTY _____ STATE _____	
REGISTRATION "N" #:	AVIONICS AND EXTRA EQUIPMENT
MFG. NAME: (MAKE)	
MODEL NAME OR #:	
YEAR BUILT:	
SERIAL NUMBER:	
DATE PURCHASED	
PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/>	
COST:	
HOURS BETWEEN OVERHAULS (TBO):	
HOURS SINCE LAST OVERHAUL:	
LAST OVERHAUL: MAJOR <input type="checkbox"/> TOP <input type="checkbox"/>	NOTE: Please submit a copy of your log book to substantiate T.B.O. and airframe hours.
TOTAL HOURS ON AIRFRAME AS OF JAN. 1:	

AIRCRAFT # 5

AIRPORT WHERE AIRCRAFT PRIMARY HOME BASED - CITY _____ COUNTY _____ STATE _____	
REGISTRATION "N" #:	AVIONICS AND EXTRA EQUIPMENT
MFG. NAME: (MAKE)	
MODEL NAME OR #:	
YEAR BUILT:	
SERIAL NUMBER:	
DATE PURCHASED	
PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/>	
COST:	
HOURS BETWEEN OVERHAULS (TBO):	
HOURS SINCE LAST OVERHAUL:	
LAST OVERHAUL: MAJOR <input type="checkbox"/> TOP <input type="checkbox"/>	NOTE: Please submit a copy of your log book to substantiate T.B.O. and airframe hours.
TOTAL HOURS ON AIRFRAME AS OF JAN. 1:	

Is there anything functionally wrong with your aircraft? Yes No
 If yes, please provide the Board of Assessors with information in order for them to make a proper assessment. (List Below)

NAME OF PURCHASER: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 DATE SOLD: _____ SALE PRICE: _____
 DESCRIPTION _____

If you sold or traded your aircraft and did not own on January 1, this year, this section should be completed in order for the items to be removed from your account. ➤

If purchased used this year, list the name and address of the previous owner. ➤

NAME: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____

List anything functionally wrong with your aircraft: _____

MARINE

PERSONAL PROPERTY TAX RETURN

THIS RETURN IS CONSIDERED PUBLIC INFORMATION
 AND WILL BE OPEN FOR PUBLIC INSPECTION
 RETURN COMPLETED FORM TO THE RETURN ADDRESS LISTED

**THIS FORM MUST BE RETURNED WITH
 INFORMATION SUBMITTED TO OUR OFFICE**

12-200

4 LINE ADDRESS



TAXPAYER NAME AND ADDRESS ABOVE

To avoid a 10% penalty on boats and motors not previously returned, file this return no later than the due date listed above. This return is provided to you so you may return the fair market value of your boat and motor for this tax year. The return and supporting schedule must be completed and returned in order for the boat and motor to be properly returned. Department of Revenue Rule 560-11-10-.08 (3) (C).

TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER
2015	(706) 291-5125	12
DUE DATE	OWNERS PHONE NUMBER (LIST)	
4/1/2015	(706) 234-2407	

TAXPAYER NAME AND ADDRESS

GESCUTTI ROBERT D
 1 WILSON RD

TAX SITUS (WHERE YOU LIVE) CHECK ONE 01

UNINCORPORATED AREA
 CITY OF (LIST):

IF MAILING ADDRESS OR NAME IS INCORRECT,
 PLEASE CORRECT IN THE SPACE PROVIDED BELOW.

NAME:

ADDRESS:

CITY, STATE, ZIP:

PERSONAL PROPERTY STRATA		TAXPAYER RETURN VALUE AS OF JAN. 1 THIS YEAR	FOR TAX OFFICE USE ONLY (TAX ASSESSORS VALUE)
B. BOATS AND MOTORS - INCLUDE ALL CRAFT IN AND ABOVE THE WATER, THE MOTORS BUT NOT THE LAND TRANSPORT VEHICLES (TRAILERS).			
BOAT AND MOTOR NUMBER 1 GA REGISTRATION #:	0165GP		
BOAT AND MOTOR NUMBER 2 GA REGISTRATION #:			
BOAT AND MOTOR NUMBER 3 GA REGISTRATION #:			
BOAT AND MOTOR NUMBER 4 GA REGISTRATION #:			
BOAT AND MOTOR NUMBER 5 GA REGISTRATION #:			
FEDERAL DOCUMENTED VESSEL #1 COAST GUARD NUMBER:			
FEDERAL DOCUMENTED VESSEL #2 COAST GUARD NUMBER:			
TOTAL			

It shall be the duty of the County Board of Tax Assessors to investigate and to inquire into the property owned in the county for the purpose of ascertaining what property is subject to taxation and to require the proper return of the property for taxation.

