MIKE WELLS
PASCO COUNTY PROPERTY APPRAISER
REQUEST FOR EXTENSION OF FILING DATE
2012 Tangible Personal Property Tax Return

Mailing Address: PO Box 401, Dade City, Fl 33526-0401
Phone number: 352-521-4238 Fax number: 352-521-4160
e-mail: tangext@pascogov.com

_____
Owner Name or Filing Agent

_____
Mailing Address

_____
City State Zip

_____ _____ _____
Phone Number e-mail address fax number

I hereby request an extension of 30 days to file a Tangible Personal Property Tax Return for following business (es):

WARNING! OMISSION OF LOCATION OR ACCOUNT NUMBERS WILL RESULT IN THE DENIAL OF THIS REQUEST!

Business Name **(d/b/a)**	Physical Location of Assets	Account # Or "new" if new business

Use additional sheets if needed

TO PROTECT THE PRIVACY OF YOUR CUSTOMERS, YOU MAY SUBMIT A COVER PAGE WITH THIS FORM, WHICH WILL BE RETURNED AS YOUR CONFIRMATION OF YOUR GRANTED EXTENTION. EACH ACCOUNT MUST BE LISTED ON THIS FORM, OR ON A SEPERATE LISTING.

A COPY OF THE APPROVED EXTENSION MUST BE INCLUDED AS PART OF THE TANGIBLE PERSONAL PROPERTY TAX RETURN.

I understand that this request is made pursuant to Florida Statute 193.063 and must be filed with the Property Appraiser's office no later than **April 2, 2012** in order to be considered. Tangible Returns must be signed by owner or officer of the business to avoid late penalties.

_____ _____
Owner or filing Agent Signature Date

Filed Returns must be signed by Business Owner

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