

**TO AVOID PENALTY RETURN BY
JANUARY 31, 2010.**

**STATE OF NORTH CAROLINA
COUNTY OF CLEVELAND
BUSINESS PERSONAL PROPERTY LISTING**

2010

LISTING # _____

RETURN TO: CLEVELAND COUNTY TAX DEPARTMENT, BUSINESS SECTION, P.O. BOX 370, SHELBY, NC 28151-0370 PHONE: (704) 476-3083

FOR DEPARTMENT USE ONLY == =>	ACCOUNT NUMBER _____	DISTRICT CODE _____	PENALTY _____	VALUE _____
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QUESTIONS? TELEPHONE 704-476-3083 OR EMAIL ANNA.MCCALL@CLEVELANDCOUNTY.COM

PHYSICAL ADDRESS _____	LOCATION OF ACCOUNTING RECORDS _____
REAL ESTATE OWNED BY _____	DATE BUSINESS BEGAN IN THIS COUNTY ____ / ____ / ____
FED. ID # _____	DATE BUSINESS (FISCAL) YEAR ENDS ____ / ____ / ____
PRINCIPAL BUSINESS IN CLEVELAND COUNTY IS: _____	CHECK ONE > CORPORATION ____ SOLE PROPRIETORSHIP ____ PARTNERSHIP ____
NAME IN WHICH BUSINESS WAS LISTED LAST YEAR: _____	UNINCORPORATED ASSOCIATION ____ OTHER (SPECIFY) _____
	CHECK BUSINESS CATEGORY > RETAIL ____ WHOLESALE ____ MANUFACTURING ____
	SERVICE ____ LEASING/RENTAL ____ FARMING ____ OTHER (SPECIFY) _____
	OTHER N.C. COUNTIES WHERE PERSONAL PROPERTY IS LOCATED _____
	CONTACT PERSON FOR AUDIT: _____
	ADDRESS & PHONE _____
	IF OUT OF BUSINESS COMPLETE THIS SECTION == > DATE CEASED _____
	CHECK ONE: SOLD ____ CLOSED ____ BANKRUPT ____ OTHER ____
	SOLD EQUIPMENT / FIXTURES / SUPPLIES TO: _____
	BUYER'S ADDRESS & PHONE: _____

SCHEDULE A PERSONAL PROPERTY (SEE INSTRUCTIONS)

GROUP (1) MACHINERY & EQUIPMENT					GROUP (2) OFFICE FURNITURE & FIXTURES				
YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST	YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST
2009					2009				
2008					2008				
2007					2007				
2006					2006				
2005					2005				
2004					2004				
2003					2003				
2002					PRIOR				
2001					TOTAL				
2000									
GROUP (3) COMPUTER EQUIPMENT					YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST
1999					2009				
1998					2008				
1997					2007				
1996					2006				
1995					PRIOR				
1994					TOTAL				
PRIOR									
TOTAL									
GROUP (4) LEASEHOLD IMPROVEMENTS					YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST
2009					2009				
2008					2008				
2007					PRIOR				
2006					TOTAL				
2005									
2004									
2003									
2002									
2001									
2000									
1999									
1998									
1997									
1996									
PRIOR									
TOTAL									
GROUP (5) EXPENSED ITEMS (cap thresh _____)					YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST
2009					2009				
2008					2008				
2007					PRIOR				
2006					TOTAL				
2005									
2004									
2003									
2002									
2001									
2000									
1999									
1998									
1997									
1996									
PRIOR									
TOTAL									
GROUP (6) OTHER - DESCRIBE					YR. ACQUIRED	PRIOR YR. COST	ADDITIONS	DELETIONS	CURR. YR. COST
2009					2009				
2008					2008				
2007					2007				
2006					2006				
2005					2005				
2004					2004				
2003					2003				
2002					2002				
2001					2001				
2000					2000				
1999					1999				
1998					1998				
1997					1997				
1996					1996				
PRIOR					PRIOR				
TOTAL					TOTAL				
GROUP (7) CONSTRUCTION IN PROGRESS					GROUP (8) SUPPLIES - SEE INSTRUCTIONS SUPPLIES ON HAND JANUARY 1, 2010 AT COST				
LIST IN DETAIL ALL EXPENDITURES IN CIP ACCOUNT ON JANUARY 1, BUT NOT INCLUDED ABOVE - SEE INSTRUCTIONS					Office, Medical, Dental, Beauty, Maintenance, etc. _____				
TOTAL CIP: \$					Fuels of all kinds _____				
					Spare parts for equipment _____				
					Expensed Items _____				
					All other _____				
					Total \$ _____				

If you need additional space to list property under Schedules B, C, and D, please attach a separate report in the same format as below. Write "see attached" on the schedules if this is necessary.

(Additional pages are attached for pre-listed property that exceeds the number of spaces available in these Schedules.)

