



Form P-1

Type of Ownership: (Check one below:)

Corporation
 Partnership
 LLC
 Sole Proprietor
 Other (Describe) _____

Assessment Date: October 1, 2011
Return Date: November 1, 2011

Section A -- Business Data *Description of Business:* _____

Direct Questions To:

Location of Accounting Records:

Name: _____
 Address: _____
 City/State/Zip: _____
 Telephone Number: _____

Section B -- Taxable Property Information

#10 - Machinery & Equipment

Year	Original Cost	% Good	Net Value
2011		95%	
2010		90%	
2009		80%	
2008		70%	
2007		60%	
2006		50%	
2005		40%	
Prior		30%	
Total			

#16 - Furniture, Fixtures & Equipment

Year	Original Cost	% Good	Net Value
2011		95%	
2010		90%	
2009		80%	
2008		70%	
2007		60%	
2006		50%	
2005		40%	
Prior		30%	
Total			

**#16A - Test Equipment & Copiers
Fax Machines & Telephone Systems**

Year	Original Cost	% Good	Net Value
2011		95%	
2010		80%	
2009		60%	
2008		40%	
Prior		20%	
Total			

#20 - EDP Equipment ONLY

Year	Original Cost	% Good	Net Value
2011		90%	
2010		60%	
2009		40%	
2008		20%	
Prior		10%	
Total			

**#21 - Telecommunication Equipment
(Service Providers Only)**

Excluding cables, conduits, antennae, towers, batteries, generators or any other equipment not deemed technologically advanced by the Assessor

Year	Original Cost	% Good	Net Value
2011		95%	
2010		80%	
2009		60%	
2008		40%	
Prior		20%	
Total			

**#22 - Utility Equipment: Cables, Conduits,
Poles, Towers, Mains & Wires**

Year	Original Cost	%	Net Book Value
2011			
2010			
2009			
2008			
2007			
2006			
2005			
Prior			
Total			

DPUC Regulated Utilities Check Here _____

Section B -- Taxable Property Information - continued

#24 - All Other Goods, Chattels & Effects (Including Leasehold Improvements)			
Year	Original Cost	% Good	Net Value
2011		95%	
2010		90%	
2009		80%	
2008		70%	
2007		60%	
2006		50%	
2005		40%	
Prior		30%	
Total			

#24A - Rental Video Tapes			
Year	Original Cost	% Good	Net Value
2011		95%	
2010		80%	
2009		60%	
2008		40%	
Prior		20%	
Total			

#23 - Supplies & Non-Mercantile Inventory		
Manufacturers & Retailers exempt from inventory but not supplies. Use average monthly figures. Be sure to include supplies consumed for your own use as well as any non-mercantile (not for resale) inventory.		
MONTH	SUPPLIES	INVENTORY
October 2010		
November 2010		
December 2010		
January 2011		
February 2011		
March 2011		
April 2011		
May 2011		
June 2011		
July 2011		
August 2011		
September 2011		
TOTAL		

Questions:

1. How many employees work in your facilities in Windsor? _____
2. How many square feet does your firm occupy in Windsor? _____

Section C - General Ledger Information

	Balance as of October 1, 2011		
	Cost	Depr.	Net
Machinery & Equipment			
Furniture & Fixtures			
EDP Equipment			
Others			
TOTAL			

	Balance as of October 1, 2010		
	Cost	Depr.	Net

Total cost of fully depreciated assets still in use **but not included with the above balances:** _____

In compliance with the State Freedom of information Commission I hereby request that the information contained in this report be kept confidential and exempt from public disclosure. [] NOT APPLICABLE UNLESS BOX IS CHECKED.

Affidavit

I DO HEREBY declare under penalty of false statement that all sections of this declaration have been completed according to the best of my knowledge, remembrance and belief and is a true statement of all my personal property subject to taxation and that I have not misled the Assessor as to age, quantity and or quality.

Signature _____

Date: _____

Please print name here _____

Phone # _____