

**SHELBY COUNTY TAXING OFFICIAL: DON ARMSTRONG**  
**MAILING ADDRESS: P.O. BOX 1269**  
**COLUMBIANA, AL 35051**

**TELEPHONE #: (205) 670-6929**  
**TAX YEAR: 2010**

**BUSINESS PERSONAL PROPERTY RETURN**  
**(FILE THIS TAX RETURN BETWEEN OCT 1 & DEC 31 WITH THE ABOVE TAXING OFFICIAL)**

OWNER NAME:			
MAILING ADDRESS:		ACC #:	
		PRC #:	
DOING BUSINESS AS:		MUNICIPALITY:	
PHYSICAL ADDRESS:		DATE ESTABLISHED:	
CITY, STATE, ZIP CODE:		LAND OWNER:	

\_\_\_\_\_ BUSINESS CLOSED & DATE

\_\_\_\_\_ NO PERSONAL PROPERTY

TITLE 40, CHAPTER 7 CODE OF ALABAMA 1975, REQUIRES THAT EVERY PERSON REPORT TO THE COUNTY TAXING OFFICIAL EACH YEAR A COMPLETE LIST OF ALL BUSINESS PERSONAL PROPERTY OWNED BY THE TAXPAYER ON OCTOBER 1 OF THE TAX YEAR, EXCEPT PROPERTY WHICH IS OR MAY BE ASSESSED BY THE ALABAMA DEPARTMENT OF REVENUE. THIS FORM MUST BE COMPLETELY FILLED OUT AND ALL INSTRUCTIONS FOLLOWED IN ORDER TO COMPLETE THE ASSESSING PROCESS FOR BUSINESS PERSONAL PROPERTY. A COMPLETE ITEMIZED LISTING OF ALL PERSONAL PROPERTY OWNED ON OCTOBER 1 OR A COPY OF THE DEPRECIATION SCHEDULE USED IN PREPARING YOUR INCOME TAX RETURN, AND/OR A COMPUTER DISK LISTING OF THE PROPERTY OWNED BY THE TAXPAYER AT THE CLOSE OF THE FISCAL YEAR NEXT PRECEDING OCTOBER MUST BE PROVIDED. THE DEPRECIATION SCHEDULE MUST BE ADJUSTED FOR ADDITIONS AND DELETIONS SO THAT IT WILL CONTAIN PROPERTY OWNED BY THE BUSINESS ON THE OCTOBER 1 LIEN DATE, REGARDLESS OF THE REPORTING METHOD CHOSEN, YOU MUST PROVIDE THE NAME OR TYPE OF PERSONAL PROPERTY, THE YEAR OF ACQUISITION, THE COST WHEN ACQUIRED AND ANY PROPERTY WHICH HAS BEEN FULLY DEPRECIATED BUT WAS STILL OWNED ON OCTOBER 1. THE REPORTED COST SHOULD INCLUDE PRICE, FREIGHT AND INSTALLATION COST, SALES AND/OR USE TAX, EXTRA FOUNDATIONS NECESSARY TO SUPPORT THE EQUIPMENT, AND OTHER COST INCURRED FOR THE USE OF THE PROPERTY. STATE LAW REQUIRES THAT THIS FORM BE SIGNED BY THE TAXPAYER OR OFFICIAL AGENT. THE ITEMIZED LIST SHOULD INCLUDE ALL FIXED ASSETS, INCLUDING BUT NOT LIMITED TO , FURNITURE, FIXTURES, COMPUTERS, MACHINERY, EQUIPMENT, UNLICENSED MOTOR VEHICLES, AND ADD-ON EQUIPMENT.

SUPPLIES AND MATERIALS USED IN THE OPERATIONS OF THE BUSINESS THAT ARE NOT FOR SALE ARE TAXABLE AND MUST BE REPORTED. (i.e., office supplies, spare parts, and other consumable items.)

1. What was the cost of the supplies and materials on hand as of October 1 ? \_\_\_\_\_ (or monthly average)
2. Do you have licensed motor vehicles having "add-on" or "specialized" equipment (i.e., dump bodies, box type bodies, cement drums, etc.) affixed to them?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, and you are able to separate the cost of the add-on equipment from the total cost of the motor vehicle, complete **PART A**. If you are unable to separate the cost of the add-on equipment complete **PART B**.
3. Do you own aircraft? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, complete **PART C**.
4. Do you have construction in progress or holding account? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, complete **PART D** using cost as of October 1.
5. Do you lease or rent any items of personal property from someone such as machinery, equipment, computers, furniture, fixtures, aircraft, or motor vehicles?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No.  
 If yes, complete **PART E** (State of Leased or Rented Personal Property)

**LEASING COMPANIES** having equipment located in this county must attach a complete listing of personal property. Include with this listing the lessee and address or physical location of each item of personal property.

