

# 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](http://www.lafayetteassessor.com)

E-mail: [personalprop@lafayetteassessor.com](mailto:personalprop@lafayetteassessor.com)

LAT 8 - CABLE TV INDUSTRY  
SELF REPORTING - PERSONAL PROPERTY FORM

# 2010

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.**

**LAT 8**

**LAT 8 – CABLE TV INDUSTRY**

**2010 PERSONAL PROPERTY TAX FORM**

**CONFIDENTIAL:** RS 47:2327: Forms filed by a taxpayer shall be used by 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.

RETURN TO: ASSESSOR, LAFAYETTE PARISH  
P.O. BOX 3225  
LAFAYETTE, LA 70502-3225  
NAME/ADDRESS (INDICATE ANY CHANGES)

WARD \_\_\_\_\_ ASSESSMENT NO. \_\_\_\_\_  
LOCATION ADDRESS: (INDICATE ANY CHANGES)

**LOCATION ZIP**

OWNER/CONTACT PERSON:

CONTACT'S PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL:

BUSINESS TAX ID#:

TYPE OF BUSINESS:

SQUARE FOOTAGES OF BUILDINGS:

**IMPORTANT!** • AN ITEMIZED DEPRECIATION SCHEDULE, LISTING ASSETS (INCLUDING FULLY DEPRECIATED ITEMS AND/OR EXPENSED ITEMS) SHALL ACCOMPANY THIS REPORT.  
\* THIS FORM (LAT8) MUST BE ACCOMPANIED BY A LAT5

*SHADED AREAS FOR ASSESSOR'S USE ONLY – USE ATTACHMENTS IF NECESSARY*

**SECTION 1 – OWNER INFORMATION**

<b>TOWER OWNER:</b>	
<b>ADDRESS:</b>	
<b>TOWER LOCATION:</b>	

NAME AND ADDRESS(ES) OF ALL COMPANIES LEASING SPACE ON TOWER:


**SECTION 2 – HEADEND, TOWER, ANTENNA AND EQUIPMENT AT TOWER**

*(GROUP BY YEAR OF ACQUISITION)*

YEAR OF ACQUISITION	ACQUISITION COST	AGE	TAB. NO.	COST MULT.	FAIR MARKET VALUE	YEAR OF ACQUISITION	ACQUISITION COST	AGE	TAB. NO.	COST MULT.	FAIR MARKET VALUE
						15 Years or over.					
						<b>TOTAL MARKET VALUE:</b>					
						<b>ASSESSED VALUE:</b>					

