

LAT 7 - CELLULAR INDUSTRY

PERSONAL PROPERTY TAX FORM

<p>CONFIDENTIAL: RS: 47:2327. Only the Assessor, the governing authority, and Louisiana Tax Commission shall use this form filled out by the taxpayer solely for the purpose of administering this statute.</p>	<p>LEGAL CITATION AND INSTRUCTIONS: This report shall be filed with the Assessor of the Parish indicated by April 1st or within forty-five days after receipt, whichever is later, in accordance with RS: 472324.</p>
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<p>PROPERTY LOCATION: <i>(E911/PHYSICAL ADDRESS)</i></p>	<p>WARD:</p>	<p>ASSESSMENT NUMBER:</p>
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<p>NAME/ADDRESS: <i>(INDICATE ANY CHANGES)</i></p>	<p>RETURN TO: Dr. Regina Webb Assessor For Caddo Parish 501 Texas St. Rm. 102 Shreveport, La. 71101-5411</p>
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<p>NAME OF BUSINESS:</p>	<p>TYPE OF BUSINESS:</p>
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<p>OWNER OR CONTACT:</p>	<p>CONTACT'S PHONE NO.:</p>
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IMPORTANT! * AN ITEMIZED DEPRECIATION SCHEDULE, LISTING ASSETS (INCLUDING FULLY DEPRECIATED ITEMS AND/OR EXPENSED ITEMS) SHALL ACCOMPANY THIS REPORT.
 * THIS FORM (LAT 7) MUST BE ACCOMPANIED BY A LAT 5.

USE ATTACHMENTS IF NECESSARY

SECTION 1 - OWNER INFORMATION

CELL TOWER OWNER:	
ADDRESS:	
TOWER LOCATION:	

NAME AND ADDRESS(ES) OF ALL COMPANIES LEASING SPACE ON TOWER

SECTION 2 - TOWER AND ANTENNA
(GROUP BY YEAR OF ACQUISITION)

YEAR OF ACQUISITION	ACQUISITION COST	DESCRIPTION	YEAR OF ACQUISITION	ACQUISITION COST	DESCRIPTION
			21 years or over.		
			TOTAL MARKET VALUE:		
			ASSESSED VALUE:		

SECTION 3 - ELECTRONICS, SOFTWARE, SWITCHING AND TRANSMISSION EQUIPMENT

(GROUP BY YEAR OF ACQUISITION)

YEAR OF ACQUISITION	ACQUISITION COST	DESCRIPTION	YEAR OF ACQUISITION	ACQUISITION COST	DESCRIPTION
			7 years or over.		
					TOTAL MARKET VALUE:
					ASSESSED VALUE:

SECTION 4 - LEASEHOLD IMPROVEMENTS AND MISC. PROPERTY

(GROUP BY YEAR OF ACQUISITION)

ITEM	YEAR OF ACQUISITION	ACQUISITION COST	AGE	TABLE NO.	COST MULT.	FAIR MARKET VALUE
						TOTAL FAIR MARKET VALUE:
						ASSESSED VALUE:

SECTION 5 - LEASED, LOANED OR RENTED EQUIPMENT, ETC. (IF NOT SHOWN IN SECTION 1)

(ATTACH LIST SHOWING NAME, ADDRESS, TYPE, AND AGE OF PROPERTY, MONTHLY RENTAL)

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 and 2330)	NEED ASSISTANCE? AFTER YOU REVIEW THE ENCLOSED TAX FORM AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR ASSESSOR LISTED ABOVE AT 318-226-6712. THANK YOU
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-----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 Section) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return."

SIGNATURE OF TAXPAYER

DATE

SIGNATURE OF PREPARER

DATE

PRINTED/TYPED NAME OF TAXPAYER

PRINTED/TYPED NAME OF PREPARER