TAXPAYER'S DECLARATION

"I do solemnly swear that I have carefully read (or have heard read) and have duly considered the questions propounded in the foregoing tax list, and that the value placed by me on the property returned, as shown by the list, is the true market value thereof; and I further swear that I returned, for the purpose of being taxed thereon, every species of property that I own in my own right or have control of either as agent, executor, administrator, or otherwise; and that in making this return, for the purpose of being taxed thereon, I have not attempted either by transferring my property to another or by any other means to evade the laws governing taxation in this state. I do further swear that in making this return I have done so by estimating the true worth and value of every species of property contained therein."

TAXPAYER OR AGENT X _____ TITLE _____ DATE _____

OWNERS PHONE NUMBER: (HOME) _____ (CELL) _____



2015000012



2015



000012



RETURN

INSTRUCTIONS

INSTRUCTIONS FOR PAGE ONE - MARINE PERSONAL PROPERTY TAX RETURN

1. Boats shall be returned to the county where located 184 days a year or more.
2. The return is considered public information and will be open for public inspection.
3. If taxpayer name or address is incorrect, please correct in the space provided.
4. To avoid a 10% penalty, on boats and motors not previously returned, this return must be filed no later than date listed under the due date column on page one.
5. This return is provided for the taxpayer to report the fair market value of all boats and motors owned on January 1, this year.
6. The fair market value should be listed under the column headed taxpayer return value as of January 1, this year, page 1.
7. Fair market value of boats and motors should not include the value of the trailer. Taxes on trailers are paid when tag is purchased.
8. Taxpayer declaration: This declaration must be signed by the owner or agent and dated in order for this to be a valid return.

INSTRUCTIONS FOR PAGE THREE - SCHEDULE D (MARINE)

1. This schedule is considered confidential information and not open to public inspection O.C.G.A. § 48-5-314. Returns are public information.
2. All information about the boat and motor should be listed in order for the Board of Tax Assessors to determine the proper assessment.
3. If the boat and motor has been sold or traded and you did not own on January 1, this year, please list the name and address of new owner in order for the items to be removed from your account.
4. Additional boats and motors and federal documented vessels may be listed on the back of Schedule D. Attach additional sheets if necessary.
5. Attach a listing of anything that is functionally wrong with your boat and motor. This will help the Board of Assessors make a proper assessment.
6. Boat and motor accessory equipment, such as trolling motors, should be listed on the back of Schedule D.

REFERENCE INFORMATION

1. O.C.G.A. § 48-5-299 requires the Board of Tax Assessors to diligently investigate and inquire into the property owned in the county for the purpose of ascertaining what property, real and personal, is subject to taxation in the county and to require its proper return for taxation.
2. O.C.G.A. § 48-5-300 grants the Board of Tax Assessors authority to require production of books, papers or documents, by subpoena if necessary, which may aid in determining the proper assessment.
3. O.C.G.A. § 48-5-269 grants the State Revenue Commissioner the authority to prescribe, the forms, books and records to be used for standard property tax reporting for all taxing units, including but not limited to, the forms, books and records to be used in the listing, appraisal and assessment of property and how the forms, books and records shall be compiled and kept.
4. O.C.G.A. § 48-5-269.1 grants the State Revenue Commissioner the authority to adopt and require the use of a uniform procedural manual for appraising tangible real and personal property.
5. This return and schedule is submitted to you for your completion in accordance with the above sections of the Georgia Code.

