

**CUMBERLAND COUNTY TAX LISTING FORM FOR THE YEAR 2009**

Page: \_\_\_\_\_ Filing No. \_\_\_\_\_

1 TDIS:	PC:	SPEC USE:	EXCO:	PARCEL ID NUMBER	LOCATION					
<b>SEE #2 ON BACK FIRST</b>										
2 TOTAL NUMBER OF DOGS/CATS OWNED? ____ ARE YOU 65 OR OLDER? ____ DO YOU OWN AND REQUIRE USE OF A SEEING-EYE OR AID DOG? ____ IF YOU ARE A HUNTER, HOW MANY HUNTING DOGS DO YOU OWN? ____ IF YOU ARE A BREEDER, HOW MANY BREEDING DOGS DO YOU OWN? ____ IF YOU ARE A BREEDER, HOW MANY BREEDING CATS DO YOU OWN? ____ NUMBER OF STERILIZED DOGS ____ NUMBER OF STERILIZED CATS ____ NUMBER OF UNSTERILIZED DOGS ____ NUMBER OF UNSTERILIZED CATS ____				11 <b>IMPORTANT</b> FAILURE TO LIST "PERMANENTLY TAGGED" OR "UNLICENSED VEHICLES" WILL RESULT IN LATE LISTING PENALTY. APPLICATION OF PENALTIES WILL BE STRICTLY ENFORCED. AFFIRMATION OF PROPERTY OWNER: GS 105-310-311 UNDER PENALTIES PRESCRIBED BY LAW, I HEREBY AFFIRM THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS LISTING, INCLUDING ANY ACCOMPANYING STATEMENTS, IS TRUE AND COMPLETE.						
3 YOUR EMPLOYER:		7 YOUR WORK PHONE:		SIGNATURE OF OWNER OR AGENT _____ DATE 7 /						
4 SPOUSE'S EMPLOYER:		8 SPOUSE'S WORK PHONE:								
5 YOUR HOME PHONE:		9 DO YOU LIVE ON THIS PARCEL <input type="checkbox"/> YES <input type="checkbox"/> NO		12 See back of form - item 12 for information pertaining to						
6 CELL PHONE:		10 TOTAL VALUE OF RENTAL HOUSEHOLD PERSONAL		VETERAN'S and ELDERLY or PERMANENTLY DISABLED residents.						
PERSONAL PROPERTY	13	CATEGORY	YR	MAKE	MODEL	VEHICLE ID NO	YOUR COST	TAX VALUE	<b>TAX OFFICE USE-SUMMARY</b>	
									PERSONAL PROPERTY BOATS MOBILE HOMES FARM EQUIP. OTHER AIRCRAFT HHPP EXEMPT TOTAL TAXABLE →	
	STATE SPECIFIC CONDITION OF PERSONAL PROPERTY. LIST UNLICENSED VEHICLES AND BOAT TRLS.									
MOBILE HOME	14	YEAR	MAKE	SIZE	SERIAL NUMBER	CONDITION	YOUR COST	TAX VALUE	<b>DO NOT WRITE IN ABOVE SECTION</b>	
									TO AVOID A LATE LISTING PENALTY, PLEASE COMPLETE AND RETURN NO LATER THAN Feb 2nd  CHANGE OF ADDRESS	
	STATE IF MOBILE HOME IS A RENTAL <input type="checkbox"/> yes <input type="checkbox"/> no									

15

16 LAND OWNER'S NAME: \_\_\_\_\_ (DETACH IF NO IMPROVEMENTS)

LATE LIST

17 DESCRIBE IMPROVEMENTS (ADDITIONS, NEW CONSTRUCTION, DECKS, OUTBUILDINGS, REMODELING, ETC.) SINCE LAST LISTING.

**2009 NEW BUILDING REPORT**

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 PARCEL I.D. NUMBER: \_\_\_\_\_  
 LR: \_\_\_\_\_ RR: \_\_\_\_\_ IF THIS IMPROVEMENT IS LOCATED ON LAND OWNED BY ANOTHER PERSON, GIVE NAME OF LAND OWNER.  
**NEW BUILDINGS & IMPROVEMENTS BUILT IN 2008**

