

**TOWN OF THOMASTON – SHORT FORM  
2020 PERSONAL PROPERTY DECLARATION**

ASSESSMENT DATE **OCTOBER 1, 2020**

REQUIRED RETURN DATE: **NOVEMBER 2, 2020**

DIRECT QUESTIONS CONCERNING RETURN TO:

LOCATION OF ACCOUNTING RECORDS

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone/Fax \_\_\_\_\_  
 Description of Business \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date your business began in Thomaston? \_\_\_\_\_  
 How many square feet does your firm occupy at your location (s) in Thomaston ? \_\_\_\_\_ Sq. Ft. Own \_\_\_ Lease \_\_\_

Owner's Name: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Name of Business: \_\_\_\_\_

**BUSINESS DATA FOR ALL FILERS  
NOTE "N/A" ON LINES NOT APPLICABLE**

RETURN FORMS TO: ASSESSOR'S OFFICE  
 PO BOX 136  
 THOMASTON, CT 06787

Type of ownership:

Corporation  
 LLC  
 Partnership  
 Sole Proprietor  
 Other \_\_\_\_\_

Type of Business:

Manufacturer  
 Service  
 Retail/Mercantile  
 Wholesale  
 Profession  
 Tradesman  
 Lessor  
 Other \_\_\_\_\_

In the last 12 months was any of the property included in this declaration located in another Connecticut town for at least 3 months? If yes, identify by specific months, code , cost and location(s).

Are there any other business operations that are operating from your address here in this town? If yes, give name and mailing address.

Do you own tangible personal property that is leased or consigned to others in this town? If yes, complete **LESSOR'S REPORT.**

Did you have in your possession on October 1st any borrowed, consigned, stored or rented property? If yes, complete **LESSEE'S REPORT.**

YES	NO

**AFFIDAVIT OF BUSINESS CLOSING OR MOVE OF BUSINESS OR SALE OF BUSINESS**

I \_\_\_\_\_ of \_\_\_\_\_ at \_\_\_\_\_  
 Business Owner's name Business Name (if applicable) Street location of business name shown

with regards to said business do certify that on \_\_\_\_\_ said business was (check one and complete)  
 date

SOLD TO: \_\_\_\_\_ ATTACH BILL OF SALE  
 name address

MOVED TO: \_\_\_\_\_

TERMINATED: ATTACH LETTER OF DISSOLUTION OR OTHER SUPPORTING DOCUMENTATION

The signer is made aware that the penalty for making a false affidavit is a \$500 fine or imprisonment for one year or both.

\_\_\_\_\_ signature \_\_\_\_\_ Print name

**AFFIDAVIT – THIS FORM MUST BE SIGNED (AND IN SOME CASES WITNESSED) BEFORE IT MAY BE FILED WITH THE ASSESSOR  
 AVOID PENALTY – NOTARIZE PERSONAL PROPERTY DECLARATION SIGNED BY AGENT**

I DO HEREBY declare under penalty of false statement that this declaration, according to the best of my knowledge, remembrance, and belief, is a true statement of all my property, owned by me and in my possession, or under my control, located in the Town of Thomaston on October 1, 2020, liable to taxation. I also declare under penalty of false statement that I have not conveyed or temporarily disposed of any estate for the purposes of evading the laws related to the assessment and collection of taxes and that no attempt has been made to mislead regarding the total number and type of all items or the true original cost and year acquired. I request the information contained in this declaration be kept confidential. I understand that the information provided herein is subject to an audit.

OWNER'S SIGNATURE OR \_\_\_\_\_ PRINT OWNER'S NAME \_\_\_\_\_ DATED \_\_\_\_\_  
 CORPORATE OFFICER

I DO HEREBY declare under oath that I have been duly appointed agent for the owner of the property listed above and that I have full authority and knowledge sufficient to file a proper declaration for him/her in accordance with the provisions of CGS §12-50.

AGENT'S SIGNATURE \_\_\_\_\_ PRINT AGENT'S NAME \_\_\_\_\_ DATED \_\_\_\_\_

Witness of agent's sworn statement  
 Subscribed and sworn to before me DATE \_\_\_\_\_ NAME: \_\_\_\_\_



## 2020 PERSONAL PROPERTY DECLARATION – SHORT FORM

Commercial and financial information is not open to public inspection.

**#9 Motor Vehicles UNREGISTERED** motor vehicles (e.g. campers, RV's, snowmobiles, trailers, trucks, passenger cars, tractors, off-road construction vehicles, etc.) including any vehicle garaged in Connecticut but registered in another state, or any such vehicle not registered at all. If you are a farmer eligible for the exemption under Sec. 12-91, list tractors in Code 17.

Year	Make	Model	Identification No.	Length	Weight	Purchase Price	Date	Value

**#11 Horses And Ponies** Describe your horses and ponies. A \$1,000 assessment exemption per animal will be applied. If you are a farmer, the exemption may be 100% provided Form M-28 is filed with and approved by the Assessor.

Breed	Age	Registered	Sex	Quality: Breeding/Show/Pleasure/Racing	Value

**#14 Mobile Manufactured Homes** if not currently assessed as real estate

Year	Make	Model	Identification No.	Length	Width	Bedrooms	Baths	Value

**Exemption** - Check box adjacent to the exemption you are claiming:

- I – Mechanic's Tools - \$500 value   
  M – Commercial Fishing Apparatus - \$500 value  
 I – Farming Tools - \$500 value   
  I – Horses/ponies \$1000 assessment per animal

All of the following exemptions require a separate application and/or certificate to be filed with the Assessor by the required return date

- J – Water Pollution or Air Pollution control equipment – Connecticut DEP certificate required – provide copy  
 I – Farm Machinery \$100,000 value - Exemption application M-28 required annually  
 G & H – Distressed Municipality/Enterprise Zone/Enterprise Corridor Zone - Exemption application M-55 required annually

**LESSEE'S LISTING REPORT** Lessee's Name \_\_\_\_\_ Pursuant to Connecticut General Statutes §12-57a all leased, borrowed, consigned, loaned, rented, or stored personal property not owned by you but in your possession as of the assessment date must be included on this form. Failure to declare, in the form and manner as herein prescribed, shall result in the presumption of ownership and subsequent tax liability plus penalties. Property you do not lease that may be in your possession and must be reported includes (but is not limited to) dumpsters, gas/propane tanks, vending machines, water coolers, coffee machines.

COPY AND ATTACH ADDITIONAL SHEETS IF NEEDED

- Yes  No  Did you dispose of any leased items that were in your possession on October 1, 2019? If yes, enter a description of the property and the date of disposition in the space to the right. \_\_\_\_\_  
 Yes  No  Did you acquire any of the leased items that were in your possession on October 1, 2019? If yes, indicate previous lessor, item(s) and date(s) acquired in the space to the right. \_\_\_\_\_  
 Yes  No  Is the cost of any of the equipment listed below declared anywhere else on this declaration? If yes, note year in the 'Year Included' row and list cost in the 'Acquisition Cost' row. \_\_\_\_\_

	Lease #1	Lease #2	Lease #3
Name of Lessor			
Lessor's address			
Lease Number			
Item description / Model #			
Serial #			
Year of manufacture			
Capital Lease	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Lease Term – Beginning/End			
Monthly rent			
Acquisition Cost			
Year Included			

**The Personal Property Declaration must be signed above and delivered to the Assessor or postmarked by, November 2, 2020.  
A 25% penalty will be applied to those accounts who do not file or file late.**