MARINE SCHEDULE D		TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER
THIS SCHEDULE IS CONSIDERED CONFIDENTIAL INFORMATION AND NOT OPEN FOR PUBLIC INSPECTION. RETURN COMPLETED FORM TO ADDRESS LISTED BELOW		2015	(706) 291-5125	12
		DUE DATE	OWNERS PHONE NUMBER (LIST)	
		4/1/2015	(706) 234-2407	
COUNTY NAME AND RETURN ADDRESS		TAXPAYER NAME AND ADDRESS		
FLOYD COUNTY BOARD OF ASSESSORS PERSONAL PROPERTY DIVISION 4 GOVERNMENT PLAZA, # 213 ROME GA 30161-2803				
TAX SITUS (WHERE YOU LIVE) CHECK ONE <input type="checkbox"/> UNINCORPORATED AREA <input type="checkbox"/> CITY OF (LIST)				
BOAT # 1				
GEORGIA COUNTY WHERE BOAT IS FUNCTIONALLY LOCATED 184 DAYS A YEAR OR MORE (LIST):				
GA REGISTRATION NO. BOAT #1 (LIST): 0165GP		MOTOR # 1		
MFG. NAME: (MAKE) FISHER MARINE		MFG. NAME: (MAKE) JOHNSON		
MODEL NAME OR #: FISHER MI		MODEL NAME OR #: 35E76		
YEAR BUILT: 1976		YEAR BUILT: 1976		
LENGTH: 15 0 HULL MATERIAL: 1		HORSEPOWER: 35		
DATE PURCHASED 1982/04/28		ELECTRIC START <input type="checkbox"/> RECOIL <input type="checkbox"/>		
PURCHASED: NEW <input type="checkbox"/> USED <input checked="" type="checkbox"/>		DATE PURCHASED: 1982/04/28		
COST: (BOAT) 1600		PURCHASED: NEW <input type="checkbox"/> USED <input checked="" type="checkbox"/>		
TOTAL COST OF BOAT & MOTOR (EXCLUDING TRAILER): 1600		COST: (MOTOR): 0		
CHECK TYPE OF BOAT <input type="checkbox"/> INBOARD <input checked="" type="checkbox"/> OUTBOARD <input type="checkbox"/> INBOARD/OUTBOARD <input type="checkbox"/> SAILBOAT <input type="checkbox"/> PONTOON <input type="checkbox"/> HOUSEBOAT <input type="checkbox"/> JET BOAT <input type="checkbox"/> JET SKI <input type="checkbox"/> OTHER (LIST):				
BOAT # 2				
GEORGIA COUNTY WHERE BOAT IS FUNCTIONALLY LOCATED 184 DAYS A YEAR OR MORE (LIST):				
GA REGISTRATION NO. BOAT #2 (LIST):		MOTOR # 2		
MFG. NAME: (MAKE)		MFG. NAME: (MAKE)		
MODEL NAME OR #:		MODEL NAME OR #:		
YEAR BUILT:		YEAR BUILT:		
LENGTH: HULL MATERIAL:		HORSEPOWER:		
DATE PURCHASED		ELECTRIC START <input type="checkbox"/> RECOIL <input type="checkbox"/>		
PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/>		DATE PURCHASED:		
COST: (BOAT)		PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/>		
TOTAL COST OF BOAT & MOTOR (EXCLUDING TRAILER):		COST: (MOTOR):		
CHECK TYPE OF BOAT <input type="checkbox"/> INBOARD <input type="checkbox"/> OUTBOARD <input type="checkbox"/> INBOARD/OUTBOARD <input type="checkbox"/> SAILBOAT <input type="checkbox"/> PONTOON <input type="checkbox"/> HOUSEBOAT <input type="checkbox"/> JET BOAT <input type="checkbox"/> JET SKI <input type="checkbox"/> OTHER (LIST):				
LIST ALL BOAT AND MOTOR ACCESSORY EQUIPMENT ON THE BACK OF THIS FORM. EXAMPLE - TROLLING MOTOR, ETC.				
Is there anything functionally wrong with your boat and motor? Yes <input type="checkbox"/> No <input type="checkbox"/> . If yes, please provide the Board of Assessors with information in order for them to make a proper assessment. (List Below)		NAME OF PURCHASER: _____		
If you sold or traded your boat and motor and did not own on January 1 this year, this section should be completed in order for the items to be removed from your account. ➤		ADDRESS: _____		
If purchased used this year, list the name and address of the previous owner. ➤		CITY, STATE, ZIP: _____		
		DATE SOLD: _____ SALE PRICE: _____		
		DESCRIPTION _____		
		NAME: _____		
		ADDRESS: _____		
		CITY, STATE, ZIP: _____		
FEDERAL DOCUMENTED VESSEL #1				
TYPE AND USE OF VESSEL: _____				
VESSEL NAME: _____ LENGTH: _____ YEAR BUILT: _____ HULL MATERIAL: _____				
HORSEPOWER AND TYPE OF ENGINE: _____ COAST GUARD NUMBER: _____				
YEAR PURCHASED: _____ PURCHASED: NEW <input type="checkbox"/> USED <input type="checkbox"/> AMOUNT OF PURCHASE: _____				
HOME PORT: _____ WHERE DOCKED: _____				
LIST ADDITIONAL BOATS AND MOTORS, AND EQUIPMENT ON THE BACK OF THIS FORM. ATTACH ADDITIONAL SHEETS IF NEEDED. ➔				

