COMMERCIAL / AGRICULTURAL/ INDUSTRIAL
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE

County Number	Parcel #	Act Number	Personal Prop. Type	DO NOT USE - FOR ASSESSORS USE ONLY Date received:_____ By:_____
Name and address of personal property listed here: (please make any corrections here)				Please indicate location of personal property: (please make any changes here)

PERSONAL PROPERTY DETAIL LISTING: Please list all personal property you own and use in your business or operation (Include **all** installed costs)—do not list licensed vehicles (please indicate any changes to the following list by lining out the items that have been removed and filling in th e new items purchased) (duplicate form as necessary). **Describe item, quantity, make, model, serial#, year built, year acquired and year installed.** The column titled "Reported Cost" means the cost of the equipment and **all** installed costs to put the equipment in operation. Please indicate if this cost is new and installed or a used purchase price by checki ng the appropriate column under "Type of Cost". Please sign the reporting rendition on the bottom of page 2 and return the completed form by **March 1.** If property was located in more than one county in a prior calendar year, please attach Addendum 25/40 to this Declaration Form. Please fill out one addendum form per item of personal property.

NAICS CODE:

_____

Item	Quantity	Make	Model	Serial #	Year Built	Reported Year Acquired	Year Installed	Reported *Cost	*Type of Cost Check One	
									New Installed	Used Purchased
Please see second page for leased equipment reporting requirements.										

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PERSONAL PROPERTY YOU LEASE, LOAN, OR RENT LISTING: Please list only those items you are not responsible for here.
(please indicate any changes by lining out the items that have been removed and filling in the new items purchased)

NAICS CODE: _____

Owner and Address of Leased Property	Property Description	Cost of Leased Property	Term (From - To)	Annual Rent

W.S. 39-13-107 (a)(i) I...the owner of (or agent, etc., as the case may be) do solemnly swear or affirm that the above and foregoing listed property is a full, true, correct and complete list of all property owned by me or under my control as agent or otherwise, and that I have not failed or neglected to list for taxation for the year _____, all property of which I am the owner of or of which I have control as agent, guardian, administrator or otherwise, in the county of_____, State of Wyoming and that I have not connived at any violation or evasion of the requirements of law in relation to the assessment of property for taxation. W.S. 18-3-205(b) Any person who fails to return any taxable property owned by him or under his control is guilty of a misdemeanor and upon conviction shall be fined not exceeding five hundred dollars ($500.00), imprisoned in the county jail not exceeding ninety (90) days, or both.

Type or print your name here: _____

Signature of owner/agent_____ Title _____Date _____

Telephone number _____ Fax Number _____ Email: _____