

CONFIDENTIAL: RS 47:2327. Forms filed by a taxpayer shall be used by the assessor, the governing authority, and Louisiana Tax Commission solely for the purpose of administering this statute.

Legal Citation & Instructions: This report shall be filed with the assessor of the parish indicated by April 1st or within forty-five days after receipt, whichever is later, in accordance with RS 47:2324.

LAT 1 REAL PROPERTY TAX REPORT – RESIDENTIAL OR HOMEOWNER’S YEAR 2020

RETURN TO:	WARD	ASSESSMENT NO.
	Parcel Num	
NAME/ADDRESS (INDICATE ANY CHANGES)		Street Address of Property
Owner Name:		Legal Description
Address:		
City:	State	Zip

SECTION 1. LAND DATA (COMPLETE APPROPRIATE PART)

PART 1. LOT DATA	PART 2. ACREAGE DATA
DIMENSIONS: FRONT _____ x _____ x _____	TOTAL NUMBER OF ACRES _____ CONSISTING OF:
COST IF PURCHASED AS VACANT LAND: \$ _____	_____ CLEARED _____ TIMBER _____ MARSH _____ MISC.
DATE OF PURCHASE: _____ ZONING: _____	COST IF PURCHASED AS VACANT LAND: \$ _____
☐ OPEN DITCH	DATE OF PURCHASE: _____
☐ SIDEWALK, CURB, GUTTER	BOUNDARIES: NORTH _____ SOUTH _____
☐ CURB, GUTTER	EAST _____ WEST _____
	"LAND USE VALUE" APPLIED FOR: ☐ YES ☐ NO

SECTION 2. IMPROVEMENT DATA (IF MORE THAN ONE BUILDING – USE ADDITIONAL FORM)

LIVING AREA _____ SQ. FT. CEILING INSULATION: ☐ YES ☐ NO AGE: _____ YRS DATE OF ACQUISITION: _____

TOTAL COST: \$ _____ ☐ BUILDING ONLY ☐ BUILDING & LAND NO. BATHS: FULL _____ HALF _____ ROUGH-INS _____

NUMBER OF BEDROOMS: _____ OTHER ROOMS: ☐ KITCHEN ☐ STUDY ☐ DEN ☐ LIVING RM. ☐ DINING RM. ☐ UTILITY ☐ OTHER

GARAGE _____ SQ. FT. ☐ FINISHED ☐ UNFINISHED ☐ ATTACHED TO HOUSE ☐ DETACHED FROM HOUSE ☐ 1 CAR ☐ 2 CAR ☐ 3 CAR

CARPORT _____ SQ. FT. ☐ 1 CAR ☐ 2 CAR ☐ 3 CARS OR MORE

PORCHES: NO. 1 SQ. FT. _____ ☐ COVERED ☐ UNCOVERED ☐ FINISHED CEILING ☐ UNFINISHED CEILING

NO. 2 SQ. FT. _____ ☐ COVERED ☐ UNCOVERED ☐ FINISHED CEILING ☐ UNFINISHED CEILING

PATIO: NO. 1 SQ. FT. _____ ☐ COVERED ☐ UNCOVERED ☐ FINISHED CEILING ☐ UNFINISHED CEILING

NO. 2 SQ. FT. _____ ☐ COVERED ☐ UNCOVERED ☐ FINISHED CEILING ☐ UNFINISHED CEILING

BUILT IN APPLIANCES: ☐ OVEN RANGE ☐ DISHWASHER ☐ DISPOSAL ☐ REFRIGERATOR ☐ RANGE HOOD & FAN

☐ KITCHEN OR BATH EXHAUST FAN ☐ TRASH COMPACTOR ☐ MICROWAVE OVEN

AMOUNT OF INSURANCE: \$ _____ IF RENTED, WHAT IS RENT \$ _____ MONTH / YEAR

ARE THERE ANY FACTORS THAT MAY INCREASE OR DECREASE THE VALUE OF THIS PROPERTY? _____

IS THIS IMPROVEMENT A MOBILE HOME? ☐ YES ☐ NO

IF YES: MAKE _____ MODEL _____ COLOR _____ SERIAL NUMBER _____

BUILDING DATA					
TYPE ☐ SINGLE FAMILY ☐ TOWN HOUSE ☐ MOBILE HOME ☐ OUT BUILDING ☐ DOUBLE ☐ TRIPLE ☐ FOURPLEX	CONDITION ☐ POOR ☐ FAIR ☐ AVERAGE ☐ GOOD ☐ VERY GOOD	STORIES ☐ 1 ☐ 2 ☐ 1 ½ FINISHED ☐ 1 ½ UNFINISHED ☐ END ROW ☐ INSIDE ROW ☐ BASEMENT	QUALITY ☐ LOW ☐ FAIR ☐ AVERAGE ☐ GOOD ☐ VERY GOOD	EXTERIOR SIDING ☐ STUCCO ☐ ASBESTOS/ALUMINUM ☐ MASONRY VENEER ☐ COMMON BRICK ☐ FACE BRICK OR STONE ☐ CONCRETE BLOCK ☐ CEDAR ☐ WOOD	FOUNDATION ☐ PIERS ☐ CONTINUOUS PIER ☐ SLAB ☐ _____
ROOFING ☐ COMPOSITION ☐ WOOD SHINGLE ☐ MFG. STEEL ☐ BUILD UP TAR & GRAVEL ☐ SLATE OR TILE ☐ TIN ☐ _____	HEATING & COOLING ☐ FORCED AIR – WINDOW UNITS ☐ SPACE ☐ FLOOR OR WALL FURNACE ☐ CENTRAL AIR ☐ HEAT PUMP ☐ SOLAR ☐ _____	FLOOR COVERING ☐ CARPET _____ % ☐ CERAMIC TILE / HARDWOOD _____ % ☐ LINOLEUM _____ % ☐ STONE _____ % ☐ OTHER _____ %	FIRE PLACES NO. ____ 1 STORY SINGLE ____ 2 STORY SINGLE ____ 1 STORY DBL. ____ 2 STORY DBL.	EXTRA FEATURES ☐ SWIMMING POOL ☐ TENNIS COURT ☐ ELEVATOR ☐ GREEN HOUSE ☐ LAWN SPRINKLER ☐ BOAT HOUSE ☐ PIER ☐ SMOKE ALARM ☐ RADIO/INTERCOM ☐ _____	SITE DATA ☐ CONCRETE ST. ☐ BLACK TOP ST. ☐ SHELL/GRAV. ☐ ELECTRICITY ☐ PUBLIC WATER ☐ GAS ☐ PUBLIC SEWER ☐ SEPTIC TANK ☐ WATER WELL ☐ _____

ATTACH RECENT PHOTOGRAPH OF BUILDING
ADDITIONAL LIVEABLE IMPROVEMENTS – EXPLAIN

SIGNATURE AND VERIFICATION

I declare that under the penalties for filing false reports that this return has been examined by me to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Signature of Taxpayer

Date

Email Address

Phone #