

COMMERCIAL PERSONAL PROPERTY ASSESSMENT FORM

Clark County, Arkansas 200__

Taxpayer Number: _____

This form will be used by the Assessor in your county to determine the value of your business' personal property. An information sheet containing instructions on completion of this form and statutory provisions regarding the assessment of your personal property, should be included with this form. Please read the instructions before completing this form. If no information sheet is included, contact the assessor's office to obtain one.

Do not mark in any area labeled "FOR ASSESSOR USE ONLY" or shaded areas. Complete all sections pertinent to your business. SIGN AND RETURN THIS FORM TO THE ASSESSOR BEFORE MAY 31. FORMS RETURNED AFTER THAT DATE WILL BE DELINQUENT AND PENALIZED 10% OF THE TAX AMOUNT. Information reported on this form is required by Arkansas law and is subject to audit by the county assessor and/or the State of Arkansas. Upon request, you should be prepared to provide documentation for the content of this assessment.

Name of Business: _____

Mailing Address: _____

Local Address: _____

Business Type: _____

Owner: _____

Manager: _____

Phone: _____

School District _____

Return To:

KASEY L. SUMMERVILLE
CLARK COUNTY ASSESSOR
401 CLAY STREET
ARKADELPHIA, AR 71923
(870) 246-4431
(870) 246-1421 (fax)

FOR ASSESSOR USE ONLY

Property Type:	Value	Assessed Value
Inventory		
Furniture-Fixtures		
Machinery-Equipment		
Miscellaneous		
Vehicles		
TOTALS		

VEHICLES: Please list the following information regarding vehicles owned by your business. Vehicles requiring proof of assessment for licensing should be listed below. Non-licensed vehicles may be listed below, in the miscellaneous section, or a separate list may be attached to this form.

Year	Manufacturer	Model	Type or Style	Cylinders	Wheel Drive	Assessor's Assessed Value

I hereby swear or affirm that this is a true and complete list of all the personal property that, by law, I am required to list for taxation, and that the values rendered are true and accurate to the best of my knowledge.

Owner: _____

Date: _____

Sworn before and subscribed to before me this ____ day of _____

Assessor, Deputy or Notary

This is to certify that the above listed vehicles have been assessed for the current year.

County Assessor: Kasey L. Summerville

This is to certify that the above business paid personal property taxes due, as recorded by receipt # _____, on the _____ day of _____ in the amount of _____

County Collector: _____

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FURNITURE and FIXTURES: Please list below, or attach an itemized list, of the furniture and fixtures owned by your business, including any items reflecting a book value of zero. Subtotals representing similar items may be listed so long as they are grouped by year of purchase and estimated useful life.

Quantity	Item	Date of Purchase	Estimated Useful Life	Purchase Price	Value per Owner	FOR ASSESSOR USE ONLY	
						REL%	Market Value

MACHINERY and EQUIPMENT: Please list below, or attach an itemized list, of the furniture and fixtures owned by your business, including any items reflecting a book value of zero. Subtotals representing similar items may be listed so long as they are grouped by year of purchase and estimated useful life. Short-lived items such as tools may be listed in the miscellaneous section.

Quantity	Item	Date of Purchase	Estimated Useful Life	Purchase Price	Value per Owner	FOR ASSESSOR USE ONLY	
						REL%	Market Value

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INVENTORY: Please list below the average prior year value of inventory owned by your business, including floor-planned goods and those consigned from outside Arkansas.

MANUFACTURERS ONLY:

1. Last year's average raw materials:	
2. Last year's average work in progress:	
3. Last year's average finished goods held for sale:	
4. Last year's average marketable by-products:	
5. Last year's average supplies, packaging, etc.:	
6. TOTAL AVERAGE INVENTORY, (1 + 2 + 3 + 4 + 5):	

ASSESSOR'S ASSESSED VALUE

MERCHANTS ONLY:

1. Last year's average goods held for sale:	
2. Last year's average supplies, packaging, etc.:	
3. TOTAL AVERAGE INVENTORY (1 + 2)	
4. OPTIONAL — Last year's annual gross sales:	

MISCELLANEOUS: Please list below any other tangible personal property belonging to your business but not already included in your assessment, such as tools, dies, etc., including any item with a book value of zero.

Quantity	Item	Date of Purchase	Estimated Useful Life	Purchase Price	Value per Owner	FOR ASSESSOR USE ONLY	
						REL%	Market Value

LEASED PERSONAL PROPERTY: Please list below any leased item in your possession. This is to insure the property is assessed to the proper owner and NOT TO YOUR BUSINESS. You may wish to attach a separate list or a copy of your lease.

Item	Year and Model	Estimated Useful Life	Date of Lease	Length of Lease	Owner Name and Address

Please list below any items for which space was not provided in the previous sections:

[illegible]