FREDERICK COUNTY, VIRGINIA
ELLEN E. MURPHY, COMMISSIONER OF THE REVENUE

107 North Kent Street, Winchester VA 22601 • PO Box 552, Winchester VA 22604-0552

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MANUFACTURER DECLARATION OF IDLE MACHINERY AND TOOLS

Reporting for idle equipment must comply with Section 58.1-3507(D) of the Code of Virginia, which states:

"Idle machinery and tools" means machinery and tools that (i) (a) have been discontinued in use continuously for at least one year prior to any tax day or (b) on and after January 1, 2007, have been specifically identified in writing by the taxpayer to the commissioner of the revenue or other assessing official, on or before April 1 of such year, as machinery and tools that the taxpayer intends to withdraw from service not later than the next succeeding tax day and (ii) are not in use on the tax day and no reasonable prospect exists that such machinery and tools will be returned to use during the tax year.

MANUFACTURER INFORMATION					
Business Name:		**Trade Name or DBA:**			
Mailing Address:		**Physical Address:**			
Business Phone:		**Fax:**		**Federal Tax No. (EIN):**	
Contact Person:		**Contact Phone:**		**Email Address:**	

IDLE MACHINERY & TOOLS INFORMATION

Date Removed From Use	Date Returned To Use (If Applicable)	Asset Identification No.	Item Description	Item Location (Street Address)	Item Location (City, State)	Year Purchased	Original Cost

CERTIFICATION

The owner must sign and date 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. ***This information is being disclosed in accordance with the Code of Virginia § 58.1-3111.***

Declaration: *I hereby declare, under penalty of perjury, that the statements made herein and any documentation or information attached hereto are true, complete, and correct to the best of my knowledge and belief, and that I am the owner or a member, partner, executive officer, or other person specifically authorized in writing to sign.*

_____	_____	_____	_____
Signature	*Print Name*	*Title/Capacity for Signing (e.g., Owner, V.P. etc.)*	*Date*

_____	_____
Daytime Telephone No.	*Email Address*

[Rev. 12/2015]