Reset Form

CLAIM FOR EXEMPTION OF ENTERPRISE INFORMATION TECHNOLOGY EQUIPMENT

State Form 54182 (R2 / 11-16)

Prescribed by Department of Local Government Finance

FORM 103-IT

PRIVACY NOTICE
This form contains information confidential pursuant to IC 6-1.1-35-9.

JANUARY 1, 20 _____

For Assessor's use only

INSTRUCTIONS:

1. *In order to qualify for this exemption, entities must meet the requirements of IC 6-1.1-10-44.*
2. *Qualifying equipment is defined in IC 6-1.1-10-44(c) and does not include computer hardware designed for single user, workstation, or department level use.*
3. *Entities should attach this form to the Form 103-Long and file it with the proper assessing official by May 15 or the extended due date.*

SECTION 1 — TAXPAYER INFORMATION

Name of taxpayer	
Address of taxpayer *(number and street, city, state, and ZIP code)*	
Name of contact person	Telephone number ( )

SECTION 2 — LOCATION AND DESCRIPTION OF PROPERTY

Name of designating body		Resolution number
Location of property *(number and street, city, state, and ZIP code)*	County	DLGF taxing district number

Date of Acquisition *(month, day, year)*	Tax Life	General Description of Qualifying Equipment	Cost
		TOTAL COST AS SHOWN ON LINE 6, SCHEDULE A, FORM 103	**$**

Under the penalties of perjury, I hereby certify that this return to the best of my knowledge and belief, is true, correct and complete; and reports the total cost of all personal property claimed by the taxpayer to be exempt from assessment and taxation pursuant to IC 6-1.1-10-44.

Signature of authorized person	Title	Date *(month, day, year)*
Signature of person preparing return based on all information of which he/she has any knowledge		