BOAT # 3

GEORGIA COUNTY WHERE BOAT IS FUNCTIONALLY LOCATED 184 DAYS A YEAR OR MORE (LIST):

GA REGISTRATION NO. BOAT #3 (LIST):

MOTOR # 3

MFG. NAME: (MAKE)

MFG. NAME: (MAKE)

MODEL NAME OR #:

MODEL NAME OR #:

YEAR BUILT:

YEAR BUILT:

LENGTH: HULL MATERIAL:

HORSEPOWER:

DATE PURCHASED

ELECTRIC START RECOIL PURCHASED: NEW USED

DATE PURCHASED:

COST: (BOAT)

PURCHASED: NEW USED

TOTAL COST OF BOAT& MOTOR (EXCLUDING TRAILER):

COST: (MOTOR):

CHECK TYPE OF BOAT INBOARD OUTBOARD INBOARD/OUTBOARD SAILBOAT PONTOON HOUSEBOAT JET BOAT JET SKI OTHER (LIST):**BOAT # 4**

GEORGIA COUNTY WHERE BOAT IS FUNCTIONALLY LOCATED 184 DAYS A YEAR OR MORE (LIST):

GA REGISTRATION NO. BOAT #4 (LIST):

MOTOR # 4

MFG. NAME: (MAKE)

MFG. NAME: (MAKE)

MODEL NAME OR #:

MODEL NAME OR #:

YEAR BUILT:

YEAR BUILT:

LENGTH: HULL MATERIAL:

HORSEPOWER:

DATE PURCHASED

ELECTRIC START RECOIL PURCHASED: NEW USED

DATE PURCHASED:

COST: (BOAT)

PURCHASED: NEW USED

TOTAL COST OF BOAT& MOTOR (EXCLUDING TRAILER):

COST: (MOTOR):

CHECK TYPE OF BOAT INBOARD OUTBOARD INBOARD/OUTBOARD SAILBOAT PONTOON HOUSEBOAT JET BOAT JET SKI OTHER (LIST):**BOAT # 5**

GEORGIA COUNTY WHERE BOAT IS FUNCTIONALLY LOCATED 184 DAYS A YEAR OR MORE (LIST):

GA REGISTRATION NO. BOAT #5 (LIST):

MOTOR # 5

MFG. NAME: (MAKE)

MFG. NAME: (MAKE)

MODEL NAME OR #:

MODEL NAME OR #:

YEAR BUILT:

YEAR BUILT:

LENGTH: HULL MATERIAL:

HORSEPOWER:

DATE PURCHASED

ELECTRIC START RECOIL PURCHASED: NEW USED

DATE PURCHASED:

COST: (BOAT)

PURCHASED: NEW USED

TOTAL COST OF BOAT& MOTOR (EXCLUDING TRAILER):

COST: (MOTOR):

CHECK TYPE OF BOAT INBOARD OUTBOARD INBOARD/OUTBOARD SAILBOAT PONTOON HOUSEBOAT JET BOAT JET SKI OTHER (LIST):

Is there anything functionally wrong with your boat and motor? Yes
 No . If yes, please provide the Board of Assessors with information
 in order for them to make a proper assessment. (List Below)

If you sold or traded your boat and motor and did not own
 on January 1 this year, this section should be completed
 in order for the items to be removed from your account. ➤

If purchased used this year, list the name and
 address of the previous owner. ➤

NAME OF PURCHASER: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 DATE SOLD: _____ SALE PRICE: _____
 DESCRIPTION _____

