Parish of Lafayette

Assessor's Office

Post Office Box 3225 Lafayette, LA 70502-3225

> Phone: 337-291-7080 Fax: 337-291-7085 Website: www.lafayetteassessor.com E-mail: personalprop@lafayetteassessor.com

LAT 11 WATERCRAFT SELF REPORTING - PERSONAL PROPERTY FORM

2025

IMPORTANT TAX FORMS ARE ENCLOSED



IMPORTANT PROPERTY TAX SELF REPORTING FORMS ENCLOSED

NOTE: PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL YOUR ASSESSMENT AND MAY INCLUDE A MONETARY PENALTY (RS 47:1992 & 2330)

Need Assistance?

AFTER YOU REVIEW THE ENCLOSED TAX FORMS AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR ASSESSOR LISTED ABOVE. THANK YOU.

LAFAYETTE PARISH ASSESSOR

P.O. BOX 3225 LAFAYETTE, LA 70502-3225 TELEPHONE 337-291-7080 FAX 337-291-7085 FAILURE TO COMPLETE AND RETURN THIS FORM WILL RESULT IN AN INCREASED ASSESSMENT OF YOUR ASSETS AND THEREFORE INCREASED TAXES.

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CONFIDENTIAL: PS 472327: Only the Assessor, the governing authority and Lossiana Ta Control progression and use this form filled out by the tappage solution in the parties indicated by April 1st or within parties indicated by April 1st or within the 347: 2324. Legal Clataton & A Instructions: This report shaded by April 1st or within the 347: 2324. Legal Clataton & A Instructions: This report shaded by April 1st or within the 347: 2324. Legal Clataton & A Instructions: This report shaded by April 1st or within the 347: 2324. Legal Clataton & A Instructions: This report shaded by April 1st or within the 347: 2324. Legal Clataton & A Instructions: This report shaded by April 1st or within the 347: 2324. Location ADDRESS (INDICATE ANY CHANGES) Location ADDRESS: (INDICATE ANY CHANGES) Location ZIP Comparison and the parties indicated by April 1st or within the 347: 2324. Location ZIP Comparison and the parties indicated by April 1st or within the 347: 2324. Location ADDRESS: (INDICATE ANY CHANGES) Location ZIP Comparison and the parties indicated by April 1st or within the 347: 2324. Location ZIP Comparison April 1st or Withing 247: 2324. Location ZIP Comparison April 1st or ZIP Co	LAT 11	LAT 11 – WATERCRAFT 2025 PERSONAL PROPERTY TAX FORM													
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NOTE:PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL YOUR ASSESSMENT AND MAY INCLUDE WAIVER OF MONETARY PENALTY (RS 47:1992 & 2330)NEED ASSISTANCE? AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR ASSESSOR LISTED ABOVE. THANK YOU.								
SIGNATURE AND VERIFICATION								
I declare under the penalties for filing false reports (R.S. 14:125; up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 2330B of the 1989 Regular Session) that this return has been examined by me and to best of my knowledge and belief is a true, correct and complete return. This return must be signed by the taxpayer, authorized officer or partner and by the preparer.								

SIGNATURE OF TAXPAYER

DATE

SIGNATURE OF TAX PREPARER

DATE

PRINTED/TYPED I	NAME OF	TAXPAYER