10/13/16

CARTERET COUNTY TAX OFFICE BUSINESS PERSONAL 302 COURTHOUSE SQUARE BEAUFORT, NC 28516-6709 PHONE (252) 728-8483

TITLE

COUNTY OF CARTERET

NORTH CAROLINA

TO AVOID LATE LISTING PENALTY, FILE BY **JANUARY 31, 2017**

FARM BUSINESS FORM

DIST.	PARCEL ID NO.	TWSHP	CITY/TOWN	FIRE DIST	RESCUE	LATE LISTER

PLEASE MAKE ANY CORRECTIONS TO NAME AND ADDRESS THAT IS NEEDED

ALL COSTS MUST BE REPORTED AT 100%

COMPLETE ALL APPLICABLE SECTIONS OF THIS FORM OR IT WILL BE REJECTED

TELEPHONE NUMBER

					FORM OR IT WILL BE REJECTED			iD		
						A COF	PY (OF YOUR DETAILED DEPRE	ECIATION S	CHEDULE
								4562, ALONE, DOES NOT S		
						ASSE	ETS	LEDGER SHOULD ACCOM	PANY THIS	RETURN
LOCATI	ON ADDRESS	S OF BUSINESS								
SECTION A			MARK THROUGH AN					NUARY 1ST. TAX PAID ON MACHINERY.	1	NO CHANGE
SECTION B	PLEASE	LIST BELOW ANY FA	RM EQUIPMENT A	CQUIRED L	AST YEA	AR AND	AN	Y PROPERTY NOT LISTED	ABOVE.	
CONDITIONER, W IRRIGATION EQU SUB-SOILER, AIR CULATION FAN, F	/INDROWER, G IPMENT, PLOV COMPRESSO FEED BIN, WAT	RINDER-MIXER, MANUI V, HARROW CULTIVATO	RE SPREADER, ROTA DR, TRAILER, WAGON W, BACKHOE, UNTAG D CONVEYERS.	RY CUTTER, I BULK EQUIF	WHEAT C PMENT, S	ORILL, TO SPRAYER,	BAC R, DA	ORN PICKER, HAY BALER, FOF CCO HARVESTER, TOBACCO S NRY EQUIPMENT, BLADE SAW ND EGG HOUSE EQUIPMENT,	STRINGER, CO I, POST DRIV	ORN PLANTER, ER, SPLITTER, FEEDERS, CIR-
OFFICE USE ONLY	MODEL YEAR	DESCRIPTION (MAKE, MO	IODEL, SERIES OR SIZE) BODY/SPECIAL EQUIPMENT VEHICLE IDENTIFICATION NUMBER YR ACQ				100% COST			
		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
SECTION C LEASED EQUPMENT IN YO				OUR PO	SSESSI	ON			NONE	
NAME OF OWNER		COMPLETE ADDRESS			TYPE OF EQUIPMENT & TERMS			RMS		
SECTION D										
GS 105-310-311 UNDER PENALTIES PRESCRIBED BY LAW, I, AS A PRINCIPAL OFFICER, OFFICIALLY EMPOWERED FULL-TIME EMPLOYEE OF THE TAXPAYER, DO HEREBY AFFIRM THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS LISTING, INCLUDING ANY ACCOMPANYING STATEMENTS, SCHEDULES AND OTHER INFORMATION, IS TRUE AND COMPLETE.			OF PROPERTY OF	WNER		SECTI	IOI	N F REQUEST FOR ADD	ITIONAL IN	FORMATION
AFFIRM THAT TO ING ANY ACCOMPAN	UNDER PENAL POWERED FUL O THE BEST OF NYING STATEM	TIES PRESCRIBED BY L L-TIME EMPLOYEE OF T MY KNOWLEDGE AND	AW, I, AS A PRINCIPA THE TAXPAYER, DO HE BELIEF THIS LISTING,	L OFFICER, EREBY INCLUD-		UNDER SECTION ENGAGE TO SUBMETAILE OTHERS	THE N 29 ED I MIT, ED II SIM	N E REQUEST FOR ADD PROVISIONS OF NC GENERAL 96(H), THE TAX ASSESSOR M. N OPERATING A BUSINESS EN IN CONNECTION WITH HIS OR NVENTORY STATEMENT OF AS ILAR INFORMATION PERTINEI	L STATUTES, AY REQUIRE ITERPRISE IN I HER REGUL SSETS AND L NT TO THE D	CHAPTER 105, ANY PERSON I THE COUNTY AR TAX LIST, A IABILITIES, OR ISCOVERY OR
AFFIRM THAT TO ING ANY ACCOMPAN	UNDER PENAL POWERED FUL O THE BEST OF NYING STATEM	TIES PRESCRIBED BY L L-TIME EMPLOYEE OF T MY KNOWLEDGE AND	AW, I, AS A PRINCIPA THE TAXPAYER, DO HE BELIEF THIS LISTING,	L OFFICER, EREBY INCLUD-		UNDER SECTION ENGAGE TO SUBM DETAILE OTHER SAPPRAIS	THE N 29 ED I MIT, ED II SIM ISAL	PROVISIONS OF NC GENERAL 96(H), THE TAX ASSESSOR M. N OPERATING A BUSINESS EN IN CONNECTION WITH HIS OR NVENTORY STATEMENT OF AS ILAR INFORMATION PERTINE!	L STATUTES, AY REQUIRE ITERPRISE IN I HER REGUL SSETS AND L NT TO THE D IN THE CC	CHAPTER 105, ANY PERSON I THE COUNTY AR TAX LIST, A IABILITIES, OR ISCOVERY OR DUNTY. SUCH

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