



**2024 PERSONAL PROPERTY SCHEDULE FORM**

*This schedule is required under ME State Statute, Title 36, § 601 and 706-A.  
Return to the Assessor's Office no later than May 1, 2024*

**Failure to return this form to the Assessor's Office voids your right to appeal the assessment.**

**Please complete the following information:**

Owner Name
Business Name
Mailing Address
Business Location
Business Website
Telephone Number
E-Mail Address

- 1. ALL BUSINESSES:** If you filed last year, please contact us for a copy of your record, then draw a line through items deleted and use the reverse side of this form to add new items, **OR** file a complete itemized list using the back side of this form.
- 2. MOVED OR OUT OF BUSINESS:** If your business is no longer located in Winslow as of April 1, 2024, then state the effective date and the reason (moved, closed, never opened, different owner)

Effective Date: \_\_\_\_\_ Brief Explanation: \_\_\_\_\_

- 3. LEASING COMPANIES** – Submit a complete list of all items leased to businesses/individuals located in Winslow and situated as of April 1, 2024. If you have an agreement with the lessee that makes them responsible for the property tax, you must provide written verification.
- 4. RENTAL COMPANIES:** Follow the instructions in number 1. If you have rental equipment that is held as inventory for resale on April 1, 2024, 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 \_\_\_\_\_

**BETE (BUSINESS EQUIPMENT TAX EXEMPTION)**

Applications must be filed separately from this report. For more information on **BETE**, click the below link and open **PROPERTY TAX RELIEF PROGRAMS.**

<https://www.maine.gov/revenue/taxes/property-tax>

**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, 2024.

Please contact the Assessor's Office if you have any questions or need assistance.

**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.

1. ITEM DESCRIPTION	2. DATE ACQUIRED Month/Year	3. YEAR OF MANUFACTURE	4. ORIGINAL COST NEW	5. ESTIMATED VALUE

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