NAME: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____

FEDERAL DOCUMENTED VESSEL #2

TYPE AND USE OF VESSEL: _____

VESSEL NAME: _____ LENGTH: _____ YEAR BUILT: _____ HULL MATERIAL: _____

HORSEPOWER AND TYPE OF ENGINE: _____ COAST GUARD NUMBER: _____

YEAR PURCHASED: _____ PURCHASED: NEW USED AMOUNT OF PURCHASE: _____

HOME PORT: _____ WHERE DOCKED: _____

BOAT AND MOTOR ACCESSORY EQUIPMENT (LIST): _____

APPLICATION FOR FREEPORT EXEMPTION INVENTORY

RETURN COMPLETED FORM TO ADDRESS LISTED BELOW

THIS FORM MUST BE RETURNED WITH INFORMATION SUBMITTED TO OUR OFFICE

950-175

4 LINE ADDRESS

TAX YEAR	IF ASSISTANCE NEEDED CALL	ACCOUNT NUMBER
2015	(706) 291-5125	950
DUE DATE	MAP AND PARCEL I.D. NO.	NAICS NO.
4/1/2015	I15W 246	311812

BUSINESS PHYSICAL LOCATION 01

IF MAILING ADDRESS OR NAME IS INCORRECT, PLEASE CORRECT IN THE SPACE PROVIDED BELOW.

IF MAILING ADDRESS OR NAME IS INCORRECT, PLEASE CORRECT IN THE SPACE PROVIDED BELOW

NAME:

ADDRESS:

CITY, STATE, ZIP:

The last day for filing this application to receive full exemption is listed in the due date column above.

NOTE: Most counties do not accept metered mail dates as filing date unless counter stamped by the post office. Be sure that the date of deposit and the postmark date are the same if mailing is close to the deadline.

In all counties having a filing date of April 1, you may still receive a partial exemption for a late filing. The amount of the exemption you will receive is as follows: April 2 - April 30 (66.67% of the full exemption), May 1-May 31 (58.33%), June 1 (50%). Failure to file by June 1 shall constitute waiver of the entire exemption for the year (0.0%).

1. DESCRIBE THE TYPE OF BUSINESS:

2. Inventory must be reported at its full cost at level of trade. Full cost must include all freight, burden, overhead, and any other charges incurred from the original state as a raw material to its resting place on January 1.

3. If inventory and exemption are not as of January 1, they must be adjusted to January 1, in accordance with the provisions of Georgia Code 48-5-10.

4. LIST THE METHOD OF INVENTORY VALUATION USED: _____ METHOD OF INVENTORY COST IDENTIFICATION: _____

5. SUMMATION OF TAXABLE INVENTORY:

PLEASE COMPLETE THE FOLLOWING

INVENTORY NOT ELIGIBLE FOR FREEPORT

- A. PACKAGING MATERIALS, STAMPING OR SHIPPING SUPPLIES ON HAND AS OF JANUARY 1. \$ _____
- B. OTHER EXPENSED SUPPLIES (i.e. GASOLINE, OFFICE SUPPLIES, etc.) ON HAND AS OF JANUARY 1. \$ _____
- C. SPARE PARTS INVENTORY ON HAND AS OF JANUARY 1. \$ _____
- D. 100% FULL COST OF FINISHED GOODS HELD FOR MORE THAN 12 MONTHS AS OF JANUARY 1. \$ _____
- E. 100% FULL COST OF MERCHANDISE INVENTORY PURCHASED FOR RESALE ON HAND AS OF JANUARY 1. \$ _____

INVENTORY ELIGIBLE FOR FREEPORT

- F. 100% FULL COST OF RAW MATERIALS AS OF JANUARY 1. \$ _____
- G. 100% FULL COST OF GOODS IN PROCESS ON JANUARY 1. \$ _____
- H. 100% FULL COST OF FINISHED GOODS HELD LESS THAN 12 MONTHS AS OF JANUARY 1. \$ _____

I. TOTAL INVENTORY ON JANUARY 1ST. ADD LINES A. THROUGH H. (SAME AS TOTAL FROM SCHEDULE B) \$ _____
 (Current market value at your level of trade)

J. LESS FREEPORT EXEMPTION: (1 AND 2 BELOW ARE FOR MANUFACTURING OR PRODUCTION BUSINESS).

1. RAW MATERIALS, GOODS IN PROCESS

_____ X* _____ = (_____)
From F and G Above County Exemption % Exemption Amount

2. FINISHED GOODS OF GA. MANUFACTURER (HELD FOR LESS THAN 12 MO.)

_____ X* _____ = (_____)
From H Above County Exemption % Exemption Amount

3. FINISHED GOODS DESTINED FOR OUT OF STATE SHIPMENT (FOR WHOLESALE OR DISTRIBUTION BUSINESSES)

_____ X* _____ = (_____)
From Section 6C line E Back Page County Exemption % Exemption Amount

* NOTE: COUNTY EXEMPTION % WILL BE 20, 40, 60, 80, OR 100 PERCENT.

