SHORT TERM RENTAL PROPERTY STATEMENT FOR 2024

(Declaration of costs and other related property information as of 12:01 A.M., January 1, 2024)

RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED. FILE A SEPARATE STATEMENT FOR EACH LOCATION. FILE RETURN BY APRIL 1. 2024.

Assessor's Use Only	Assessor's Use Only	Assessor's Use Only
ACCOUNT NUMBER	BAN	ASSESSOR'S PARCEL/ID NUMBER

1. NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address.)

PART 1: GENERAL INFORMATION				2. LOCATION OF THE PROPERTY (street, city)
Local Telephone Number ()	Fax Number ()			
Email Address				
Enter location of general ledger and all rela	ted accounting records (incl	ude zip d	code):	
STREET	CITY	STATE	ZIP	When did you start business at this location?
				DATE:
PART 2: LEASED PROPERTY				ASSESSOR'S USE ONLY
3. Do you own the personal property (i.e., hous		ects) loca	ated at your	
short term rental property location? \Box Yes \Box				
If NO, list below NAME AND ADDRESS OF OWN	R AND DESCRIPTION OF SUCH	PROPERT	Y	_
PART 3: DECLARATION OF PERSONAL PRO	PERTY BELONGING TO YOU	(use Sch	nedule A on	
page 2 to complete totals below)				
4. Supplies Enter cost estimate of su	oplies on hand available to r	ental gu	ests	
		\$		
5. Furniture & Belongings Enter to	otal costs from page 2			
		\$		
6. Kitchen Appliances Enter to	otal costs from page 2	•		
		\$		
7. Other Equipment Enter to	otal costs from page 2	•		
		\$		
		•		\neg
GRAND TOTAL PERSONAL PROPERTY		Ś		

OWNERSHIP TYPE ($oxtimes)$)	DECLARATION BY ASSESSEE				
 Homeowner Proprietorship Partnership Corporation Other: 	Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 2024.				
	SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
	NAME OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
	NAME OF LEGAL ENTITY (other than DBA) (typed or printed)	FEDERAL EMPLOYER ID NUMBER			
	PREPARER'S NAME AND ADDRESS (typed or printed)	TELEPHONE NUMBER ()	TITLE		

THIS STATEMENT SUBJECT TO AUDIT

INFORMATION PROVIDED ON A PROPERTY STATEMENT MAY BE SHARED WITH THE STATE BOARD OF EQUALIZATION

BOE-571-STR (P2) REV. 00 (05-23)

SCHEDULE A – COST DETAIL: FURNITURE & EQUIPMENT Table to itemize belongings

Section 1(a) of article XIII of the California Constitution provides that all property is taxable unless otherwise exempted. Therefore, all home furnishings that are used in a short-term rental property – including dishware, sofas, mattresses, and bedding – are subject to personal property taxes.

One by one, please list EACH ITEM per room contained in the short-term rental property and estimate cost and year that items were acquired.

Year	Bedroom #1	Original	Year	Living area	Original	Year	Kitchen appliances (Do not	Original		
acquired	furniture & belongings	cost	acquired	furniture & belongings	cost	acquired	include built-in appliances)	cost		
	Mattress	0000	uoquireu	Sofa	0000	aoquirea	Dishwasher			
	Box Spring			Chairs			Refrigerator			
	Bedframe/headboard			Rug			Stove			
	Pillows and bedding			TV			Microwave			
	Duvet cover/blanket			Table			Toaster			
	Bureau/chest of drawers			Storage chest of drawers			Coffee maker			
	Nightstand/bedside table			Table lamp			Blender			
	Rug			Floor lamp			Ice maker			
	Mirror			Mirror			Other			
	Table lamp			Artwork: painting/picture			Other			
	Floor lamp			Clocks	<u> </u>					
				Internet modem/router						
	Artwork: painting/picture									
	TV			Gaming console(s)/DVD						
	Other			Wi-Fi/networking devices						
				Other						
	Total			Total			Total	\vdash		
Year	Bedroom #2	Original	Year	Dining & Kitchen	Original	Year	Other	Original		
acquired	furniture & belongings	cost	acquired	furniture & belongings	cost	acquired	equipment	cost		
	Mattress			Dishware			Clothes washer			
	Box Spring			Flatware			Clothes dryer			
	Bedframe/headboard			Pots and pans			Vacuum cleaner			
	Pillows and bedding			Knives/cooking utensils			Computer(s)			
	Duvet cover/blanket			Table			Bike(s)			
	Bureau/chest of drawers			Chairs			Sports equipment			
	Nightstand/bedside table			Rug			Portable BBQs			
	Rug			Table lamp			Security system(s)			
	Mirror			Floor lamp			Outdoor playground			
	Table lamp			Mirror			Patio furniture			
	Floor lamp			Artwork: painting/picture			Gazebo			
	Artwork: painting/picture			Clocks			Portable hot tub			
	TV			Telephones			Pool equipment			
	Other			Other			Electric vehicle charger(s)			
	other			other			Portable heater(s)/air			
							conditioner(s)			
							Rollaway beds			
					<u> </u>		Other			
	Total			Total						
Voor	Bedroom #3	Original	Varr	Bathroom	Original		Total	L		
Year	furniture & belongings	Original	Year		Original					
acquired	, , , , , , , , , , , , , , , , , , , ,	cost	acquired	furniture & belongings	cost	Addus TO				
	Mattress			Bath towels	├ ───┤		IP TOTAL COSTS for FURNITURE & BELONGINGS as in both the left and center columns and carry			
	Box Spring			Hand towels	↓					
	Bedframe/headboard			Bath mat(s) and rug(s)	 	forward the	e total sum to the front page, line	: 5.		
	Pillows and bedding			Blow dryer				ad in +1		
	Duvet cover/blanket			Other			up TOTAL COSTS for APPLIANCES as listed in the er right column and carry forward the total sum to			
	Bureau/chest of drawers							ridi suffi to		
	Nightstand/bedside table					the front p	age, illie o.			
						Add to TO	Add up TOTAL COSTS for EQUIPMENT as listed in the			
	Rug									
	Rug Mirror							mid right column and carry forward the total sum to the		
	-					0	•	i sum to th		
	Mirror Table lamp					front page,	•	i sum to th		
	Mirror Table lamp Floor lamp					front page,	line 7.			
	Mirror Table lamp Floor lamp Artwork: painting/picture					front page, Please atta	line 7.			
	Mirror Table lamp Floor lamp					front page, Please atta	line 7.			