



*Town of Paris*  
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207-743-2501/207-743-6718

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Assessor  
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## 2022 PERSONAL PROPERTY SCHEDULE FORM

**This schedule is required under ME State Statute, Title 36, § 601 and 706-A and MUST be presented to our office, either in physical form or electronically ON OR BEFORE MAY 1, 2022.**

**FAILURE TO FILE** shall result in a presumption of your ownership (leased or otherwise), subsequent tax liability of any taxable real or personal property items in your possession and may result in the loss of your right to appeal. Prompt attention to this request will help ensure that your assessment will be based on the most accurate information available.

**Please complete the following information:**

Owner Name
Business Name
Mailing Address
Business Location

- ALL BUSINESSES:** Provide a true and complete itemized list of all taxable property used to operate the business by following the instructions on the reverse side of this form. Attach additional documentation as needed.
- MOVED OR OUT OF BUSINESS:** If your business is no longer located in Paris as of April 1, 2022, then state the effective date and the reason. (moved, closed, never opened, different owner)  
Effective Date: \_\_\_\_\_ Brief Explanation: \_\_\_\_\_
- APARTMENT BUILDING OWNERS:** Follow the instructions in number 1 & provide:  
Number of Units \_\_\_\_\_ Number of Units Occupied \_\_\_\_\_ Monthly Rent \_\_\_\_\_
- LEASING COMPANIES not located in Paris** – Submit a complete list of all items leased to businesses/individuals located in Paris and situated as of April 1, 2022. If you have an agreement with the lessee that makes them responsible for the property tax, you must provide written verification. Proceed to the reverse side of this form.
- RENTAL COMPANIES:** Follow the instructions in number 1. If you have rental equipment that is held as inventory for resale on April 1, 2022, then you must provide evidence in addition to this form.

**Having carefully read the above, I hereby certify that the information reported herein is full, true, and correct to the best of my knowledge and belief. Incomplete and insufficient forms will not be accepted.**

Name \_\_\_\_\_ Signature \_\_\_\_\_

Phone No \_\_\_\_\_ E-Mail \_\_\_\_\_

Date \_\_\_\_\_ Business Web Site \_\_\_\_\_

Do you wish to be notified of your assessed value prior to tax billing? YES \_\_\_ NO \_\_\_  
May we contact you by e-mail? YES \_\_\_ NO \_\_\_

## ITEMIZED LISTING

**Pursuant to Title 36, Section 706-A, please provide a true and perfect list of all equipment and fixtures used in the operation of the business and which is in your possession as of April 1, 2022.**

**As defined by 36 M.R.S.A. §601 personal property includes, but is not limited to, items such as the following: Furniture, fixtures, appliances, manufacturing machinery and equipment, store and office furniture, professional libraries, computer equipment and software.**

**ALL PERSONAL PROPERTY OWNED OR LEASED BY YOUR BUSINESS MUST BE INCLUDED.** Even personal property which has been fully depreciated for income tax purposes must be reported. The taxable value for municipal assessment is generally replacement cost less depreciation.

**Items are not depreciated to zero: *if it's in use, it has value!***

**DIRECTIONS:** 1. List each item 2. Enter the month and year the item was acquired 3. If acquired used, enter the year of the manufactured date 4. Original cost new 5. If the item was acquired used, was homemade by the owner or received free at no cost, enter the best estimated value. 6. Provide any additional notes or material as needed.

[illegible]

**NO CHANGES – Have you have acquired or removed any property since last April 1, 2021? YES\_\_\_NO\_\_\_**

**Do You Lease any Items Used at the Business?** YES \_\_\_\_ NO \_\_\_\_ It is the responsibility of the lessor to pay the property tax on any property that they lease to you, unless there is a contractual agreement that states that you are responsible to pay the property tax. If so, please provide the written agreement. Otherwise, answer the following questions so that we may bill the leasing company appropriately.

1. Leased Item: \_\_\_\_\_  
Leasing Company: \_\_\_\_\_  
Company Mailing Address: \_\_\_\_\_  
Original Cost: \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_