



INFORMATION RETURN OF NOT OWNED LOCALLY ASSESSED PERSONAL PROPERTY

State Form 46062 (R7 / 12-08)
Department of Local Government Finance

FORM 1-N

MARCH 1, 20 _____

For assessor's use only

PRIVACY NOTICE

The records in this series are confidential according to I.C. 6-1.1-35-9.

INSTRUCTIONS: Attach to and file with Form 1.

Name of person in possession of property <i>(please print or type)</i>	FEIN	County
Address <i>(number and street, city, state, and ZIP code)</i>		Taxing district

Report all locally assessed personal property held, possessed or controlled on March 1 of the current assessment year, in Schedule I or Schedule II.

SCHEDULE I - ASSESSED TO OWNER ON FORM 103

Information return of all personal property which was held, possessed or controlled by this taxpayer but owned and reported for assessment on Form 103 as of March 1 of the current assessment year by the OWNER.

NAME AND ADDRESS OF OWNER	LOCATION OF PROPERTY	DATE OF LEASE <i>(month, day, year)</i>	MODEL NUMBER AND DESCRIPTION	QUANTITY	COST IF KNOWN
Schedule I includes, but is not limited to, the reporting of:					TOTAL

Returnable Containers; Operating Leases; and all other property held, possessed or controlled by this taxpayer but owned by another person, except inventory.

Excluded from Schedule I is:

Personal property subject to Capital Lease - See Schedule II.

SIGNATURE AND VERIFICATION

Under the penalties of perjury, I hereby certify that this return *(including any accompanying sheets or statements)* to the best of my knowledge and belief, is true, correct and complete, and reports all fixed personal property owned, held, possessed or controlled by the named taxpayer within the stated township and county on the assessment date of this return.

Signature of authorized person	Title	Date signed <i>(month, day, year)</i>
Printed name	Signature of person preparing return based on all information of which he/she has any knowledge	
Telephone number ()	Email address	Fax number ()

