



TEXAS LAW REQUIRES THAT YOU COMPLETE AND RETURN THIS FORM BY APRIL 15, 2010

BRAZORIA COUNTY APPRAISAL DISTRICT
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CONFIDENTIAL

BUSINESS PERSONAL PROPERTY RENDITION OF TAXABLE PROPERTY

AS OF JANUARY 1, 2010

AGENT / BUSINESS NAME AND MAILING ADDRESS

Empty box for agent/business name and mailing address.

ACCOUNT NUMBERS & LEGAL DESCRIPTION

Empty box for account numbers and legal description.

IMPORTANT: This rendition covers property you own or manage and control as a fiduciary on January 1 of this year. You must file this return with the county appraisal district after January 1 and not later than April 15 of this year.

In completing your rendition, state law provides you may either provide a good faith estimate of the market value or the historical cost of the property when purchased and the year acquired.

Nature of Business: _____ No. of Sq. Ft. Business Occupies at This Location: (optional) _____

Name of Owner: _____

Address of Owner: _____

Business Phone: (_____) _____ - _____ If business has been discontinued or sold, please indicate the following:

Date sold/discontinued:(optional) ____/____/____ To whom the business was sold: (optional) _____

GENERAL DESCRIPTION OF BUSINESS ASSETS

1. Give location of assets if different from location above: _____

2. Please describe the general types of assets you own (merchandise, parts, tools, supplies, office equip, trucks, trailers, etc.)

3. [] I affirm that the information contained in the most recent rendition statement filed by the property owner in a prior year is accurate with respect to the current tax year in accordance with Section 22.01(l) of the Texas Property Tax Code. (If checked, you may skip to part D)

4. What do you estimate to be the total market value of your business assets?
[] Under \$20,000* (optional: Give estimated market value: _____)
[] \$20,000 or more

*If you checked under \$20,000, you may skip to part D. If you checked \$20,000 or more, please complete all parts of the form.

Table with 7 columns: Inventory Item, Quantity, Good Faith Estimate of Market Value, Historical Cost When New, Year Acquired, Factor, Value. Includes 'PART A - INVENTORY' header and 'CHECK INVENTORY ACCOUNTING METHOD' options.

CONSIGNED GOODS

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR GOODS, STOCK, INVENTORY AND/OR MERCHANDISE IN YOUR POSSESSION ON JANUARY 1 FOR WHICH YOU ARE NOT LIABLE FOR AD VALOREM TAXES. ATTACH ADDITIONAL SHEETS AS NEEDED.

NAME OF CONSIGNOR _____ DESCRIPTION OF CONSIGNMENT _____
 ADDRESS _____ ESTIMATE OF TOTAL VALUE (optional) _____

PART B – FIXED ASSETS

6 COMPUTERS PC - 4 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005 & older				
			TOTAL	

6A COMPUTERS MAINFRAME - 6 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003 & older				
			TOTAL	

6B TELEPHONE/FAX EQUIPMENT - 5 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004 & older				
			TOTAL	

6C BUSINESS MACHINES - 8 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003				
2002				
2001 & older				
			TOTAL	

7 FURNITURE FIXTURES – 10 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003				
2002				
2001				
2000				
1999 & older				
				TOTAL

8 MACHINERY & EQUIPMENT - 10 YEAR LIFE				
In addition, please attach a list showing make & size of machinery & equipment.				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003				
2002				
2001				
2000				
1999 & older				
				TOTAL

9 LEASEHOLD IMPROVEMENTS/SIGNAGE – 8 YEAR LIFE				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003				
2002				
2001 & older				
				TOTAL

10 VEHICLES (1 ton and under) - 5 YEAR LIFE				
In addition, please attach a list showing make, body type & license or VIN #.				
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004 & older				
				TOTAL

11	VEHICLES (over 1 ton) – 8 YEAR LIFE In addition, please attach a list showing make, body type & license or VIN.			
YEAR ACQUIRED (and)	HISTORICAL COST NEW (or)	GOOD FAITH EST OF MARKET VALUE	<i>DO NOT WRITE IN THIS SPACE</i>	
			FACTOR	VALUE
2009				
2008				
2007				
2006				
2005				
2004				
2003				
2002				
2001 & older				
			TOTAL	

PART C – LEASED EQUIPMENT

LEASED EQUIPMENT

If, on January 1, you have in your possession any business equipment or vehicles which are leased, loaned, stored or otherwise held and not owned by you, the kind, nature and value of such equipment should be reported below.

LISTING FOR OTHERS - Persons required to list property on behalf of others shall list it in the same manner in which they are required to list their own, but they shall list it separately from their own, specifying in each case the name of the person, estate, company or corporation to whom it belongs. (TEXAS PROPERTY TAX CODE Section 22.04 [a]).

IF YOU HAVE NO LEASED EQUIPMENT, PLEASE WRITE "NONE" ACROSS THE FACE OF THE SCHEDULE BELOW.

NAME AND ADDRESS OF OWNER OF LEASE EQUIPMENT	BEGIN AND END DATE OF LEASE <i>(optional)</i>	DESCRIPTION	SELLING PRICE IF STATED IN YOUR LEASE <i>(optional)</i>	MONTHLY RENT <i>(optional)</i>

IF ADDITIONAL SPACE FOR LISTING IS REQUIRED, PLEASE ATTACH SEPARATE SHEET.

PART D – SIGNATURE & AFFIRMATION

IF YOU MAKE A FALSE STATEMENT ON THIS FORM, YOU COULD BE FOUND GUILTY OF A CLASS A MISDEMEANOR OR A STATE JAIL FELONY UNDER TEXAS PENAL CODE SECTION 37.10.

THIS FORM MUST BE SIGNED AND DATED. BY SIGNING THIS DOCUMENT, YOU ATTEST THAT THE INFORMATION CONTAINED ON IT IS TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE AND BELIEF.

SIGN HERE: _____ PRINT NAME: _____

TITLE: _____ TELEPHONE: (_____) _____ - _____ DATE: _____ / _____ / _____

ADDRESS: _____

CITY, STATE, ZIP: _____

IF THIS DOCUMENT IS BEING PREPARED BY SOMEONE OTHER THAN THE OWNER, OWNER'S EMPLOYEE, OR OWNER'S AFFILIATED ENTITY, PLEASE HAVE FORM NOTARIZED BELOW.

SUBSCRIBED AND SWORN TO BEFORE ME this the _____ day of _____, 20 _____.

Notary Public