Reset Form

REPORT TO DEPARTMENT OF LOCAL GOVERNMENT FINANCE BY COUNTY ASSESSOR - FORM 15

Assessed Value of Personal Property in ____ County,

for Assessment Year March 1, 20 _________ .

State Form 34608 (R4 / 5-09)
Prescribed by Department of Local Government Finance

INSTRUCTIONS:

1. *The figures for this report, except for the averages, will be obtained from Form No. 14, filed for each taxing district. The number to be entered in column headed "No." must be the number of assessments and the average entered must be the average amount per assessment. Number and values of each class of property should be respectively added across for each taxing district and placed in column 4. Column 4, when totaled, must equal the sum of the totals of columns 1 through 3. This form must include all assessments from March 1st. Thus, the report will show all assessments for the year and the final average for each class of property and for each taxing district. Averages shall not be entered for the last column.*
2. *Township information should be reported to the County Assessor on Form No. 14 per IC 6-1.1-3-18. The County Assessor is required to report to the Department of Local Government Finance by October 31st.*
3. *DATE FOR FILING THIS REPORT: Report due by October 31st and to include assessments for late filing pursuant to IC 4-10-13-5.*
4. *Do not group taxing districts; report each district separately.*

(*Arrange taxing districts in numerical sequence.*)	Show Assessed Value of Each Class of Property in This Table.							
	(1) Farm Implements and Equipment		(2) Depreciable Tangible Assets		(3) Depreciable Tangible Assets of Public Utility Companies		(4) TOTALS	
TAXING DISTRICT NUMBER	No.	Value	No.	Value	No.	Value	No.	Value
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
Average								
TOTAL								
AVERAGE								

I hereby certify the above report to be full, true and complete this ________ day of ______________________________ , 20________.

Signature of County Assessor	Printed name of County Assessor	Date signed (*month, day, year*)