				1										
				TANG	BIBLE PER	RSONAL PRO	PERTY 1							
					CONF	FIDENTIAL	R	DR-405, R. 12/11 ule 12D-16.002, F.A.C.						
			Re	turn to prope	erty appraiser by	April 1 to a	avoid penalty.							
				County	Tax	year								
	r your account number, name, and address belo count number	w. Mail this form to your County Pi	roperty Appraise		siness name ([	DBA-Doing Busines		*						
	me and address													
					Federal Em	nplover								
					Identification		-							
						N	AICS							
	If name and address is incorrect, power or person in charge	olease make needed corre Phone	ections.	6 Tuno o	r natura of vo	ır buginaga								
	usiness/corporate name	Priorie		6. Type or nature of your business  Trade levels (check all that apply) Retail Wholesale										
	·			l	` _	,, _	_ Retail	Wholesale						
Physical location (no PO Boxes)					Manufacturing Professional Service Agricu									
	,			Leasing/rental Other, specify:										
	o you file a TPP tax return under any ot	ther name? Yes	No	7. Did yo		turn in this county la	ast year?	YesNo						
	ame on most recent return or tax bill	locatio												
	ate you began business in this county	8. Former owner of business												
	iscal year If before 12/31 Indicate additions/deletic		to whom?		Date :	blos								
Pe	rsonal Property Summary Sche				er's Estimate	Original Insta		or Property						
	ached itemized list or depreciation schedu	of Fair N	raiser Use Only											
10	Office furniture, office machines, and libra	ary												
11	EDP equipment, computers, and word pro	ocessors												
12	Store, bar and lounge, and restaurant fur													
	Machinery and manufacturing equipment													
	Farm, grove, and dairy equipment													
	Professional, medical, dental, and laborat	ory equipment												
	Hotel, motel, and apartment complex Rental units (stove, refrigerator, furniture,	drange and appliances)												
	Mobile home attachments (carport, utility)	<u> </u>												
	Service station and bulk plant equipment	- ,												
19	Signs (billboard, pole, wall, portable, direct	<u>,                                      </u>												
20	Leasehold improvements - grouped by typ	· · · · · · · · · · · · · · · · · · ·	cription											
21	Pollution control equipment													
22	Equipment owned by you but rented, leas	ed or held by others												
	Supplies not held for resale													
24	Other, specify:													
		TOTAL PERSONAL P												
	eclare I have read this tax return and the charter is true. If prepared by someone	. , ,			facts	\$25,000	Less							
	urn certifies that this declaration is bas				d	Widowed	Exemptions							
				Blind Total disability	Taxable									
ignature Print name Title					Date	Value	9							
rignature						Other, specify								
•	parer	Preparer ID		Date		Penalties								
			1		K	$\times \times $	$\times \times $	$(\times \times $						

Signature, deputy Sign and date your return, send the original to the county property appraiser's office by April 1. Unsigned returns cannot be accepted by the appraiser's office. If you are entitled to a widow's, widower's, or disability exemption on personal property (not already claimed on real estate), consult your appraiser.

Continued on page 2

Phone

Address

Report all property owned by you including fully depreciated items still in use.

