

**BUSINESS PROPERTY STATEMENT FOR 201&**

(Declaration of costs and other related property information as of 12:01 A.M., January 1, 201G)

David Peets  
 Alpine County Assessor  
 PO Box 155  
 99 Water Street  
 Markleeville, CA 96120  
 Ph. (530) 694-2283

**FILE RETURN BY APRIL 1, 201&**

NAME AND MAILING ADDRESS  
 (Make necessary corrections to the printed name and mailing address)

RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED.  
 FILE A SEPARATE STATEMENT FOR EACH LOCATION.

**PART I: GENERAL INFORMATION**

COMPLETE (a) THRU (g)

- a. Enter type of business: \_\_\_\_\_
- b. Enter local telephone number \_\_\_\_\_ FAX number \_\_\_\_\_  
 E-Mail Address (optional) \_\_\_\_\_
- c. Do you own the land at this business location?  Yes  No  
 If **yes**, is the name on your deed recorded as shown on this statement?  Yes  No
- d. When did you start business at this location? DATE: \_\_\_\_\_  
 If your business name or location has changed from last year, enter the former name and/or location: \_\_\_\_\_
- e. Enter location of general ledger and all related accounting records (include zip code): \_\_\_\_\_

- f. Enter name and telephone number of authorized person to contact at location of accounting records: \_\_\_\_\_
- g. During the period of January 1, 201F through December 31, 201F:
  - (1) Did any individual or legal entity (corporation, partnership, limited liability company, etc.) acquire a "controlling interest" (see instructions for definition) in this business entity?  Yes  No
  - (2) If YES, did this business entity also own "real property" (see instructions for definition) in California at the time of the acquisition?  Yes  No
  - (3) If YES to both questions (1) and (2), filer must submit form *BOE-100-B, Statement of Change in Control and Ownership of Legal Entities*, to the State Board of Equalization. See instructions for filing requirements.

**PART II: DECLARATION OF PROPERTY BELONGING TO YOU**  
 (attach schedule for any adjustment to cost)

- 1. Supplies
- 2. Equipment (From line 35)
- 3. Equipment out on lease, rent, or conditional sale to others (Attach Schedule)
- 4. Bldgs., Bldg. Impr., and/or Leasehold Impr., Land Impr., Land (From line 71)
- 5. Construction In Progress (Attach Schedule)
- 6. Alternate Schedule A (See instructions)
- 7.
- 8.

COST (omit cents) (see instructions)	ASSESSOR'S USE ONLY	

**PART III: DECLARATION OF PROPERTY BELONGING TO OTHERS – IF NONE WRITE "NONE"**

(SPECIFY TYPE BY CODE NUMBER)

Report conditional sales contracts that are not leases on Schedule A

- 1. Leased equipment
- 2. Lease-purchase option equipment
- 3. Capitalized leased equipment
- 4. Vending equipment
- 5. Other businesses
- 6. Government-owned property

Tax Obligation: A. Lessor B. Lessee

	Year of Acq.	Year of Mfr.	Description and Lease or Identification Number	Cost to Purchase New	Annual Rent
9. Lessor's name Mailing address					
10. Lessor's name Mailing address					

**DECLARATION BY ASSESSEE**

**Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.**

I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 201G

OWNERSHIP TYPE (☑) Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____ <input type="checkbox"/>	SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*		DATE
	NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)		TITLE
	NAME OF LEGAL ENTITY (other than DBA) (typed or printed)		FEDERAL EMPLOYER ID NUMBER
	PREPARER'S NAME AND ADDRESS (typed or printed)		TELEPHONE NUMBER ( )

\*Agent: See page 7 for Declaration by Assessee instructions.

**SCHEDULE A — COST DETAIL: EQUIPMENT** (Do not include property reported in Part III.)

Include expensed equipment and fully depreciated items. Include sales or use tax (see instructions for important use tax information), freight and installation costs. Attach schedules as needed. Lines 18, 32, 33, and 45 "Prior" — Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Year of Acq.	1. MACHINERY AND EQUIPMENT FOR INDUSTRY, PROFESSION, OR TRADE <i>(do not include licensed vehicles)</i>				2. OFFICE FURNITURE AND EQUIPMENT		3. OTHER EQUIPMENT <i>(describe)</i>			Calendar Year of Acq.	4. TOOLS, MOLDS, DIES, JIGS	
		COST		ASSESSOR'S USE ONLY		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY	COST		ASSESSOR'S USE ONLY	
11	201F										201F		
12	20F€										20F€		
13	200J										200J		
14	200i										200i		
15	200ï										200ï		
16	200î										200î		
17	200í										200í		
18	200I										Prior		
19	200H										Total		
20	200G										Calendar Year of Acq.	5a. PERSONAL COMPUTERS	
21	200F											COST	ASSESSOR'S USE ONLY
22	0€€€												
23	199J										201F		
24	199i										20F€		
25	199ï										200J		
26	199î										200i		
27	199í										200ï		
28	199I										200î		
29	199H										200í		
30	199G										200I		
31	199F										200H		
32	19J€										Prior		
33	Prior										Total		
34	Total												
35	Add TOTALS on lines 19, 33, 34, 46 and any additional schedules. ENTER HERE AND ON PART II, LINE 2										Calendar Year of Acq.	5b. LOCAL AREA NETWORK (LAN) EQUIPMENT AND MAINFRAMES	
												COST	ASSESSOR'S USE ONLY
36	ASSESSOR'S USE ONLY										201F		
37	CLASSIFICATION	COL	FULL VALUE BASE	FULL VALUE	PERS. PROP. RCLND	PERS. PROP. ADJUSTMENT	PERS. PROP. FULL VALUE				20F€		
38	Machinery & equipment	1									200J		
39	Office furniture & equipment	2									200i		
40	Tools, molds, dies & jigs	4									200ï		
41	Personal Computers	5a									200î		
42	LAN and Mainframe	5b									200í		
43											200I		
44	Other equipment	3									200H		
45	Schedule B — Fixtures	—									Prior		
46	TOTALS										Total		

**SCHEDULE B — COST DETAIL: BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS, LAND IMPROVEMENTS, LAND AND LAND DEVELOPMENT**

Attach schedules as needed. Line 69 "Prior"— Report detail by year(s) of acquisition on a separate schedule.

LINE NO	Calendar Year of Acq.	BUILDINGS, BUILDING IMPROVEMENTS, AND/OR LEASEHOLD IMPROVEMENTS				3. LAND IMPROVEMENTS <i>(e.g., blacktop, curbs, fences)</i>		4. LAND AND LAND DEVELOPMENT <i>(e.g., fill, grading)</i>	
		1. STRUCTURE ITEMS ONLY <i>(see instructions)</i>		2. FIXTURES ONLY <i>(see instructions)</i>		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY
		COST	ASSESSOR'S USE ONLY	COST	ASSESSOR'S USE ONLY				
47	201F								
48	20F€								
49	200J								
50	200ì								
51	200ĭ								
52	200Î								
53	200Í								
54	200I								
55	200H								
56	200G								
57	200F								
58	2000								
59	199J								
60	199ì								
61	199ĭ								
62	199Î								
63	199Í								
64	199I								
65	199H								
66	199G								
67	199F								
68	19J€								
69	Prior								
70	Total								
71	Add TOTALS on line 70 and any additional schedules. ENTER HERE AND ON PART II, LINE 4								
72	Have you received allowances for tenant improvements for the current reporting period that are not reported above? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> indicate amount \$ _____								

REMARKS:

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