TYPE OF CONSTRUCTION: CHECK ONE(S) THAT APPLY. NEW BUILDING \_\_\_\_ REMODELING \_\_\_\_ NEW ADDITION \_\_\_\_ ENCLOSURE \_\_\_\_ HOUSE \_\_\_\_ DOUBLE WIDE MOBILE HOME \_\_\_\_

SWIMMING POOL \_\_\_\_ STORE \_\_\_\_ OFFICE \_\_\_\_ WAREHOUSE \_\_\_\_ GARAGE \_\_\_\_ SHOP \_\_\_\_ STORAGE BUILDING \_\_\_\_ BARN \_\_\_\_ POULTRY HOUSE \_\_\_\_ GRAIN BINS \_\_\_\_ (BU. CAP. \_\_\_\_)  
 SHED \_\_\_\_ DECK \_\_\_\_ OTHER \_\_\_\_\_

OUTSIDE DIMENSIONS OF STRUCTURE: VERY IMPORTANT \_\_\_\_\_ X \_\_\_\_\_ INTERIOR: SQ. FT. HEATED LIVING AREA \_\_\_\_\_  
 (L) (W)

EXTERIOR WALLS: WOOD SIDING \_\_\_\_ BRICK VEN. \_\_\_\_ CONC. BLOCK \_\_\_\_ METAL \_\_\_\_ OTHER \_\_\_\_ PLUMBING: # OF FIXTURES \_\_\_\_ (LAVATORIES, SINKS, SHOWERS, ETC)

SQ. FT. BASEMENT AREA UNFINISHED: \_\_\_\_\_ SQ. FT. BASEMENT AREA FINISHED: \_\_\_\_\_ NUMBER OF STORIES: 1S \_\_\_\_ 1 1/2 S \_\_\_\_ 2 S \_\_\_\_ 2 1/2 S \_\_\_\_ 3 S \_\_\_\_

CENTRAL AIR CONDITION: YES \_\_\_\_ NO \_\_\_\_ NUMBER OF FIREPLACES: \_\_\_\_\_ NUMBER OF CHIMNEYS: \_\_\_\_\_

PERCENTAGE OF COMPLETION ON JAN. 1, 2009: \_\_\_\_\_ % TOTAL COST OF CONSTRUCTION AS JAN. 1, 2009: \$ \_\_\_\_\_

IF A HOUSE OR BUILDING WAS MOVED TO THIS LAND IN 2008 GIVE DETAILS BELOW: LOCATION MOVED FROM: \_\_\_\_\_

SIZE \_\_\_\_\_ HOUSE \_\_\_\_\_ BARN \_\_\_\_\_ GARAGE \_\_\_\_\_ STORAGE BUILDING \_\_\_\_\_ SHED \_\_\_\_\_ POULTRY HOUSE \_\_\_\_\_ OTHER \_\_\_\_\_

IF A HOUSE OR BUILDING WAS DESTROYED OR MOVED AWAY FROM THIS LAND IN 2008 PLEASE GIVE DETAILS: SIZE \_\_\_\_\_ HOUSE \_\_\_\_\_ BARN \_\_\_\_\_

GARAGE \_\_\_\_\_ STORAGE BLDG. \_\_\_\_\_ SHED \_\_\_\_\_ POULTRY HOUSE \_\_\_\_\_ OTHER \_\_\_\_\_

IF HOUSE OR BUILDING MOVED AWAY: NEW NAME OF OWNER \_\_\_\_\_ LOCATION MOVED TO \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ (daytime) \_\_\_\_\_ (night)

**SEE REVERSE SIDE FOR INSTRUCTIONS**