6. Do you have personal property in your possession or located on your premises that is owned by someone else, excluding any leased or rented equipment listed in **PART E**? \_\_\_\_\_ Yes \_\_\_\_\_ No

Person to contact if additional information is required:

\_\_\_\_\_ Day Time Phone No. (\_\_\_\_\_) \_\_\_\_\_

**NOTICE ALL BUSINESS PERSONAL PROPERTY RETURNS ARE SUBJECT TO AUDIT AND APPROPRIATE PENALTIES AND ESCAPE TAXES AS FOUND IN THE TITLE 40 CHAPTER 7, CODE OF ALABAMA 1975.**

I hereby affirm that, to the best of my knowledge and belief, this listing, including any accompanying statements, schedules and other information, are true and complete. All forms not completely filled out and signed will be returned.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Title: \_\_\_\_\_



Account Number: \_\_\_\_\_

**PART B  
STATEMENT OF 'ADD-ON' EQUIPMENT**

USE THIS SECTION TO LIST COMMERCIAL MOTOR VEHICLES HAVING ADD-ON EQUIPMENT AFFIXED TO THE VEHICLE, WHEN THE OWNER IS UNABLE TO SEPARATE THE COST OF THE ADDED VALUE EQUIPMENT FROM CAB& CHASSIS. INCLUDES BUT NOT LIMITED TO BOX TYPE BODIES, DELIVERY & MOVING TRUCK BODIES, DUMPING MECHANISMS, WRECKER RIGS, CHEMICAL TANKS, REFRIGERATION & COMMUNICATION EQUIPMENT, BEVERAGE RACKS, CEMENT DRUMS, TOOL BOXES, CRANES, BOOMS, BUS BODIES AND SEATES AND VARIOUS OTHER BODY TYPES AND EQUIPMENT, IF PURCHASED SEPARATELY:

MODEL YEAR	MAKE	MODEL	TAG NUMBER	VIN	VEHICLE DESCRIPTION	DATE ACQUIRED	PURCHASE PRICE

**PART B-1**

**STATEMENT OF TRUCK TRAILERS, TRACTOR TRAILERS AND SEMI-TRAILERS FOR WHICH THE OWNER HAS OBTAINED A PERMANENT LICENSE PLATE**

THIS SECTION IS TO BE USED TO LIST TRUCK TRAILERS, TRACTOR AND SEMI-TRAILERS, FOR WHICH THE OWNER HAS PURCHASED A PERMANENT TRAILER TAG FROM THE COUNTY WHERE THE PROPERTY IS BASED. PURSUANT TO ACT #2006-276 PASSED BY THE ALABAMA LEGISLATURE DURING THE 2006 REGULAR SESSION, ALL TRUCK TRAILER, TRACTOR TRAILER AND SEMI-TRAILER OWNERS PURCHASING A LICENSE PLATE UPON PAYMENT OF A ONE-TIME FEE PER LICENSE PLATE SHALL ASSESS THE PROPERTY ON THIS RETURN ANNUALLY BETWEEN OCTOBER 1 AND DECEMBER 31. IF ADDITIONAL SPACE IS NEEDED, A SEPARATE SCHEDULE MAY BE ATTACHED.

MODEL YEAR	MAKE	MODEL	TAG NUMBER	VIN	TRAILER DESCRIPTION	DATE ACQUIRED	PURCHASE PRICE

**PART C**

**STATEMENT OF AIRCRAFT**

(AIRPLANES, AIRSHIPS, HOT AIR BALLOONS, AND AVIONIC EQUIPMENT)

**AIRPLANES AND AIRSHIPS:**

AIRCRAFT NUMBER	SERIAL NUMBER	YEAR	MAKE	MODEL	ACQUISITION DATE – MM/DD/YYYY	ACQUISITION COST

**HOT AIR BALLOONS:**

ACQUISITION DATE – MM/DD/YY	COST	SUGGESTED LIFE IN HOURS	HOURS USED

Account Number: \_\_\_\_\_

**AVIONIC EQUIPMENT: (OTHER THAN STANDARD OPERATING EQUIPMENT):**

ACQUISITION DATE – MM/DD/YYYY	ITEM	COST

**PART D**

**STATEMENT OF PERSONAL PROPERTY CARRIED AS CONSTRUCTION IN PROGRESS**

ITEM	COST TO DATE	ANTICIPATED TOTAL COST	ANTICIPATED IN SERVICE DATE – MM/DD/YYYY

**PART E**

**STATEMENT OF LEASED OR RENTED PERSONAL PROPERTY**

(INCLUDING FURINTURE, FIXTURES, COMPUTERS, MACHINERY, EQUIPMENT, AIRCRAFT AND MOTOR VEHICLES)

NAME AND ADDRESS OF LESSOR	TYPE AND QUANTITY	DATE OF LEASE MM/DD/YYYY	TERM OF USE	SELLING PRICE IF KNOWN	ANNUAL RENT

**PART F**

**STATEMENT OF OTHER PERSONAL PROPERTY LOCATED ON YOUR PREMISES**

NAME OF OWNER	ADDRESS	AREA OCCUPIED	TYPE OF PROPERTY