

PROPERTY DECLARATION NOTICE

ASSESSING DEPARTMENT

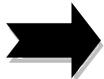
1 City Hall Plaza ▪ Ellsworth, ME 04605-1942
 Phone (207) 667-8674 ▪ Fax (207) 669-6618
 assessing@ellsworthmaine.gov
www.ellsworthmaine.gov

Business Name: Owner Name: Mailing Address:	Location: Other Info: *Please make any necessary changes or corrections
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NOTICE: This schedule is required under Maine Statute, Title 36§ 601 & § 706
Taxpayers who do not comply will, by law, lose their right to appeal the assessment.

NOTICE: BETE applications or **801 Forms ARE NOT** a declaration notice. They must be submitted in addition to your declaration.

GENERAL INSTRUCTIONS



NEW OR FIRST TIME TAXPAYERS: must submit a complete listing of **ALL PERSONAL PROPERTY** used in the operation of the business as of April 1, using the format below as a guide. This form must be signed on the reverse side and returned with an attached itemized list to the Assessor's of on or before May 1st.

ITEM DESCRIPTION	QTY	YEAR NEW	COST EACH

Please list all leased items as shown here.

LEASED FROM	ADDRESS	QTY	DESCRIPTION	YEAR ACQUIRED	MONTHLY RENTAL FEE



PREVIOUSLY ASSESSED TAXPAYERS: must submit a list of all **ADDITIONS and/or DELETIONS** to the prior year's listing (see reverse of this form). Attach additional sheet if necessary.



IF THERE HAVE BEEN NO CHANGES (no additions or deletions) in the past year: please check here and sign the reverse side.



IF YOU HAVE MOVED from Ellsworth **OR CLOSED THE BUSINESS** in the past year: Please note the date here and sign the reverse side.

ADDITIONS

DESCRIPTION	QTY	YEAR NEW	COST EACH	CURRENT VALUE

DELETIONS

LINE #	DESCRIPTION	QTY	YEAR NEW	COST EACH	CURRENT VALUE

LEASED EQUIPMENT

LEASED FROM	ADDRESS	QTY	DESCRIPTION	YEAR ACQUIRED	MONTHLY RENTAL FEE

SIGNATURE: _____ **NAME/TITLE** _____

DATE: _____

PLEASE RETURN FROM TO : City of Ellsworth, Assessing Department, 1 City Hall Plaza, Ellsworth, ME 04605. or by email assessing@ellsworthmaine.gov or by fax 207-669-6618