Department of Economic and Community Development

Connecticut

FORM M-47 DECLARATION OF MACHINERY AND EQUIPMENT Page 1 of ___

MACHINERY & EQUIPMENT THAT ARE ELIGIBLE FOR EXEMPTION UNDER C.G.S. SEC. 12-81(60)

WILL BE ELIGIBLE FOR UP TO 80% EXEMPTION FOR LOCAL PROPERTY TAX PURPOSES. UNDER THE TERMS OF THIS EXEMPTION, SUCH EQUIPMENT WILL NOT BE ELIGIBLE FOR EXEMPTION UNDER ANY OTHER PROGRAM.

Town / City: _____

Owner of Machinery and Equipment: _____

Owner's Address: _____

Itemized Listing of Manufacturing Machinery and Equipment

- Print or type only. You may submit a computer printout containing all required Information In the prescribed format.
- List only manufacturing machinery and equipment.
- Do Not Include Sales Tax.
- All monetary amounts should be rounded to the nearest whole dollar.
- Lessees are to provide only their transportation and installation costs (purchase price will be obtained from lessor).
- For leased property, enter Lease ID # beneath the name and address of the lessor.
- **Provide IRS Class Life

- Total cost of acquisition is the price paid for the property, including the value of a 'trade-in', plus the cost of transportation and installation. (If installation required real property structural changes, the cost of such changes cannot be included.)
- The purchase price for self-constructed machinery and equipment is the unit cost.
- Date installed for leased property is the beginning date of the lease.

Inaccurate information may affect qualification for exemption.

The information requested on this form is essential to the applicant for machinery and equipment qualifying for exemption. Description and purpose/function of machinery and equipment must be complete and readily identifiable. Property described as "miscellaneous", "manufacturing machinery or equipment", or numeric entries are not acceptable.

Property Description, Model ID #	Purpose / Function of Equipment	Quantity	Date Acquired MM/DD/YY	Date Installed Acquired MM/DD/YY	IRS* Classification	Purchase Price	Transportation/ Installation Cost	Total Cost of Acquisition
Please see attached pages.								
						Page Totals		
						Grand Totals		

THIS FORM MUST BE NOTARIZED

I do hereby declare under penalty of false statement that the foregoing statement is, according to the best of my knowledge, remembrance and belief, true of all my property that is subject to the provisions of Sec. 12-81(60) of the Connecticut General Statutes.

_____ _____

Signature of Facility Owner, or Authorized Agent *Date signed*

Subscribed and sworn to before me on this _____ day of _____, 20_____

_____

Signature and Print Name, Title (Assessor, Town Clerk, Justice of the Peace, Notary Public, or Comm. of Superior Court)

APPROVED AND CERTIFIED BY THE DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT BY:

GRAND LIST OF 20___ -

_____

CT DECD EZ Program Manager

CERTIFICATE # _____

CT DECD Form M-47 attachment

Itemized Listing of Manufacturing Machinery and Equipment

Page _____ of _____

INSTRUCTIONS:

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- For leased property, enter Lease ID # beneath the name and address of the lessor.

TERMS:

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Property Description, Model ID #	Purpose/Function of Equipment	Quantity	Date Acquired Mo./Day/Yr.	Date Installed Mo./Day/Yr.	IRS Class Life**	Purchase Price	Transportation/ Installation Cost	Total Cost of Acquisition

Property shall be treated as **5 Year property if it has a class life (in years) of **more than 4, but less than 10.**

Property shall be treated as **7 Year property if it has a class life (in years) of **more than 10, but less than 16.**

Subtotal this page	
Grant total OR go to next page	

Please place an "X" here if there are additional pages of machinery and equipment: _____ Date completed: _____

CT DECD Form M-47 attachment

Itemized Listing of Manufacturing Machinery and Equipment

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Subtotal this page	
Subtotal prior pages	
Grant Total	

Please place an "X" here if there are additional pages of machinery and equipment: _____ Date completed: _____