K. TOTAL FREEPORT EXEMPTION (ADD 1, 2 AND 3 ABOVE) (ENTER ON PAGE 1 LINE P OF TAX RETURN) \$ (- _____)

L. TOTAL TAXABLE INVENTORY AT 100% OF MARKET VALUE AT YOUR LEVEL OF TRADE.(ENTER ON PAGE 1 LINE I OF TAX RETURN) \$ _____



EXPLANATION OF WHAT IS EXEMPTED BY FREEPORT

MANUFACTURING OR PRODUCTION BUSINESSES

6A. Inventory of goods in the process of manufacture or production which shall include all finished goods and raw materials held for direct use or consumption in the ordinary course of the taxpayers manufacturing or production business in this state. This exemption shall apply to tangible personal property which is substantially modified, altered or changed in the ordinary course of the taxpayer's manufacturing, processing or production operations in this state. For purpose of this exemption "Raw Materials" shall mean any material, whether crude or processed, that can be converted by manufacturing, processing, or a combination thereof into a new and useful product but shall not include unrecovered, unextracted or unsevered natural resources or packing materials.

6B. Inventory of finished goods manufactured or produced within this state in the ordinary course of the taxpayer manufacturing or production business when held by the original manufacturer or producer of such goods. This exemption shall be for a period not exceeding (12) months from the date such property is produced or manufactured. For purposes of this explanation "Finished Goods" shall mean goods, wares, and merchandise of every character and kind but shall not include unrecovered, unextracted, or unsevered natural resources or raw materials or goods in the process of manufacture or production or the stock-in trade of a retailer.

WHOLESALE OR DISTRIBUTION BUSINESSES

6C. Inventory of finished goods which, on January 1, are stored in a warehouse, dock, or wharf, whether public or private, and which are destined for shipment to a final destination outside this state and inventory of finished goods which are shipped into this state from outside this state and stored for transshipment to a final destination outside this state. The exemption shall be for a period not exceeding (12) months from the date such property is stored in this state. Such period shall be determined based on application of a first-in, first-out method of accounting for the inventory. The official books and records of the warehouse, dock, or wharf where such property is being stored shall contain a full, true, and accurate inventory of all such property, including the date of the receipt of the property, the date of withdrawal of the property, the point of origin of the property, and the point of final destination of the same, if known.

SUMMARY FOR THIS EXEMPTION: (6C)

A. Total finished goods inventory shipments from this county during the last complete calendar year: _____

B. Total finished goods inventory shipments from this county during the last complete calendar year to an out-of State destination: _____

C. Percentage of out-of State shipments: (B divided by A) _____ %

D. Total finished goods inventory on January 1 of this year: (Exclude inventory stored over (12) months) _____

E. Estimated out-of-State shipments this year: (multiply C times D) Enter under 5.J.3 front page _____

7. If property is exempt under freeport, it is exempt either as covered by category 6A, 6B, 6C. The same property cannot be exempted under more than one of these three categories.

8. PHYSICAL LOCATION OF INVENTORY IN THIS COUNTY. (List)

9. LOCATION OF SUPPORTING BOOKS AND RECORDS PERTAINING TO THIS INVENTORY. (List)

10. NAME AND TELEPHONE NUMBER OF RESPONSIBLE INDIVIDUAL TO CONTACT REGARDING ANY QUESTIONS PERTAINING TO THIS INVENTORY.

NAME _____ PHONE _____ CELL _____

OATH OF PERSON MAKING APPLICATION FOR EXEMPTION:

"I do solemnly swear, that I have carefully read (or have heard read) and have duly considered the questions propounded in the foregoing tax list, and that the value placed by me on the property listed as shown, is the true market value there of, and I further swear, or affirm, that I returned, for the purpose of being taxed thereon, every species of inventory that I own in my right, or have control of, either as agent, executor, administrator, or otherwise; and in making this application, for the purpose of being taxed thereon, I have not attempted, either by transferring my property to another or by any other means, to evade the laws governing taxation in this state. I do further swear, or affirm, that in making this application, I have done so by estimating the true worth and value of every species of inventory contained therein."

