

ORLEANS PARISH ASSESSOR

P.O. Box 53406
New Orleans , LA 70153-3406
Phone: (504) 658-1350

**FAILURE TO
COMPLETE AND
RETURN THIS FORM
WILL RESULT IN AN
INCREASED
ASSESSMENT**

Instructions to Complete 2021 Personal Property Rendition Forms

Dear Taxpayer:

Enclosed is a Personal Property Rendition form for tax year 2021. This form is mailed annually to all those engaged in business in Orleans Parish. LA RS:47:2325 requires that the Assessor annually deliver to each business a rendition form for completion and that it be returned to his office within 45 days.

The information you provide will be used to determine your 2021 assessment. **If you fail to return the properly completed form, you forfeit the right to question or contest the assessment determined by the Assessor. Should you choose not to complete and submit this form, your assessment will be determined based upon the best available information and will not be adjusted.**

Please verify the business name, owner name, location and mailing address and make any necessary changes on the form. **Do not submit incomplete forms and do not submit forms marked "same as last year" as they will be rejected. Please note you must sign the form for it to be processed.**

Section 1 refers to Inventory and should be listed by the monthly average. The inventory value is what it would cost to replace it in its existing condition. **Section 2** relates to Furniture and Fixtures; **Section 3**, Machinery and Equipment; and **Section 4**, Leasehold Improvements. Please list the acquisition cost and year each item was purchased. You must report items even though they are fully depreciated for federal tax purposes or have zero "book value" if they are still in your possession. If an asset was disposed of, it should be listed as disposed and identified as sold, traded, transferred or destroyed. You must include an itemized schedule of all fixed assets. Leasehold improvements made to rented property should be listed in **Section 4**. To complete **Section 5**, list the names and mailing address of the owners of all consigned, leased, rented or borrowed items. Any consigned, leased or borrowed assets not reported as such will be assessed to you.

You must report all assets in Orleans Parish to this office. Assets in zip codes 70121 and 70123 must be reported to Jefferson Parish.

The 2021 Tax Rolls will be open from July 15, 2020 to August 17, 2020 for public inspection. You can, at that time, verify assessments before they are certified and released to the City of New Orleans to prepare tax bills in late December 2020. If you have questions or need assistance with completing your form, please call (504) 658-1350 or e-mail efile@orleansassessors.com.

Sincerely,



Erroll G. Williams
Orleans Parish Assessor

EGW
Enclosures

LAT 5 - INVENTORIES, MERCHANDISE, ETC....

CONFIDENTIAL: RS 47:2327: Forms by a taxpayer shall be used by assessor, the governing authority, and Louisiana Tax Commission solely for the purpose of administering this statute.

Legal Citation & Instructions: This report shall be filed with the Assessor of the parish indicated within forty-five days after receipt, in accordance with RS 47: 2324.

SELF REPORTING - PERSONAL PROPERTY REPORT

YEAR 2021

RETURN TO: **ORLEANS PARISH ASSESSOR**
 P.O. Box 53406
 New Orleans , LA 70153-3406

WARD _____ **BILL NO.** _____

LOCATION ADDRESS: 911/Physical Address
 (INDICATE ANY CHANGES)

NAME/ADDRESS (INDICATE ANY CHANGES)

LOCATION ZIP

OWNER/CONTACT PERSON:

CONTACT'S PHONE: _____ FAX: _____

E-MAIL:

TYPE OF BUSINESS:

SQUARE FOOTAGES OF BUILDINGS:

IMPORTANT!

- AN ITEMIZED SCHEDULE LISTING ALL ASSETS, INCLUDING FULLY DEPRECIATED ITEMS AND/OR EXPENSED ITEMS, SHALL ACCOMPANY THIS REPORT.
- FIRMS HAVING 10 YEAR EXEMPTION SHALL COMPLETE FORM LAT 5A AND ATTACH TO THIS FORM.

SHADED AREAS FOR ASSESSOR'S USE ONLY - USE ATTACHMENTS IF NECESSARY

SECTION 1 - INVENTORIES / MERCHANDISE AND COST OF GOODS USED

METHOD OF REPORTING: LIFO FIFO COST RETAIL OTHER (EXPLAIN) _____

	MERCHANDISE	RAW MATERIALS	WORK IN PROCESS	FINISHED GOODS	SUPPLIES AND/OR GOODS USED	TOTAL
JANUARY						
FEBRUARY						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUGUST						
SEPTEMBER						
OCTOBER						
NOVEMBER						
DECEMBER						

ASSESSED VALUE	GRAND TOTAL:	
	AVERAGE:	
	OVER	

SECTION 2 - FURNITURE AND FIXTURES (ATTACH ADDITIONAL SHEETS IF NEEDED)
 (GROUP BY YEAR OF ACQUISITION) (INCLUDING FULLY DEPRECIATED ASSETS)

YEAR OF ACQUISITION	ACQUISITION COST	EFF. AGE	TAB NO.	COST MULTI.	FAIR MARKET VALUE	YEAR OF ACQUISITION	ACQUISITION COST	EFF. AGE	TAB NO.	COST MULTI.	FAIR MARKET VALUE
						TOTAL FAIR MARKET VALUE					
						ASSESSED VALUE					

SECTION 3 - MACHINERY AND EQUIPMENT (ATTACH ADDITIONAL SHEETS IF NEEDED)
 (EXCLUDE LICENSED MOTOR VEHICLES) (GROUP BY YEAR OF ACQUISITION) (INCLUDING FULLY DEPRECIATED ASSETS)

YEAR OF ACQUISITION	ACQUISITION COST	EFF. AGE	TAB NO.	COST MULTI.	FAIR MARKET VALUE	YEAR OF ACQUISITION	ACQUISITION COST	EFF. AGE	TAB NO.	COST MULTI.	FAIR MARKET VALUE
						TOTAL FAIR MARKET VALUE					
						ASSESSED VALUE					

SECTION 4 - LEASEHOLD IMPROVEMENTS AND MISCELLANEOUS PROPERTY
 (ATTACH ADDITIONAL SHEETS IF NEEDED) (GROUP BY YEAR OF ACQUISITION) (INCLUDING FULLY DEPRECIATED ASSETS)

ITEM	YEAR OF ACQUISITION	ACQUISITION COST	EFFECTIVE AGE	TABLE	COST MULTI.	FAIR MARKET VALUE
						TOTAL FAIR MARKET VALUE
						ASSESSED VALUE

SECTION 5 - CONSIGNED GOODS, LEASED, LOANED OR RENTED EQUIPMENT, FURNITURE, ETC.
 ATTACH LIST SHOWING NAME, ADDRESS, TYPE AND AGE OF PROPERTY WITH MONTHLY RENTALS.

NOTE: PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL YOUR ASSESSMENT AND MAY INCLUDE A MONETARY PENALTY (RS 47:1992 & 2330) NEED ASSISTANCE? AFTER YOU REVIEW THE ENCLOSED TAX FORM AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR ASSESSOR LISTED ABOVE AT 504-658-1350. THANK YOU

SIGNATURE AND VERIFICATION

"I declare under the penalties for filing false reports (R.S. 14:125; up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 2330B of the 1989 Regular Session) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return." "If the return is prepared by someone other than the taxpayer, authorized officer, or partner, this form must be notarized."

SIGNATURE OF TAXPAYER _____ DATE _____ SIGNATURE OF TAX PREPARER _____ DATE _____

PRINTED/TYPED TAXPAYER NAME _____ PRINTED/TYPED TAX PREPARER NAME _____

LAT 5 NOTARY _____ DATE _____