LAT 11 - WATERCRAFT								20	PER	SONAL PR	COPE	RIYIAX FORM			
RETURN TO:						NAME/ADDRESS: (INDICATE ANY CHANGES)									
CONFIDENTIAL RS: 47:2327. Only the Assessor, the governing authority, and Legal Citation & Instructions: This report shall be filed with										ort shall be filed with the					
			Commission												
	taxpayer so	purpose	tering this	after receipt, whichever is later, in accordance with RS 47:2324.											
statute.									ACCECCMENT						
PROPERTY LOCATION: (E911/PHYSICAL ADDRESS)								WARD: ASSESSMENT NUMBER:							
								TYPE OF BUSINESS:							
NAME OF BUSINESS:															
OWNER OR CONTACT:									PHONE NUMBER:						
LOCATION (IF DIFFERENT FROM MAILING ADDRESS):															
SHADED AREAS FOR ASSESSOR'S USE ONLY – USE ATTACHMENTS IF NECESSARY  SECTION 1 – VESSELS															
		ESSELS	<u> </u>												
VES		NAME OF VESSEL COST INC							GTH &	LOCATION (PARISH OR DOCKING POINT)					
REGIST			EQMT. &		ACQ	Ω. BUILT	F BREADTH		JANUARY 1		PREVIOUS YEAR				
NUM	IDEK			ACCS.						JANUARTI		PREVIOUS TEAR			
								Х							
								1 1	^						
DAVC	HORSE-	TYPE OF	HULL	NO OF	TVDE	IL	CELE	FFF	COCT	FAIR MARKET	/ALUE	ASSESSED VALUE			
DAYS WORKED	POWER	VESSEL	MATERIAL	NO. OF SCREWS	TYPE BAR		SELF PROPELLED	EFF.	COST MULT.		ALUE	ASSESSED VALUE			
PRIOR YR	TOWER	VESSEE	WATERIAL	JOKEWS	DAIN	OL	T KOT LLLLD	AGE	WIOL1.	_					
J							YES								
WORKED F	PER MON.:	JAN. F	EB. MAR	. APR	. 1	VAN	JUN.	JUL.	AUG.	SEPT. OC	T. N	NOV. DEC.			
VES	SEL	NAME O	F VESSEL			YEAI	R YEAR	LENC	GTH &		LOC	ATION			
REGIST	RATION			EQMT. & ACC			Ω. BUILT	BRE	ADTH	(PARISH OR DOCKING POINT)					
NUM	BER		ACCS						JANUARY 1		PREVIOUS YEAR				
								2	X						
DAVC	HODGE	TVDE OF	1	NO OF	TVDE	· ir l	CELE	FFF	1200	FAID MADKET	/ALUE	ACCECCED VALUE			
DAYS WORKED	HORSE- POWER	TYPE OF VESSEL	HULL MATERIAL	NO. OF SCREWS	TYPE BAR		SELF PROPELLED	EFF. AGE	COST MULT.	FAIR MARKET	ALUE	ASSESSED VALUE			
PRIOR YR	TOWER	VESSEE	WATERIAL	JOKEWS	DAIN	OL	T KOT LLLLD	AGE	WIGET.						
							YES			_					
WORKED F	PER MON.:	JAN. F	EB. MAR	. APR	. 1	VAN	JUN.	JUL.	AUG.	SEPT. OC	T. N	NOV. DEC.			
VESSEL NAME OF VESSEL							R YEAR	LENC	GTH &	LOCATION					
REGISTRATION			EQMT. & ACQ.			Ω. BUILT	LT BREADTH				DOCKING POINT)				
NUMBER				ACCS						JANUARY 1		PREVIOUS YEAR			
									.						
								Х							
DAVC	HODGE	TVDE OF	1	NO OF	TVDE	· ir l	CELE	FFF	1200	FAID MADKET	/ALUE	ACCECCED VALUE			
DAYS WORKED	HORSE- POWER	TYPE OF VESSEL	HULL MATERIAL	NO. OF SCREWS	TYPE BAR		SELF PROPELLED	EFF. AGE	COST MULT.	FAIR MARKET	ALUE	ASSESSED VALUE			
PRIOR YR	TOWER	VESSEE	WATERIAL	JOKEWS	DAIN	OL	T KOT LLLLD	AGE	WIGET.						
							YES		1						
WORKED F	PER MON.:	JAN. F	EB. MAR	. APR	. 1	VAN	JUN.	JUL.	AUG.	SEPT. OC	T. N	NOV. DEC.			

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SECTION 1 – VESSELS													
VESSEL		NAME OF	COST INCL. EQMT. & ACCS.		YEAF		LENGTH & BREADTH		LOCATION (PARISH OR DOCKING POINT)				
REGISTRATION NUMBER					ACQ	. BUILT			JANUARY 1		PREVIOUS YEAR		
								X					
DAYS WORKED PRIOR YR	HORSE- POWER	TYPE OF VESSEL	HULL MATERIAL	NO. OF SCREWS	TYPI		SELF PROPELLED	EFF. AGE	COST MULT.		ARKET VALUE	ASSESSED VALUE	
							YES						
WORKED F		-	B. MAR			MAY		JUL.	AUG.	SEPT.		NOV. DEC.	
VES REGIST		NAME OF VESSEL				YEAF						CATION DOCKING POINT)	
NUM				ACCS.		ACC	. DOIL1	DICEADILL		JAN	UARY 1	PREVIOUS YEAR	
								)	K				
DAYS WORKED PRIOR YR	HORSE- POWER	TYPE OF VESSEL	HULL MATERIAL	NO. OF SCREWS	TYPI		SELF PROPELLED	EFF. AGE	COST MULT.		ARKET VALUE	ASSESSED VALUE	
							YES						
WORKED F	PER MON.:	JAN. FI	EB. MAF	R. APR.		MAY	JUN. 、	JUL.	AUG.	SEPT.	OCT.	NOV. DEC.	
SECTIO	N 2 - C	ONSIGNE	D GOODS	S, LEASE	ED, I	LOAN	IED, OR R	ENTE			r, FURNITU	JRE, ETC.	
	NAME AND	ADDRESS	PROPERTY DESC					MONTI RENT			FAIR MARKET VALUE		
					I TOTAL I	FAIR MAR	KET VALUE:						
								ASSESSED VALUE:					
R	TE: 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 FOR AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOU ASSESSOR LISTED ABOVE AT . THANK YOU										CE PLEASE CALL YOUR		
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						S	SIGNATURE OF PREPARER DATE						
PRINTED/TYPED NAME OF TAXPAYER						P	PRINTED/TYPED	NAME OF	PREPAR	ER			

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