

2016



Business Personal Property Assessment

2016



Cathy Rinehart, Clay County Assessor

1901 NE 48 ST, Kansas City, MO 64118
PHONE 816/407-3460 FAX 816/407-3461

FORM A

Name:

Mailing Address:

City, State, Zip:

Property Location:

Deputy Type

SCHOOL CITY FIRE ROAD HOSPITAL WATER AMBULANCE MISC

SECTION 1—Account Status

Place a check in this box if **NO ADDITIONS OR DELETIONS IN 2015**

[Please accurately update and complete the following]

Date opened if opened after 1/1/16?		NAME/MAILING ADDRESS CORRECTIONS BELOW
Date closed if closed during previous year?		
Buyer's name and address if sold?		
Current owner/contact name, phone number?		Phone #
Business activity?		Fax #
Do you remit sales tax to the State of Missouri?		Email
Physical location of personal property?		MO Tax ID #
Other DBA name?		MO Charter/Registration #
Other Clay County locations?		FEIN/FID #

STATE OF MO, CLAY COUNTY

I, the undersigned, do hereby certify that the foregoing list contains a true and correct statement of all the tangible personal property made taxable by the laws of the state of Missouri which I owned or which I had under my charge or management on the first day of January, 2016. I further certify that I have not sent or taken or caused to be sent or taken any property out of this state to avoid taxation.

SIGNATURE

DATE

Business Aircraft **Aircraft is being assessed by State Tax Commission**

Year	Make	Model	Serial No. Series
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Hours flown last year? _____
 Used only for noncommercial purposes? _____
 Maximum Certified Gross Takeoff Weight? _____

Recreational Vehicles

Year	Manufacturer	Model	Series
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Purchase Amount		Purchase Date			
<input type="checkbox"/> Motor Home	<input type="checkbox"/> Travel Trailer (Fold outs extended)	\$	Length		
<input type="checkbox"/> Fold out	<input type="checkbox"/> Truck Slide-in				
M	M	D	D	Y	Y

Motorcycles/ATVs

Year	Make	<input type="checkbox"/> Motorcycle <input type="checkbox"/> ATV	Vehicle Identification Number	Purchase Date
		CC'S		M M D D Y Y

Boats/Watercraft

Year	Manufacturer	Model	Series	M	M	D	D	Y	Y	Length _____	Purchase \$ _____	<input type="checkbox"/> John	<input type="checkbox"/> Jet ski
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Motors

Year	Make	H/P	<input type="checkbox"/> Outboard	<input type="checkbox"/> Trolling	<input type="checkbox"/> I/O
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Buses (other than motor homes)

Year	Make	Vehicle Identification Number	# of passengers	M	M	D	D	Y	Y
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Mobile/Manufactured Homes

Year	Make	Length	Width	M	M	D	D	Y	Y
Location (Mobile Home Park Name)									

Kit: Automobile/Aircraft

Year	Make	Model	Series/Number	Cost of Kit? _____	Parts Cost? _____
				Labor Hours? _____	

Farm Equipment

Year	Make	Model	S/N	M	M	D	D	Y	Y
<input type="checkbox"/> LP	Purchase Price								
<input type="checkbox"/> Gas/Diesel	\$								

Grain/non-mfg'd. Agricultural Crops: # of Bushels _____ Total Value _____

Livestock: Colts # _____ Horses # _____ Mules # _____ Goats # _____ Emu Adults # _____ Feeder Lambs # _____ Llamas # _____
 Calves # _____ Yearlings # _____ Cows/Bulls # _____ Elk # _____ Sows/Boars # _____ Barrows/Gilts # _____ Pigs # _____
 Replacement Ewes # _____ Feeder Lambs # _____ Ostrich Yearlings # _____ Ostrich Adults # _____ Poultry # _____