

# PERSONAL PROPERTY LISTING FOR 2017 TAX YEAR

## ALL ASSETS EXISTING AS OF JANUARY 1, 2016

RETURN TO:

**Personal Property Division  
Snohomish County Assessor**  
3000 Rockefeller Ave. M/S 410  
Everett, Washington 98201

(425) 388-3656

<h3 style="margin: 0;">DATE DUE</h3> <h2 style="margin: 0;">APRIL 30TH, 2016</h2>	5% penalty for each month after due date up to 25%. Willful failure to file return form 100% penalty.
P E N A L T Y	
PERSONAL PROPERTY LISTING LAW 84.40.040	

TAXPAYER INFORMATION	
ACCOUNT NO	TAX CODE AREA
NAME AND MAILING ADDRESS	
<input type="checkbox"/> Check here for name OR ownership OR address change and make all changes on back of this form	
PERSONAL PROPERTY LOCATION	
REAL ESTATE PARCEL NO.	CLASS CODE
What year did you start this business in Snohomish County? _____	
TYPE OF BUSINESS? _____	

SUPPLIES NOT HELD FOR SALE
January 1, 2016 Inventory (If representative of monthly average). Consists of supplies and materials not normally held for sale or which do not become an ingredient or component of an article being produced for sale. DIVIDE YEARLY FIGURE BY 12 AND ENTER RESULT. \$ _____
<b>THIS AREA MUST BE COMPLETED ANNUALLY TO QUALIFY FOR HEAD OF FAMILY EXEMPTION</b>
___ Partnership ___ Corporation ___ Sole Proprietor ___ LLC ___ LLP ___ Trust
<b>IF SOLE PROPRIETOR, ARE YOU</b>
The head of a family?..... Yes ___ No ___
A widow or widower?..... Yes ___ No ___
A citizen over 65 yrs. of age with 10 yrs. continuous state residence?..... Yes ___ No ___
Claiming this exemption on any other form in this or any other county?..... Yes ___ No ___
WASHINGTON STATE UBI NO. _____

ASSET OR GROUP NO.	LINE NO.	ITEM DESCRIPTION ENTER ADDITIONAL ASSETS BELOW	YEAR ACQUIRED	ORIGINAL COST	REVISED COST
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PLEASE ATTACH A COPY OF YOUR CURRENT DEPRECIATION SCHEDULE		ASSESSOR'S USE ONLY
Print owner's name: _____	REC'D	
Preparer/agent name: _____ Date: _____	AV	
Signature: <b>X</b> _____	ENTERED	
Phone: ( ) _____ Email: _____	<input type="checkbox"/> Owner <input type="checkbox"/> Agent	
THIS RETURN SUBJECT TO AUDIT AND VERIFICATION BY THE COUNTY ASSESSOR AND STATE DEPARTMENT OF REVENUE THE CONTENTS OF THIS FORM CONFORM TO THE STANDARDS AS PRESCRIBED BY THE STATE DEPARTMENT OF REVENUE <b>YOU WILL RECEIVE AN ASSESSMENT NOTICE BASED ON INFORMATION YOU PROVIDE ON THIS LISTING</b>		