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2023

**Business Tangible Personal Property
& Machinery and Tools Form**

Located in Giles County 1/1/2023

Due: May 3, 2023

Return to: Lisa J Corell
Commissioner of the Revenue
130 N. Main Street
Pearisburg, VA 24134
Phone: (540) 921-3321
Fax: (540) 921-3473
Email: lcorell@gilescounty.org

Name of Taxpayer _____

Trade name _____

Mailing _____

Address _____

Business Located _____

Federal I.D. # _____

↑ County

Town ↑

_____ of
Social Security # _____

**Personal Property: ATTACH LIST OF ALL BUSINESS RELATED FURNITURE,
TOOLS AND EQUIPMENT, INCLUDING FULLY DEPRECIATED PROPERTY.
PROVIDE DESCRIPTION, DATE PURCHASED AND ORIGINAL COST.
ATTACH COPY OF FEDERAL DEPRECIATION SCHEDULES. LIST
VEHICLES BELOW.**

Total Original Cost

Office Use

\$ _____

Machinery & Tool: (For taxpayers engaged in manufacturing, mining, processing, reprocessing, radio & television broadcasting, dry cleaners or laundry, or dairy business) Enter original capitalized cost before depreciation, discounts, etc. Attach list of itemized breakdown of description of property, date purchased and original cost.

\$ _____

Merchants Capital: (to be reported if taxpayer is a merchant)
Inventory of Stock on Hand (All other taxable personal property of any kind whatsoever, except money on hand and on deposit and except tangible personal property not offered for sale as merchandise, which tangible personal property should be reported as such.)

\$ _____

Vehicles used 50% or more in Business

Year	Make-Model	I.D. #	Date Acq'd
Office Use			

(over)

Leased Equipment: Lessors and lessees are **both** required to report leased property **located in Giles County**. Lessees reporting leased property and paying property tax for the owner should file a return separate from their own. The account should be listed in the name of the owner of the property (the lessor) in care of the lessee at the lessees address. List below all tangible personal property and machinery & tools leased or rented from others.

Name of Owner	Address of Owner	Description of
Equipment	Date of Lease	

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Mobile Office

Year Acq'd	Cost	Make-Model	I.D. #	Date

Companies owning vending machines, equipment, etc. at your location--- NOT LEASED

Company	Address	No. of Machines

If you are no longer in business, give the date you ceased operations. ____/____/____.

Note: It is a misdemeanor for any person willfully to subscribe a return which he does not believe to be true and correct as to every material matter. (Code of Virginia 58.1-11)

I declare that the foregoing statements and figures are true, full and correct to the best of my knowledge and belief.

Signature of Taxpayer

Date

Phone number of contact person

E-mail address

Failure to file this form will result in a statutory assessment

Code of VA 58.1-3519