(Taxpayer Signature)	(Title)	(Date)
(Preparers Signature)	(Title)	(Date)

DISPOSITION OF THE COUNTY BOARD OF TAX ASSESSORS	DATE _____
-APPROVED-	- DISAPPROVED -

NOTICE

LAST DAY FOR FILING FREEPORT EXEMPTION WITHOUT PENALTY IS APRIL 1, 2015. THE PENALTY WILL APPLY ON ANY RETURNS RECEIVED OR POSTMARKED AFTER APRIL 1, 2015. U.S. POSTMARK ON OR BEFORE APRIL 1, IS THE ONLY ACCEPTABLE DATE FOR TIMELY FILING. METERED MAIL IS NOT ACCEPTED AS DATE FILED AND WILL BE CONSIDERED LATE IF RECEIVED IN THE OFFICE AFTER APRIL 1, 2015. CAUTION! CHECK WITH THE POST OFFICE TO BE SURE THAT THE DATE OF DEPOSIT AND THE POSTMARK DATE ARE THE SAME IF MAILING IS CLOSE TO THE DEADLINE. WHERE METERED MAIL IS COUNTER STAMPED BY THE POST OFFICE, IT MUST BE RECEIVED BY THE POST OFFICE BY 5:00 PM AND COUNTER STAMPED TO BE TIMELY FILED. THE POST OFFICE DATE IS THE ONLY ACCEPTABLE DATE. ALL MAILINGS MUST HAVE A U.S. POSTMARK TO BE CONSIDERED AS TIMELY FILED. ALL METERED MAIL WILL BE RECEIVED ON THE DATE MAIL ARRIVED IN THE OFFICE.

APPLICATION MUST BE COMPLETED WITH INVENTORY VALUES IN ORDER TO BE CONSIDERED AS TIMELY FILED. AN APPLICATION SIGNED WITH NO INFORMATION AND VALUES IS NOT CONSIDERED AS TIMELY FILED.

FREEPORT PARTIAL EXEMPTIONS WERE ALLOWED STARTING IN 1998. SEE NOTICE WRITTEN IN RED ON FORM FOR PARTIAL EXEMPTION ON LATE FILING. U.S. POSTMARK ON OR BEFORE THE LAST DAY FOR FILING IS THE ONLY ACCEPTABLE DATE FOR PARTIAL EXEMPTIONS.

(APRIL 2 - APRIL 30 ALLOWED 66.67% OF THE FULL EXEMPTION)

(MAY 1 - MAY 31 ALLOWED 58.33% OF THE FULL EXEMPTION)

(JUNE 1ST ALLOWED 50% OF THE FULL EXEMPTION)

(JUNE 2ND SHALL CONSTITUTE A WAIVER OF THE ENTIRE EXEMPTION 0%)

THERE IS NO LEGAL BASIS FOR GRANTING AN EXTENSION OF TIME OR WAIVING THE PENALTY. PLEASE DO NOT ASK FOR EITHER. AMENDED RETURNS ARE ONLY CONSIDERED FOR AMENDING PREVIOUSLY FILED VALUES FOR THE CURRENT TAX YEAR. PENALTIES APPLY FOR ANY CHANGES IN VALUE OR AMENDMENTS NOT PREVIOUSLY FILED.

**IN ORDER TO PROCESS THE FREEPORT EXEMPTION APPLICATION
PLEASE SUBMIT REQUESTED DOCUMENTATION BELOW**

INVENTORY VERIFICATION FOR 12/31/2015 (BALANCE SHEET, TRIAL BALANCE, GENERAL LEDGER, ETC. for 12/31/2014 VERIFYING TOTAL S FOR INVENTORY, FURNITURE, FIXTURES, MACHINERY AND EQUIPMENT)

FOR WHOLESALERS OR DISTRIBUTORS - SALES DOCUMENTATION FOR CALENDAR YEAR 2015 DETAILING TOTAL SALES MADE FROM THIS LOCATION AND SALES MADE INSIDE GEORGIA AND SALES MADE OUTSIDE GEORGIA.

FREEPORT EXEMPTION WILL NOT BE CONSIDERED UNLESS THIS INFORMATION IS SUBMITTED.

Acct: 0000950