ASSETS F	PHYSICALLY REMOVED DUR	RING T	ΉEΙ												
Description			Age Year Taxpayer's Estimate Acquired of Fair Market Value										and to	who	om?
			-												
LEASED,	LOANED, OR RENTED EQUIP	PMEN	T	Complete	if you ho	old equi	pment b	elo	nging to	others.					ase chase
Name a	and Address of Owner or Lessor	Description			tion		Year		Year of Monthly				alled	Op	tion
							Acquire	d N	lanufacture	Rent		Cost		Yes	No
														F	
SCHEDU	LE FOR LINE 22, PAGE 1	Equip	omen	t owned b	y you bu	ut rented	d, lease	d, o	r held by	others.	Enter t	otal on p	page '	1.	
Lease Number	Name/address of lessee Actual physical location	Description			Age	Year Acquired	1 111		Term	Taxpay Estimate of Market V	of Fair	Cond*	Original Installed Cost New		Cost
									+ +						
SCHEDUL	LES FOR PAGE 1, LINES 10 -	21. 23	. and	1 24							API	PRAISE	R'S U	SE O	NLY
	Enter line number from page 1. Description		Age Year T		Taxpayer's Estimat				Original Installed Cost					Value	
	Description			7 toquilou	OTT GILL IV	iamot vai				,,,,	Solid		XX		
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Entertota	Is on page 1.  Enter line number from page 1.			TOTAL Year	Taxpave	r's Estima	TOT		Original	Installed	TOTA	LXXX			× × ×
	Description		Age	ge Acquired		larket Val		d*		ost	Cond	*	Val	ue	
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Enter totals on page 1.  Enter line number from page 1.  Description			Age	Year Acquired		r's Estima	ate Con		Original	Installed	Cond		Val	ue	
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Enter totals on page 1.				TOTAL			TOT	AL			TOTA		$\times \times \times$	XX	$\times \times \overline{\times}$

## **INSTRUCTIONS**

Complete this form if you own property used for commercial purposes that is not included in the assessed value of your business' real property. This may include office furniture, computers, tools, supplies, machines, and leasehold improvements. Return this to your property appraiser's office by April 1. Keep a copy for your records.

Report your summary totals on page 1. Use page 2 or an attached, itemized list with original cost and date acquired for each item to provide the details for each category. Contact your local property appraiser if you have questions.

If you ask, the property appraiser will give you an extension for 30 days and may grant an additional 15 days. You must ask for the extension in time for the property appraiser to consider the request and act on it before April 1.

Each return is eligible for an exemption up to \$25,000. By filing a DR-405 on time you automatically apply for the exemption. If you do not file on time, Florida Law provides for the loss of the \$25,000 exemption.

#### WHAT TO REPORT

# Include on your return:

- Tangible Personal Property. Goods, chattels, and other articles of value (except certain vehicles) that can be manually possessed and whose chief value is intrinsic to the article itself.
- 2. Inventory held for lease. *Examples:* equipment, furniture, or fixtures after their first lease or rental.
- 3. Equipment on some vehicles. *Examples*: power cranes, air compressors, and other equipment used primarily as a tool rather than a hauling vehicle.
- 4. Property personally owned, but used in the business.
- 5. Fully depreciated items, whether written off or not. Report at original installed cost.

# Do not include:

- 1. Intangible Personal Property. *Examples*: money, all evidences of debt owed to the taxpayer, all evidence of ownership in a corporation.
- Household Goods. Examples: wearing apparel, appliances, furniture, and other items ordinarily found in the home and used for the comfort of the owner and his family, and not used for commercial purposes.
- 3. Most automobiles, trucks, and other licensed vehicles. See 3 above.
- 4. Inventory that is for sale as part of your business. Items commonly referred to as goods, wares, and merchandise that are held for sale.

## LOCATION OF PERSONAL PROPERTY

Report all property located in this county on January 1. You must file a single return for each site in the county where you transact business. If you have freestanding property at multiple sites other than where you transact business, file a separate, but single, return for all such property located in the county.

Examples of freestanding property at multiple sites include vending and amusement machines, LP/ propane tanks, utility and cable company property, billboards, leased equipment, and similar property not customarily located in the offices, stores, or plants of the owner, but is placed throughout the county.

