BERKELEY COUNTY ITEMIZED FLEET VEHICLE REPORT

ATTACH THIS REPORT TO YOUR RETURN

TAX YEAR ______________

NAME OF COMPANY OR TAXPAYER: ____

ADDRESS: ____

THE FLEET SHEET IS PROVIDED IN CASE, ADDITIONAL SPACE IS NEEDED. FOR PASSENGER VEHICLES GIVE TYPE, MAKE, MODEL, YEAR,VIN AND ACQUISTION COST AND DATE. FOR BUSINESS VEHICLES; IF YOU HAVE ADDITIONAL EQUIPMENT ATTACHED TO THE VEHICLE, PLEASE LIST THE EQUIPMENT IN SCHEDULE A.

REPORT ALL VEHICLES OWNED ON JULY 1

VEHICLE TYPE	MAKE	MODEL	YEAR	VEHICLE ID NUMBER (VIN)	ACQ. DATE	ACQ. COST	ASSESSOR VALUE