

**State of Oklahoma  
ASSET LISTING (GROUPED)**



**Taxpayers filing in \_\_\_\_\_ County:** Must complete this schedule listing like or similar items grouped by description, year of acquisition, original cost and class. This schedule to be filed with completed OTC Form 901 rendition.

Name of Business: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Personal Property Account Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

REPORT ONLY TANGIBLE ASSETS					<i>Assessors Use Only</i>			
Item Number	Description	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
	<b>Leasehold Improvements</b>							
	<b>TOTAL</b>							
	<b>Furniture and Fixtures</b>							
	<b>TOTAL</b>							
	<b>Electronic Equipment</b>							
	<b>TOTAL</b>							
	<b>Computer Equipment</b>							
	<b>TOTAL</b>							
	<b>Machinery and Equipment</b>							
	<b>TOTAL</b>							



REPORT ONLY TANGIBLE ASSETS					Assessors Use Only			
Item Number	Description	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
	<b>Fork Lifts and Construction Equipment</b>							
		<b>TOTAL</b>					<b>TOTAL</b>	
Item Number	Tools, Dies, Molds	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
		<b>TOTAL</b>					<b>TOTAL</b>	
Item Number	Trade Tools and Equipment	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
		<b>TOTAL</b>					<b>TOTAL</b>	
Item Number	Leased From Others	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
		<b>TOTAL</b>					<b>TOTAL</b>	
Item Number	Leased To Others	Year Acquired		Original Cost	Life Years	% Good	Factor	RCNLD
		New	Used					
		<b>TOTAL</b>					<b>TOTAL</b>	
<b>TOTAL</b>					<b>TOTAL</b>			