

STATE OF FLORIDA COUNTY OF CITRUS 2025		CREGG E. DALTON, CFA CITRUS COUNTY PROPERTY APPRAISER 210 N APOPKA AVE SUITE 200 INVERNESS, FL 34450 PHONE NUMBER: (352) 341-6648		TANGIBLE PERSONAL PROPERTY TAX RETURN Confidential 193.074 FS. As Required by 193.052 & 193.062 FS. Return To Citrus County Property Appraiser By April 1 To Avoid Penalties	
BUSINESS NAME (DBA) AND MAILING ADDRESS:		FEDERAL EMPLOYER IDENTIFICATION NUMBER IF APPLICABLE		NAICS NUMBER	
AK #		CONFIDENTIAL			
				PHYSICAL LOCATION:	
PLEASE PRINT OR TYPE EXCEPT FOR SIGNATURE					
This return is subject to audit with all records kept by you. Incomplete entries are subject to penalties.					
1. Owner or person in charge.			6. Describe Type or Nature of Your Business:		
Corporate Name:			7. Trade Level: (Check as Many as Apply) <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Manufacturing		
Phone: Fax:			<input type="checkbox"/> Professional <input type="checkbox"/> Service <input type="checkbox"/> Agriculture <input type="checkbox"/> Leasing/Rental <input type="checkbox"/> Other		
2. Physical Location (no PO Boxes):			8. Did you file a TPP return in this county last year? <input type="checkbox"/> Yes <input type="checkbox"/> No		
3. City, if within incorporated limits			Under what name & where		
4. Do You File a TPP Tax Return Under Any Other Name? <input type="checkbox"/> Yes <input type="checkbox"/> No			9. Did your business close prior to Jan 1 of this year? When?		
Name on your most recent return			10. Did this business change owners prior to Jan 1 of this year? <input type="checkbox"/> Yes <input type="checkbox"/> No		
5. Date You Began Business In This County: Fiscal Year			(If answer is no, skip questions 11 and 12.)		
My Fiscal year ended before Dec 31 of last year, but <input type="checkbox"/> Yes <input type="checkbox"/> No			11. Current Owner of the Business:		
This return reflects additions and deletions through Dec 31.			12. Date Sold: Month Year Sale Price:\$		
SECTION #1 LEASED, LOANED, AND RENTED TANGIBLE ASSETS AT BUSINESS LOCATION JANUARY 1.					
COMPLETE IF YOU HOLD OR USE EQUIPMENT BELONGING TO OTHERS AT THIS LOCATION - EQUIPMENT NOT REPORTED IN SECTION 3					
NAME/ADDRESS OF OWNER/LESSOR	LEASE/CONTRACT NUMBER	DESCRIPTION	YEAR ACQUIRED	LEASE TERM	RENT PER MONTH
SECTION #2 EQUIPMENT OWNED BY YOU AT ANOTHER LOCATION JANUARY 1.					
COMPLETE IF YOU LEASE, LOAN, AND/OR RENT EQUIPMENT TO OTHERS AT ANOTHER LOCATION - EQUIPMENT NOT REPORTED IN SECTION 3					
COMPANY AND LOCATION OF EQUIPMENT	LEASE/CONTRACT NUMBER	DESCRIPTION	YEAR ACQUIRED	LEASE TERM	RENT PER MONTH
Under penalties of perjury, I declare that I have read this tax return and the accompanying schedules and statements and the facts in them are true. If prepared by someone other than the taxpayer, the preparer signing this return certifies that this declaration is based on all information he or she has knowledge of.				Attach separate sheets as necessary	
Signature Taxpayer				\$25,000 Exemption? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Penalty %	
				APPRaiser NOTES:	
Signature Preparer					
Preparer ID number				Date	
Address				Phone	
				Signature Deputy	
				Date	
CC-405 (Revised 10/2024)					

Any asset that has not been physically removed from the premises should not be deleted from the list. Social security numbers obtained for tax administration purposes are confidential under sections 119.071 and 192.0105, Florida Statutes, and not subject to disclosure as public records.

TANGIBLE PERSONAL PROPERTY ASSET LIST JANUARY 1.

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PROPERTY
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(A)VERAGE
(P)OOR

[illegible]