

2020

SUPPLEMENTAL SCHEDULE TO FORM 571-L FOR HOTELS AND MOTELS

2020

NAME ROUTE SITUS COMPANY NO.

LOCATION OF PROPERTY GENERAL INFORMATION (Complete this Section)

COST DETAIL: EQUIPMENT Include equipment expensed and fully depreciated items. TYPE OF FACILITY (Check One): NO. OF ROOMS: RESTAURANT: BAR: BANQUET ROOM:

Table with columns: LINE NO., CALENDAR YEAR OF ACQUISITION, HOTEL FURNISHINGS AND TELEPHONE SYSTEM, OFFICE FURNITURE AND EQUIPMENT, SIGNS, RESTAURANT, KITCHEN AND LAUNDRY EQUIPMENT, TELEVISIONS. Rows 1-19.

Table with columns: LINE NO., CALENDAR YEAR OF ACQUISITION, COMPUTERS, RESERVATION SYSTEM, ETC., CARPETS, DRAPES, OTHER SUPPLIES, RESTAURANT, KITCHEN AND BAR SUPPLIES, BEDDING, UNIFORMS, LINEN (OWNED), ETC. Rows 20-31.

32 Add totals on lines 19 and 31 (not line 44). Enter here and on line 6, Part II, page (P1) of Form 571-L.

TAXPAYER'S REMARKS ASSESSOR'S USE ONLY



INSTRUCTIONS

PLEASE READ ALL INSTRUCTIONS ACCOMPANYING FORM 571-L PRIOR TO COMPLETING THIS SUPPLEMENTAL SCHEDULE

GENERAL INFORMATION

This supplemental schedule for Hotels and Motels replaces the original Schedule A on the preprinted Business Property Statement, Form 571-L. Use this schedule, designed for your specific business, to report your "Cost of Equipment" by year of acquisition. DO NOT use Schedule A on the preprinted Form 571-L.

REPORT ALL EQUIPMENT OWNED BY YOU ON THIS SUPPLEMENTAL SCHEDULE. REPORT ALL BUILDING OR LEASEHOLD IMPROVEMENTS ON SCHEDULE B, PAGE (P2) OF FORM 571-L.

Attach this supplemental schedule to your corresponding Form 571-L. Other schedules may be submitted and attached to Form 571-L to report additional information, which will assist the Assessor in determining the fair market value.

If additional information is needed, please contact the Assessor's office cited on the face of your Form 571-L.

NAME

Enter the name of assessee as shown on the front of the preprinted Form 571-L.

LOCATION OF PROPERTY

Enter the location of property as shown on the front of the preprinted Form 571-L. If no location is shown, enter the correct street address, city, and ZIP code where your property is located.

COST DETAIL: EQUIPMENT

LINES 1-18 and 20-30

Enter in the appropriate column the cost of your equipment segregated by calendar year of acquisition. Report full cost; do not deduct investment credits, trade-in allowances or depreciation. Include equipment acquired through a lease-purchase agreement at the selling price effective at the inception of the lease and report the year of the lease as the year of acquisition. (If final payment has **not** been made, report such equipment in Part III, page (P1) of Form 571-L.) Exclude the cost of equipment actually removed from the site. The cost of equipment retired, but not removed from the site, must be reported. Total each column.

LINE 32

Enter the total of all columns from lines 19 and 31 (not line 44). Enter the same total on line 6, Part II, page (P1) of the preprinted Form 571-L.

OTHER SUPPLIES

LINES 33-43

Report "OTHER SUPPLIES" in the columns provided, including the original purchase or setup cost. Enter the totals onto lines 7 and 8, Part II, page (P1) of the preprinted Form 571-L. Do not duplicate the reporting of "OTHER SUPPLIES" with that shown on line 1, Part II, page (P1).

If supplies are directly expensed, indicate the amounts for the previous 5 years on a separate attachment.