

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

**COUNTY OF CARTERET**  
 NORTH CAROLINA  
**FARM BUSINESS FORM**

2019

**TO AVOID LATE LISTING  
 PENALTY, FILE BY  
 JANUARY 31, 2019**

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**

**A COPY OF YOUR DETAILED DEPRECIATION SCHEDULE  
 (FORM 4562, ALONE, DOES NOT SUFFICE) OR FIXED  
 ASSETS LEDGER SHOULD ACCOMPANY THIS RETURN**

LOCATION ADDRESS OF BUSINESS \_\_\_\_\_

**SECTION A** PLEASE MARK THROUGH ANY ITEM(S) YOU DID NOT OWN JANUARY 1ST. YOU CAN RECEIVE A NORTH CAROLINA INCOME TAX CREDIT ON PROPERTY TAX PAID ON MACHINERY.      NO CHANGE

**SECTION B** PLEASE LIST BELOW ANY FARM EQUIPMENT ACQUIRED LAST YEAR AND ANY PROPERTY NOT LISTED ABOVE.

LIST SUCH PROPERTY AS: TRACTORS, MOTORS, LOADERS, POWER EQUIPMENT, SKID LOADER, COMBINE, CORN PICKER, HAY BALER, FORAGE HARVESTER, MOWER CONDITIONER, WINDROWER, GRINDER-MIXER, MANURE SPREADER, ROTARY CUTTER, WHEAT DRILL, TOBACCO HARVESTER, TOBACCO STRINGER, CORN PLANTER, IRRIGATION EQUIPMENT, PLOW, HARROW CULTIVATOR, TRAILER, WAGON BULK EQUIPMENT, SPRAYER, DAIRY EQUIPMENT, BLADE SAW, POST DRIVER, SPLITTER, SUB-SOILER, AIR COMPRESSOR, AUGER, CHISEL PLOW, BACKHOE, UNTAGGED VEHICLES, CHICKEN, HOG AND EGG HOUSE EQUIPMENT, INCLUDING FEEDERS, CIRCULATION FAN, FEED BIN, WATERING EQUIPMENT AND CONVEYERS.

**DO NOT LIST LICENSED MOTOR VEHICLES**      NO ADDITIONS

OFFICE USE ONLY	MODEL YEAR	DESCRIPTION (MAKE, MODEL, SERIES OR SIZE)	BODY/SPECIAL EQUIPMENT	VEHICLE IDENTIFICATION NUMBER	YR ACQ	100% COST

**SECTION C** LEASED EQUIPMENT IN YOUR POSSESSION      NONE

NAME OF OWNER	COMPLETE ADDRESS	TYPE OF EQUIPMENT & TERMS

**SECTION D** AFFIRMATION OF PROPERTY OWNER

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TITLE \_\_\_\_\_

**SECTION E** REQUEST FOR ADDITIONAL INFORMATION

UNDER THE PROVISIONS OF NC GENERAL STATUTES, CHAPTER 105, SECTION 296(H), THE TAX ASSESSOR MAY REQUIRE ANY PERSON ENGAGED IN OPERATING A BUSINESS ENTERPRISE IN THE COUNTY TO SUBMIT, IN CONNECTION WITH HIS OR HER REGULAR TAX LIST, A DETAILED INVENTORY STATEMENT OF ASSETS AND LIABILITIES, OR OTHER SIMILAR INFORMATION PERTINENT TO THE DISCOVERY OR APPRAISAL OF PROPERTY TAXABLE IN THE COUNTY. SUCH INFORMATION SHALL NOT BE OPEN TO PUBLIC INSPECTION.

LOCATION OF ACCOUNTING RECORDS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

3262PFBF 1/11/18 PMS 626 K

**CONTINUED**