SCHEDULE B		VEHICULAR EQUIPMENT - SEE INSTRUCTIONS						
GROUP (1) UNTAGGED MOTOR VEHICLES, MULTIYEAR REGISTERED TRAILERS AND 3 MO. FARM TAGS								
YEAR	MAKE	MODEL	BODY/SIZE	TITLE #	VEHICLE ID. NUMBER (VIN)	SPEC. BODY COST	FOR OFFICE USE	
GROUP (2) BOATS & BOAT MOTORS								
TYPE	YEAR / MAKE / MODEL	LENGTH/SIZE	REGIS. #	LOCATION	ENGINE TYPE	ORIGINAL COST	YEAR PURCHASED	FOR OFFICE USE
BOAT								
MOTOR			HP					
GROUP (3) AIRCRAFT								
YEAR	MAKE	MODEL	SERIAL #	LOCATION	FAA #	ORIGINAL COST	YEAR PURCHASED	FOR OFFICE USE
GROUP (4) MANUFACTURED HOMES & OFFICES								
YEAR	MAKE	WIDTH/LENGTH	TITLE	ID. NUMBER (VIN)	ORIGINAL COST	YEAR PURCHASED	FOR OFFICE USE	
		X						
		X						
		X						

SCHEDULE C		STATEMENT OF LEASED EQUIPMENT AS OF JANUARY 1				
NAME AND ADDRESS OF OWNER	DESCRIPTION OF PROPERTY	LEASE # OR ACCOUNT #	MONTHLY PAYMENT	COST NEW (QUOTED)	START & END LEASE DATES	

SCHEDULE D		ACQUISITIONS AND/OR DISPOSALS		
OF MACHINERY, EQUIPMENT, FURNITURE AND FIXTURES IN THE PRIOR YEAR (ATTACH SCHEDULE IF NECESSARY)				
ACQUISITIONS - ITEMIZE IN DETAIL	100% ORIGINAL COST INSTALLED	DISPOSALS - ITEMIZE IN DETAIL	YEAR ACQUIRED	100% ORIGINAL COST
TOTAL			TOTAL	

REAL ESTATE IMPROVEMENTS

During the past calendar year, did your business make improvements and/or other additions to real property, owned by you business? If yes, attach a separate schedule with information on such improvements. Yes No

AFFIRMATION LISTING FORM MUST BE SIGNED BY A LEGALLY AUTHORIZED PERSON - SEE INSTRUCTIONS

Under penalties prescribed by law, I hereby affirm that to the best of my knowledge and belief this listing, including any accompanying statements, inventories, schedules, and other information, is true and complete. (If this affirmation is signed by an individual other than taxpayer, he affirms that he is familiar with the extent and true value of all the taxpayer's property subject to taxation in this county and that his affirmation is based on all the information of which he has any knowledge.)

Listing MUST be signed by a principal officer of the taxpayer or a FULL-TIME employee of the taxpayer who has been officially empowered by the principal officer to list the property (G.S. 105-311). Written authorization or Power of Attorney does not preclude this requirement.

SIGNATURE DATE

PREPARER OTHER THAN TAXPAYER DATE

PRINT OR TYPE NAME

PRINT OR TYPE NAME

TITLE TELEPHONE NUMBER

ADDRESS TELEPHONE NUMBER

EMAIL

EMAIL

Any individual who willfully makes and subscribes an abstract listing required by this Subchapter (of the Revenue Laws) which he does not believe to be true and correct as to every material matter shall be guilty of a Class 2 misdemeanor.

ACCOUNT NUMBER

COUNTY OF CLEVELAND **2010**
BUSINESS PERSONAL PROPERTY LISTING (Additional Schedule A)

SCHEDULE A					SCHEDULE A				
GROUP (1) MACHINERY & EQUIPMENT					GROUP (1) MACHINERY & EQUIPMENT				
YEAR ACQUIRED	PRIOR YEAR COST	ADDITIONS	DELETIONS	CURR. YEAR COST	YEAR ACQUIRED	PRIOR YEAR COST	ADDITIONS	DELETIONS	CURR. YEAR COST
2009					2009				
2008					2008				
2007					2007				
2006					2006				
2005					2005				
2004					2004				
2003					2003				
2002					2002				
2001					2001				
2000					2000				
1999					1999				
1998					1998				
1997					1997				
1996					1996				
1995					1995				
1994					1994				
PRIOR					PRIOR				
TOTAL					TOTAL				

SCHEDULE A					SCHEDULE A				
GROUP (1) MACHINERY & EQUIPMENT					GROUP (1) MACHINERY & EQUIPMENT				
YEAR ACQUIRED	PRIOR YEAR COST	ADDITIONS	DELETIONS	CURR. YEAR COST	YEAR ACQUIRED	PRIOR YEAR COST	ADDITIONS	DELETIONS	CURR. YEAR COST
2009					2009				
2008					2008				
2007					2007				
2006					2006				
2005					2005				
2004					2004				
2003					2003				
2002					2002				
2001					2001				
2000					2000				
1999					1999				
1998					1998				
1997					1997				
1996					1996				
1995					1995				
1994					1994				
PRIOR					PRIOR				
TOTAL					TOTAL				

