

**2017**

**KING WILLIAM COUNTY COMMISSIONER OF THE REVENUE  
 BUSINESS RETURN OF TANGIBLE PERSONAL PROPERTY  
 P.O. BOX 217, KING WILLIAM, VA 23086**

OWNER'S NAME			TYPE OF BUSINESS
LAST	FIRST	MI	
TRADE NAME			Account# <span style="float:right">Town Of West Point <input type="checkbox"/></span>
MAILING ADDRESS			County <input type="checkbox"/>
CITY/STATE/ZIP			FEDERAL IDENTIFICATION # SOCIAL SECURITY #

**TANGIBLE PERSONAL PROPERTY OWNED ON JANUARY 1, 2017. List the totals below and Attach Detailed Itemized Listing or depreciation schedule from Federal Return. (Do not include Licensed Vehicles or Software.)**

YEAR ACQUIRED	ORIGINAL COST	OFFICE USE ONLY	ASSESSED VALUE
2012 & PRIOR		10%	
2013		20%	
2014		40%	
2015		60%	
2016		80%	
TOTAL			

**MACHINERY AND TOOLS** Only Machinery and Tools used in Manufacturing, Mining, Processing, Radio or TV Broadcasting, Dairy, Dry Cleaning or Laundry Business.

COST OF EQUIPMENT	OFFICE USE ONLY	ASSESSED VALUE
	25%	

**LEASED EQUIPMENT AND VEHICLES** List all Tangible Personal Property leased or rented from others on January 1, 2017, which was located in King William County.

Name of Lessor	Address of Lessor	Lease, Serial or ID #	Monthly Rate	Beginning & End Date

FAILURE TO FILE THIS RETURN MAY RESULT IN CRIMINAL PENALTIES . (CODE OF VA. 58.1-3916.1)  
 DECLARATION: I DECLARE THAT THE STATEMENTS AND FIGURES HEREIN GIVEN ARE TRUE. FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

PLEASE ENTER BELOW A CONTACT NAME. PHONE NUMBER AND LOCATION OF RECORDS SO WE MAY CONTACT YOU SHOULD THERE BE ANY QUESTIONS.

CONTACT  
 PHONE # \_\_\_\_\_ FAX# \_\_\_\_\_

PLEASE PRINT \_\_\_\_\_ DATE: \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE OF TAXPAYER \_\_\_\_\_

**DUE ON OR BEFORE MAY 1, 2017**