

JOSEPH R. "ROCKY" ROMANO, ASSESSOR
 HARRISON COUNTY ASSESSOR'S OFFICE
 301 WEST MAIN STREET
 CLARKSBURG, WV 26301
 (304) 624 8510

ACCT

BUSINESS CODE: TAX YEAR: 2018

HARRISON COUNTY, WEST VIRGINIA INDIVIDUAL PERSONAL PROPERTY
 AND REAL ESTATE REPORT (PROPERTY OWNED ON JULY 1, 2017)
 THE LAW PROVIDES THAT EVERY PERSON LIABLE TO TAXATION SHALL MAKE
 A REPORT IN WRITING TO THE ASSESSOR OF THEIR PROPERTY WHETHER
 CALLED UPON BY THE ASSESSOR OR NOT. THIS REPORT SHOULD BE
 REVIEWED AND FILED WITH THE APPLICABLE CHANGES AS SOON AS POSSIBLE
 AFTER JULY 1, BUT NO LATER THAN THE FIRST DAY OF OCTOBER.
 REFER TO INSTRUCTIONS, IF ENCLOSED, OR CONTACT YOUR ASSESSOR'S
 OFFICE IF YOU NEED ASSISTANCE IN COMPLETING THIS FORM.
 FILING LATE OR FAILURE TO FILE MAY RESULT IN A \$25.00 TO \$100.00
 PENALTY.

NAME: _____

 ADDR: _____
 CITY: _____
 STATE: _____ ZIP: _____

ACCOUNT #: _____
 PHYSICAL ADDR: _____
 TAX YEAR: 2018 BASED ON JULY 1, 2017
 TAX DISTRICT: _____
 PHONE: _____ CELL: _____
 SS #: _____ (OPTIONAL)

CHANGE OF ADDR: _____

 EMAIL _____

SCHEDULE 1 ----- VEHICLES, BOATS, BOAT MOTORS, AIRCRAFT, ATVS AND OTHER PERSONAL PROPERTY -----
 LIST CARS, TRUCKS, VANS, MOTORCYCLES(SHOW CCS), SCOOTERS, MOBILE CAMPERS, MOTOR HOMES, AIRCRAFT, BOATS AND TRAILERS,
 UTILITY TRAILERS, DOZERS, BACKHOES, WELDERS, RECREATIONAL 4-WHEELERS, SHOW OR RACE HORSES, SHOW OR RACE DOGS ETC.
 INCLUDE UNLICENSED VEHICLES. (DO NOT LIST LEASED VEHICLES) VIN IS REQUIRED FOR ACCURATE VALUATION. IF YOU DO NOT OWN
 ANY, WRITE NONE! IF YOUR DOMICILE IS WV AND YOU ARE ACTIVE DUTY STATIONED OUTSIDE WV AND YOUR VEHICLES ARE IN YOUR
 POSSESSION YOU MAY QUALIFY FOR AN EXEMPTION OF ONE VEHICLE. A COPY OF YOUR MILITARY ORDERS MUST BE ATTACHED TO THIS
 FORM. *OLDER VEHICLES MAY REQUIRE A PHOTO AS OF JULY 1, 2017

TYPE	MAKE	MODEL	YEAR	VIN, CC'S FOR MOTORCYCLES & ATV'S LENGTH, WIDTH OF RV, BOATS & TRAILERS	PURCHASE YEAR	PURCHASE COST	OWNER'S VALUE	ASSESSOR USE

*** ALL PERSONAL PROPERTY WITH MULTIPLE YEAR LICENSE RENEWAL MUST BE REPORTED ON THIS FORM PER WV STATE CODE.***

SCHEDULE 2 ----- MOBILE HOMES AND CABINS - MORE THAN 1 ATTACH LIST -----

MOBILE HOME TRADE NAME	ACCOUNT ID	SIZE	YEAR	PERMIT#	USED FOR RESIDENCE OR RENTAL

IMPROVEMENTS TO MOBILE HOME: _____ OWNER'S VALUE _____ ASSESSOR'S VALUE _____
 NAME OF LANDOWNER _____ PHONE NUMBER: _____
 CABIN SIZE: _____ YEAR BUILT: _____ OWNER VALUE: _____

