COMMERCIAL / AGRICULTURAL/ INDUSTRIAL PERSONAL PROPERTY—OWNED DECLARATION SCHEDULE

County Number	Parcel #	Act Number	Personal Prop. Type	DO NOT	USE - FOR ASSESSORS USE ONLY
Name and address of pe	ersonal property list	ed here: (please make any	y corrections here)	Date received: Please indicate location of personal pr	By: roperty: (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 the 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 checking 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:	
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Item	Quantity	Make	Model	Serial #	Year Built	Reported Year	Year Installed	Reported *Cost	*Type Chec	e of Cost ek One
						Acquired			New	Used
										Purchased
		_						_		
	Please see second page for leased equipment reporting requirements.									

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County Number Parcel #	Act Number	Personal Prop. Type	DO NOT USE - FOR ASSESSORS USE ONLY						
			Date receiv	ved:	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 YOU LEA (please indicate any changes by linin					for here.	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) Ithe owner of and complete list of all property owner all property of which I am the owner I have not connived at any violation of fails to return any taxable property ov (\$500.00), imprisoned in the county j	ed by me or under of or of which I have or evasion of the re when by him or un ail not exceeding	my control as agent or oth ave control as agent, guard equirements of law in relati der his control is guilty of ninety (90) days, or both.	erwise, and ian, admini ion to the as a misdeme	that I have not failed or neglec strator or otherwise, in the cour sessment of property for taxa ti anor and upon conviction shall	ted to list for taxation that of, State of, State of on. W.S. 18-3-205(b)	for the year, of Wyoming and that Any person who			
Type or print your name here:						 			
Signature of owner/agent			Tit	le					
Telephone number		Fax Number		Email:					