

FAILURE TO RETURN THIS FORM  
VOIDS YOUR RIGHT OF APPEAL

PROPERTY OWNED ON APRIL 1  
MUST BE REPORTED BY JUNE 1



**TOWN of THOMASTON**  
**Board of Assessors**  
170 Main Street - PO Box 299  
Thomaston, Maine 04861-0299  
(207) 354-6107 ext. 228 - FAX 354-2132  
[assessor@midcoast.com](mailto:assessor@midcoast.com)

Account #: \_\_\_\_\_

Check if first filing  
Property Located at \_\_\_\_\_

Map: \_\_\_\_\_

Lot: \_\_\_\_\_

Multiple Locations - see list

**PERSONAL PROPERTY DECLARATION**  
TAX YEAR: \_\_\_\_\_

BUSINESS OWNER'S NAME(S)	TELEPHONE #	FAX #
NAME OF BUSINESS (DBA)	IF SUBSIDIARY OR SATELLITE, ENTER MAIN COMPANY NAME	
BUSINESS MAILING ADDRESS	MAIN COMPANY MAILING ADDRESS	
PERSONAL PROPERTY LOCATION ADDRESS <i>If different from above</i>	Brief Description of Business Activity:	
	<input type="checkbox"/> Maine Corporation	<input type="checkbox"/> Foreign Corporation
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other:

**Tax paid on property acquired after April 1, 1995 may be reimburseable through Maine BETR.  
Property first placed in service in Maine after April 1, 2007 may be exempt through Maine BETE.**

**NOTICE:** Pursuant to Title 36 Maine Revised Statutes Annotated, Section 706 you are required to furnish a true and perfect list of all tangible goods and chattels wheresoever they are, not by law exempt from taxation, of which you are possessed on the first day of April each year. A refusal or neglect to answer this notice bars an appeal, but the list and answers shall not be conclusive upon the assessor. The Thomaston Board of Assessors will not allow depreciation and may increase the estimated value on known property if you fail to file this form.

**GENERAL INSTRUCTIONS**

List the acquisition description, date, and cost of all machinery and equipment, furniture and fixtures, computer or electronic equipment and other property as of April 1 of the present year. If you have computer data or wish to use other reporting methods you may do so provided you furnish the information required by this form and return this signed form and indicate your attachments. Most of the information should be available from your company books/IRS depreciation schedules. **You must file this form even if you do not have any Personal Property to report.** You also must report property leased by you from someone else who is liable for the tax. **PLEASE RETURN THIS FORM BY JUNE 1st.**

<b>MACHINERY &amp; EQUIPMENT</b>	Total Original Costs from Page # _____	\$ _____
<i>Includes Cargo Trailers, Portable Mills, Computers and Electronic Equipment, Copiers and Fax Machines, non-excised Trailers, Road, Construction or Yard equipment, Cash Registers, Farm Equipment, Balers, Electric Fencing Systems, Spreaders, Sprayers, Welders, Generators, commercially-used Chain Saws, Production Machinery, Forklifts, Spare Parts Inventory, Compressors, Power Machinery, Asphalt and Cement Mixers, Gas Pumps, Lobster Traps, Amusement/Arcade Machines, Lottery Machines, Tools, Fryolators, Buffet or Sandwich Bars, Serving Equipment, Beauty Parlor Equipment, etc.</i>		

<b>FURNITURE &amp; FIXTURES</b>	Total Original Costs from Page # _____	\$ _____
<i>Includes Desks, Appliances, Coolers, Dispensing and Vending Machines, Furniture, Racks, Displays, Telephones, Pagers, Office Supplies, Drafting Tables, Beauty Parlor Supplies, Motel, Hotel or B&amp;B Furnishings, etc.</i>		

<b>OTHER PERSONAL PROPERTY</b>	Total Original Costs from Page # _____	\$ _____
<i>Includes Professional Libraries, Rentable Stock, such as VCR's, Tapes and Rug Shampooers, and anything else not listed above.</i>		

- I have listed leased or rented property and their owner(s) on the next page.  
 No Personal Property to Report     Personal Property at this location is exempt by law. Legal citation: \_\_\_\_\_

<input type="checkbox"/> Final Report. Reason: <input type="checkbox"/> This Business closed. Property disposed of.	Date of Transfer or Closure:
<input type="checkbox"/> Transfer to: _____	

*I hereby certify, having carefully read the above, that this report is a true and complete list, to the best of my knowledge and belief.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name & Email of Person \_\_\_\_\_ Tel. #: \_\_\_\_\_  
authorized to disclose records: \_\_\_\_\_

**ASSESSOR'S USE ONLY**

INITIALS:	DATE:	M&E:	F&F:	OTH:	TOTAL:
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**TOWN of THOMASTON**

**Personal Property Declaration**



Name of Business: \_\_\_\_\_

Location: \_\_\_\_\_

Tax Year: \_\_\_\_\_

**SCHEDULE OF LEASED OR RENTED EQUIPMENT**

*Note this property is taxable to someone else but you are required to furnish a list.*

NAME & ADDRESS OF LESSOR	QUANTITY & DESCRIPTION OF ITEM	MODEL#/ SERIAL#	YEAR LEASE BEGAN	LEASE COST	LEASE LENGTH	ASSESSOR'S USE ONLY
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						