IF YOU WILL BE 65 YEARS OF AGE, OR OLDER, BEFORE JUNE 30TH OF THE NEXT YEAR, OR IF YOU ARE PERMANENTLY DISABLED, THEN
 YOU MAY FILE FOR THE HOMESTEAD EXEMPTION. SEPARATE APPLICATION MUST BE MADE TO THE COUNTY ASSESSOR NO LATER THAN DEC 1

TAXPAYER'S SIGNATURE _____ DATE _____ (SEE REVERSE OR NEXT PAGE)

TAX DISTRICT:

SCHEDULE 3

LIST OF REAL ESTATE OWNED

DISTRICT, MAP & PARCEL #

(FROM YOUR TAX TICKET)

BUILDING USED FOR:

LAND USED FOR:

SECOND HOME, OR RENTAL

FARM, COMMERCIAL

(LIST USE)

(LIST USE)

BUILDING

LAND

OWNER'S VALUE

SCHEDULE 4

NEW BUILDINGS, STRUCTURES, ADDITIONS, DELETIONS AND REMODELING

CONSTRUCTED ON YOUR PROPERTY DURING THE PAST 12 MONTHS

BUILDING PERMIT MAY BE REQUIRED

SCHEDULE 5

TOTAL COST \$ DESCRIBE (GARAGE, PORCH, ETC) WHICH TRACT OF LAND

SCHEDULE 5 ON JULY 1, WERE THERE ANY MOBILE HOMES OR CABINS NOT OWNED BY YOU LOCATED ON YOUR LAND?

(IF MORE THAN 2, ATTACH LIST)

IF NONE, WRITE NONE; IF YES, GIVE NUMBER: AND COMPLETE SCHEDULE BELOW.

DISTRICT: MAP: PARCEL: SUB PARCEL:

MOBILE HOME OR CABIN OWNER'S NAME

MOBILE HOME OR CABIN OWNER'S NAME

SCHEDULE 6

IF YOU DO NOT OWN A HOME AND YOU RENT, WHO IS YOUR LANDLORD?

DISTRICT: MAP: PARCEL: SUB PARCEL:

IF YOU ARE BUYING PROPERTY ON A LAND CONTRACT WHO IS THE SELLER? ARE YOU LIVING ON THIS PROPERTY?

NAME: YES NO

SCHEDULE 7

PLEASE NOTE THAT WV CODE 11-3-9 WAS AMENDED EFFECTIVE JANUARY 1, 2007 FOR TAX YEAR 2008 TO EXEMPT

CLASS 1 PERSONAL PROPERTY EXCLUSIVELY IN AGRICULTURE TO INCLUDE VEHICLES THAT QUALIFY FOR A FARM USE EXEMPTION

CERTIFICATE, FARM MACHINERY AND EQUIPMENT, LIVESTOCK AND PRODUCTS OF AGRICULTURE WHILE IN THE HANDS OF THE PRODUCER.

SCHEDULE 8

COVOTE FUND FEE

PLEASE INCLUDE A \$1.00 FEE FOR EACH HEAD WITH THIS COMPLETED FORM

LIST NUMBER OF SHEEP AND GOATS OF BREEDING AGE: SHEEP

GOATS

SCHEDULE 8

*** MAIL IN FEE WITH COMPLETED FORM ***

OFFICE USE ONLY

AGE

NAME

SEX

HAIR COLOR

HAIR LENGTH

BREED

FEE

COUNTY

MUNICIPAL#

(M OR F) (SHORT, MED, LONG)

TAG#

1.

2.

3.

4.

5.

6.

7.

8.

9.