



**EQUIPMENT LIST FOR NEW ADDITIONS TO ERA DEDUCTION
PERSONAL PROPERTY IN ECONOMIC REVITALIZATION AREA**

State Form 52515 (R5 / 1-23)

Prescribed by the Department of Local Government Finance

JANUARY 1, _____

FORM 103-EL

PRIVACY NOTICE
This form contains
confidential information
pursuant to IC 6-1.1-35-9.

INSTRUCTIONS:

1. This schedule must be filed when any new manufacturing, research and development, logistical distribution and/or information technology equipment is claimed on the schedule of deduction from assessed valuation (Form 103-ERA) that has been installed after the prior year assessment date.
2. A separate list must be completed for EACH APPROVED abatement (Form SB-1 / PP). The equipment list must be attached to the corresponding Form 103-ERA and made part of the Business Personal Property Return (Form 103-Long) filed with the assessor not later than May 15, unless an extension of up to thirty (30) days is granted in writing.
3. A taxpayer's internal list may be attached to this form. Any data omitted from that taxpayer format must be added here, using the Reference Number Column to cross reference to the taxpayer formatted list.
4. The purpose column is to describe the item in sufficient detail to assist the assessing official to determine that the item is eligible for abatement as equipment (as defined in IC 6-1.1-12.1-1). An entry may be left blank if the item is self-describing.

SECTION 1 TAXPAYER INFORMATION				
Name of Taxpayer		Name of Contact Person		
Address of Taxpayer (number and street, city, state and ZIP code)			Telephone Number ()	
County	Township	DLGF Taxing District Number	Email Address	

SECTION 2 ECONOMIC REVITALIZATION AREA INFORMATION		
Name of Body Designating the Economic Revitalization Area	Resolution Number	Length of Abatement (years)

SECTION 3 ABATED EQUIPMENT LIST						
REFERENCE NUMBER ³	INSTALLATION DATE	ITEM	PURPOSE ⁴	COST PER 50 IAC 4.2	POOL LINE NUMBER	ASSESSOR USE ONLY

Check if additional Forms 103-EL are attached for this abatement (Form 103-ERA). This is Equipment List _____ of _____.

Check if taxpayer's internal list is attached.