TAZEWELL COUNTY, VIRGINIA
David R. Anderson, Commissioner of the Revenue
101 E. Main Street, Suite 201, Tazewell VA 24651
Phone: 276-385-1235 *Fax:* 276-988-5221

REQUEST FOR EXTENSION FOR FILING
BUSINESS TANGIBLE PERSONAL PROPERTY TAX RETURN

(Complete a separate form for each Business / FEID #)

The undersigned owner or authorized corporate representative is hereby making a request for a 30-day extension of the May 15th filing deadline on behalf of the business listed below with regard to the filing of its:

- ☐ **Return of Tangible Personal Property – Business Equipment (Schedule 1)**
- ☐ **Return of Tangible Personal Property – Manufacturers / Machinery & Tools (Schedule 2)**
- ☐ **Return of Tangible Personal Property – Merchants Capital (Schedule 4)**

Filing Year:		**FEID/SS #:**	
Requestor (Business) Name:			
Trade Name (if applicable):			
Mailing Address:			
Business (Physical) Address:			
Business Phone:		**Fax #:**	
Contact Person:			
Contact Person's Address:	☐ **Same as mailing address above** ☐ **Same as physical address above** ☐ **Other:** _____		
Contact Phone No.:		**Email Address:**	
Extension Request Date:			

Preferred Method for COR to Respond: ☐ **Email** ☐ **Fax** ☐ **First-Class Mail** ☐ **Other:** _____

SIGNATURE & INFORMATION

The owner must sign this form. If the business is an entity such as a trust, partnership, limited liability company, or corporation, it must be signed by a member, partner, executive officer, or other person specifically authorized in writing by the trust, partnership, limited liability company, or corporation to sign.

DECLARATION: *I declare, under penalty of perjury: (1) that the foregoing information is complete, true and correct to the best of my knowledge and belief, and (2) that I am the owner or a member, partner, executive officer, or other person specifically authorized in writing to sign.*

_____	_____	_____	_____
Authorized Signature	**Print Name**	**Print Title/Signing Capacity**	**Date**

If Authorized Signatory is NOT the same as the Contact Person listed above, provide the following information:

Signatory's Phone No.:		**Email Address:**	
Mailing Address:			

Completed, signed form can be faxed to 276-988-5221, emailed to rrichardson@tazewellcounty.org, cestep@tazewellcounty.org, or mailed to the address listed above.

[Rev. 01/2016]