LAT 3 – APPAF	RTMENT - REAL	L PROPE	RTY TAX FORM	YEAR:						
RETURN TO:		NAME/ADDRESS: (INDICATE ANY CHANGES)								
ST. JAMES PARISH ASSESSOR										
5800 LA 44 P. O. BOX 55										
P. O. BOX 55 CONVENT, LA 70723										
(225) 562-2252										
CONFIDENTIAL:	, ,					Legal Citation & Instructions: This report shall be filed with the Assessor of the parish indicated by April 1 ST or within forty-five days after receipt, whichever is later, in accordance with RS 47:2324.				
	_									
PROPERTY LOCATION: (E911/PHYSICAL ADDRESS)					WARD:	ASSESSMENT NUMBER:				
LEGAL DESCRIPTION:										
SECTION 1 – L	AND DATA									
DIMENSIONS - FR	ONT:x	x_	x	COST	IF PURCHA	SED AS A V	ACANT	LAND: \$		
DATE OF PURCAS	E:	ZONIN	IG:	CHEC	KONE:	CORNER L	от 🗆	INSIDE LOT		
SECTION 2 – BUILDING DATA										
CHECK OR FILL IN APPORPRIATE SPACES – USE ATTACHMENTS IF NEEDED										
AGE: YRS					DATE OF ACQUISITION:					
COST OF CONSTRUCTION:					AMT. OF INSURANCE:					
QUALITY	CONDITION	STYLE		В			TERIOR WALL		FOUNDATION	
		NO OF C	TODIES		ICTURE	Потиос			□ picpo	
☐ LOW ☐ FAIR	☐ LOW ☐ FAIR			STEEL				I E OB	☐ PIERS ☐ RUNNING PIERS	
	☐ AVERAGE		ORY FINISHED	REINF					☐ CONCRETE SLAB	
☐ GOOD	☐ GOOD	L 1 /2 01	OKTTHHOTIED	CONCRE						
☐ VERY GOOD	☐ VERY GOOD		□ отн		R: COMMON BRIG		N BRIC	K		
					☐ FIRE BRICK					
			•			☐ CONCR	ETE BL	оск		
SWIMMING POOL	. HEATING & C	OOLING			PLUMBING		INTERIOR WALLS			
HEATER	☐ FLOOR FUR		CARPET:			KTURES			PLASTER%	
☐ CHLORINATOR	PANEL WAL		HARDWOOD:			OUGH INS _			BLOCK/TILE%	
	☐ HEAT AND A/C		UNYL:%		TUB ENCLOSERS			PANELING% INSULATION:		
	☐ RADIANT		FANCY STONE:%					INSULATION: ☐ YES ☐ NO		
	☐ CENTRAL HOT AIR									
	□ SPACE									
	☐ CEILING									
		EXTRA FEATURES								
□ BUILT IN RANGE ELETRIC □ MICRO-WAVE OVEN ELECTRIC					☐ ELEVATOR LOAD ☐ SPRINKLER SYSTEM ☐ UTILITY ROOM					
☐ DROP IN RANGE OVEN GAS ☐ DROP IN RANGE OVEN ELECTRIC					☐ SUPSENDED CEILING ☐ OUT BUILDING					
					☐ OTHER:					

APPARTMENTS									
NO. OF EFFICIENCY RENTAL OF EACH	NO. OF APT. BUILDINGSSIZEX								
NO. OF ONE BEDROOM RENTAL OF EACH	NO. OF CLUB HOUSES SIZE X								
NO. OF TWO BEDROOM RENTAL OF EACH	NO. OF LAUNDRY BUILDINGS SIZE X								
NO. OF THREE BEDROOMRENTAL OF EACH	NO. OF SWIMMING POOLS SIZE X								
NO. OF FOUR BEDROOMRENTAL OF EACH	NO. OF OHTERSSIZEX								
EXPLAINSIZEXEXPLAINSIZEX									
TOTAL FLOORSQ. FT.									
PARKING									
NO. OF PARKING SPACES: OPEN: CLOSED:									
INCOME									
INCOME: ANNUAL: MONTLY:	VACANCIES AT THIS TIME:								
RENTALS INCLUDE									
☐ UTILITIES ☐ FURNITURE ☐ OTHER									
ATTACH RECENT PHOTOGRAPH OF BUILDING									
	EED ASSISTANCE? AFTER YOU REVIEW THE ENCLOSED TAX FORM								
	ND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YOUR SSESSOR LISTED ABOVE. THANK YOU								
SIGNATURE AND VERIFICATION									
I declare under the penalties for filing false reports that this return has been examined by me and 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 information relating to the matters required to the reported	in the return of which he has knowledge.								
SIGNATURE OF TAXPAYER	DATE								
PRINTED/TYPED NAME OF TAXPAYER									