

RETURN TO: OFFICE OF TAX ADMINISTRATION PO BOX 449 FAYETTEVILLE NC 28302-0449

FOR DEPARTMENT USE ONLY →	BILL NUMBER	TAX DISTRICT	PENALTY	VALUE
STANDARD INDUSTRIAL CLASSIFICATION CODE (SIC#) _____			LOCATION OF RECORDS _____	
REAL ESTATE OWNED BY _____			DATE BUSINESS BEGAN IN THIS COUNTY ____/____/____	
FED. ID# _____			DATE BUSINESS (FISCAL) YEAR ENDS ____/____/____	
PRINCIPAL TYPE OF BUSINESS IN THIS COUNTY _____			CHECK ONE > CORPORATION _____ SOLE PROPRIETORSHIP _____ PARTNERSHIP _____ UNINCORPORATED ASSOCIATION _____ OTHER(SPECIFY) _____	
ACTUAL BUSINESS LOCATION			CHECK BUSINESS CATEGORY > RETAIL _____ WHOLESALE _____ MANUFACTURING _____ SERVICE _____ LEASING/RENTAL _____ FARMING _____ OTHER(SPECIFY) _____	
NAME _____			OTHER N.C. COUNTIES WHERE PERSONAL PROPERTY IS LOCATED _____	
COMPANY _____			CONTACT PERSON FOR AUDIT: ADDRESS & PHONE: _____	
ADDRESS _____			IF OUT OF BUSINESS COMPLETE THIS SECTION > DATE CLOSED ____/____/____	
CITY _____ STATE _____ ZIP _____			PROPERTY STORED AT: CHECK ONE: SOLD _____ STILL OWN NOW PERSONAL _____ BUYER'S NAME: _____ BUYER'S ADDRESS & PHONE: _____	

SCHEDULE A. DEPRECIABLE PERSONAL PROPERTY LIST AT 100% COST BY YEAR OF ACQUISITION INCLUDING ALL FULLY DEPRECIATED ASSETS IN YOUR POSSESSION.								THIS LISTING IS SUBJECT TO VERIFICATION WITH INCOME TAX RETURNS FILED WITH N.C. DEPT. OF REVENUE.
YEAR ACQUIRED	MACHINERY & EQUIPMENT 1	FURNITURE & FIXTURES 2	LEASEHOLD & IMPROVEMENTS 3	EXPENSED ITEMS 4	SIGNS 5	COMPUTER EQUIPMENT 6	COPIERS 7	TAX OFFICE USE
2011								
2010								
2009								
2008								
2007								
2006								
2005								
2004								
2003								
2002								
2001								
2000								
1999								
PRIOR								
TOTALS								

SEE INSTRUCTIONS ENCLOSED

GROUP (8) FULLY DEPRECIATED ITEMS IN YOUR POSSESSION JANUARY 1:				100% COST
FULLY DEPRECIATED ITEMS NOT INCLUDED IN SCHEDULE A:				
GROUP (9) CONSTRUCTION IN PROGRESS		GROUP (10) SUPPLIES -- SEE INSTRUCTIONS		
LIST IN DETAIL ALL EXPENDITURES FOR PERSONAL PROPERTY IN CIP ACCOUNT ON JAN. 1, BUT NOT INCLUDED ABOVE - SEE INSTRUCTIONS	TYPE	COST	TYPE	COST
	(1) OFFICE SUPPLIES		(5) MEDICAL/DENTAL	
	(2) FUELS		(6) BEAUTY/BARBER	
	(3) SPARE PARTS		(7) PACKAGING MATERIALS	
	(4) MAINTENANCE/JANITORIAL		TOTAL	
TOTAL CIP: \$				

SCHEDULE B. ACQUISITIONS AND/OR DISPOSALS OF MACHINERY, EQUIPMENT, FURNITURE AND FIXTURES ETC., IN THE PRIOR YEAR (ATTACH SCHEDULE IF NECESSARY) DESCRIBE IMPROVEMENTS/ADDITIONS, NEW CONSTRUCTION SINCE LAST LISTING.				
ACQUISITIONS - ITEMIZE IN DETAIL	100% ORIGINAL COST INSTALLED	DISPOSALS - ITEMIZE IN DETAIL	YEAR ACQUIRED	100% ORIGINAL COST
TOTAL			TOTAL	

LISTINGS WILL NOT BE ACCEPTED MARKED "SAME AS LAST YEAR"

