



JEFFREY T. RICHARDSON
COMMISSIONER OF THE REVENUE
COUNTY OF SMYTH
PO BOX 985 or 109 W MAIN ST STE G011
MARION VA 24354
 PHONE (276) 782-4040 FAX (276) 782-4041
 E-MAIL: COR@SMYTHCOUNTY.ORG

762 B - RETURN OF BUSINESS TANGIBLE
 PERSONAL PROPERTY
 & MERCHANTS CAPITAL
 (This form replaces Dept. of Taxation Form 762)
 Use for reporting tangible property in business
 including rental property.

Due Date:

Business Name:	FEDERAL ID or SSN (required)
Contact Name:	Email Address:
Business Mailing Address:	Physical Location:

I TANGIBLE PERSONAL PROPERTY		OFFICE USE ONLY
ENTER ORIGINAL CAPITALIZED COST BEFORE DEPRECIATION, DISCOUNTS, ETC.	(Including furniture, fixtures, books, office & business machines, copiers, tools used in any business) Do Not include Computer Equipment.	
Cost of Property Purchased in and PRIOR Years		20%
Cost of Property Purchased in		30%
Cost of Property Purchased in		40%
Cost of Property Purchased in		50%
Cost of Property Purchased in		60%
Cost of Property Purchased in		70%
Cost of Property Purchased in		80%
Cost of Property Purchased in		90%
TOTAL		

II COMPUTER EQUIPMENT		OFFICE USE ONLY
ENTER ORIGINAL CAPITALIZED COST BEFORE DEPRECIATION, DISCOUNTS, ETC.	COMPUTER EQUIPMENT	(Do not write in this column)
Cost of Property Purchased in and PRIOR Years		20%
Cost of Property Purchased in		40%
Cost of Property Purchased in		60%
Cost of Property Purchased in		80%
TOTAL		

Important Notice:
 §58.1-3103 requires assessment of all business personal property. Attach a list with year purchased & ORIGINAL cost of all equipment used by the business, excluding idle equipment reported previously to Commissioner of the Revenue per §58.1-3507(D). The owner is responsible for providing all 762 information. Written proof of third party authorization required with annual report.

RETURN TO:
 Commissioner of the Revenue
 County of Smyth
 PO Box 985
 Marion VA 24354-0985
 or
 E-mail: COR@SMYTHCOUNTY.ORG
 or Fax: (276) 782-4041

III MERCHANTS CAPITAL	(to be reported if taxpayer is a merchant)	
	Cost as listed by Taxpayer	OFFICE USE ONLY
1. Inventory as of Jan. 1st		
2. Daily Rental Passenger Cars		
3. Daily Rental Equipment		
TOTAL		

IV TANGIBLE PERSONAL PROPERTY LEASED OR RENTED FROM OTHERS			
Must be listed as required by Section 58.1-3518 Code of Virginia. List below all tangible personal property and machinery & tools (except motor vehicles) leased or rented from others. Attach additional sheet if necessary.			
Name of Owner	Address & Phone Number of Owner	Description of Equipment	Cost Value

V ALL VEHICLES/ TRAILERS/ MOBILE HOMES/ BOATS/ AIRPLANES/ HEAVY EQUIPMENT				
Attach additional sheet if necessary.				
Purchase Date	Year	Make	Model	Identification Number

INSTRUCTIONS 762 B

- REPORT ON THIS RETURN the tangible personal/business property owned by the taxpayer on January 1, SIGNS and BILLBOARDS shall be declared as tangible personal property. No property is assessable as tangible personal property if defined by 58.1-100 as intangible personal property.
- REPORTING LEASED PROPERTY: Lessors and lessees are BOTH required to report leased property located in Smyth County. (Virginia Code 58.1-3518). Lessors (owners) are usually responsible for paying taxes on leased property. However, Lessees should report also to verify information.
- COST VALUES TO REPORT: Values to be reported are the actual, invoice cost of furniture, fixtures and computers before the allowance for depreciation. **Cost of items FULLY depreciated, but still in use, MUST be reported for taxation.**
- REQUIRED to include an **ITEMIZED LIST** of tangible Personal Property (excluding vehicles) located in Smyth County, including type of equipment the year acquired and original cost. **The Code of Virginia requires all equipment used in the line of business to be assessed.** If amounts reported vary greatly from a prior year's amount, please provide an explanation of the difference.
- Please attach copies of detailed worksheet with report. Provide electronic copies of spreadsheets (ie Excel) upon request.

FAILURE TO FURNISH COMPLETE AND SIGNED INFORMATION BY DUE DATE WILL RESULT IN A 10% PENALTY AND MANDATORY STATUTORY ASSESSMENT .

If Business has **closed** or **moved** out of Smyth County, provide:

Date Business Closed: _____ or

Date Business Moved out of Smyth County: _____ New Location: _____

DECLARATION BY TAXPAYER: I declare that the foregoing statements are true, full and correct to the best of my knowledge and belief.

Signature of Taxpayer: _____ Date: _____

Clearly Print Signer's Name: _____ Title: _____

Business Phone: _____ Personal Phone: _____