#### **PENALTIES**

**Failure to file** - 25% of the total tax levied against the property for each year that no return is filed

**Filing late** - 5% of the total tax levied against the property covered by that return for each year, each month, and part of a month, that a return is late, but not more than 25% of the total tax

**Unlisted property** -15% of the tax attributable to the omitted property

#### RELATED FLORIDA TAX LAWS

§192.042, F.S. - Assessment date: Jan 1

§193.052, F.S. - Filing requirement

§193.062, F.S. - Filing date: April 1

§193.063, F.S. - Extensions for filing

§193.072, F.S. - Penalties

§193.074, F.S. - Confidentiality

§195.027(4), F.S.- Return Requirements

§196.183, F.S. - \$25,000 Exemption

§ 837.06, F.S. - False Official Statements

## LINE INSTRUCTIONS

Within each section, group your assets by year of acquisition. List each item of property separately except for "classes" of personal property. A class is a group of items substantially similar in function, use, and age.

# Line 14 - Farm, Grove, and Dairy Equipment

List all types of agricultural equipment you owned on January 1. Describe property by type, manufacturer, model number, and year acquired. *Examples:* bulldozers, draglines, mowers, balers, tractors, all types of dairy equipment, pumps, irrigation pipe - show feet of main line and sprinklers, hand and power sprayers, heaters, discs, fertilizer distributors.

# Line 16 and 16a - Hotel, Motel, Apartment and Rental Units (Household Goods)

List all household goods. *Examples*: furniture, appliances, and equipment used in rental or other commercial property. Both residents and nonresidents must report if a house, condo, apartment, etc. is rented at any time during the year

# **Line 17 - Mobile Home Attachments**

For each type of mobile home attachment (awnings, carports, patio roofs, trailer covers, screened porches or rooms, cabanas, open porches, utility rooms, etc.), enter the number of items you owned on January 1, the year of purchase, the size (length X width), and the original installed cost.

# Line 20 - Leasehold Improvements, Physical Modifications to Leased Property

If you have made any improvements, including modifications and additions, to property that you leased, list the original cost of the improvements. Group them by type and year of installation. *Examples:* slat walls, carpeting, paneling, shelving, cabinets. Attach an itemized list or depreciation schedule of the individual improvements.

## Line 22 - Owned by you but rented to another

Enter any equipment you own that is on a loan, rental, or lease basis to others.

#### Line 23 - Supplies

Enter the average cost of supplies that are on hand. Include expensed supplies, such as stationery and janitorial supplies, linens, and silverware, which you may not have recorded separately on your books. Include items you carry in your inventory account but **do not** meet the definition of "inventory" subject to exemption.

#### COLUMN INSTRUCTIONS

List all items of furniture, fixtures, all machinery, equipment, supplies, and certain types of equipment attached to mobile homes. For each item, you must report your estimate of the current fair market value and condition of the item (good, average, poor). Enter all expensed items at original installed cost.

Do not use "various" or "same as last year" in any of the columns. These are not adequate responses and may subject you to penalties for failure to file.

# Taxpayer's Estimate of Fair Market Value

You must report the taxpayer's estimate of fair market value of the property in the columns labeled "Taxpayer's Estimate of Fair Market Value." The amount reported is your estimate of the current fair market value of the property.

## **Original Installed Cost**

Report 100% of the original total cost of the property in the columns labeled "Original Installed Cost." This cost includes sales tax, transportation, handling, and installation charges, if incurred. Enter only unadjusted figures in "Original Installed Cost" columns.

The original cost must include the total original installed cost of your equipment, before any allowance for depreciation. Include sales tax, freightin, handling, and installation costs. If you deducted a trade-in from the invoice price, enter the invoice price. Add back investment credits taken for federal income tax if you deducted those from the original cost. Include all fully depreciated items at original cost, whether written off or not.

## **Assets Physically Removed**

If you physically removed assets last year, complete the columns in the first section of page 2. If you sold, traded, or gave property to another business or person, include the name in the last column.

# Leased, Loaned, and Rented Equipment

If you borrowed, rented, or leased equipment from others, enter the name and address of the owner or lessor in the second section of page 2. Include a description of the equipment, year you acquired it, year of manufacture (if known), the monthly rent, the amount it would have originally cost had you bought it new, and indicate if you have an option to buy the equipment at the end of the term.