



Return to:  
Harris Central Appraisal District  
Business & Industrial Property Div.  
PO Box 922007  
Houston TX 77292-2007

# RENDITION OF STORED PRODUCTS CONFIDENTIAL



Account Number

iFile™ Number

January 1, 2026

Form 22.15-SP (11/25)

For assistance, please refer to important information and instruction sheet.

## Part 1. Property Owner Name, Business Name, Address, Phone and Physical Location or Situs [Required]:

Business Name

Business Owner

This business is related to other business entities (or accounts) at this location:

Mailing Address, City, State, Zip Code

Name of Business Entity

Account Number

Property Location Address, City, State, Zip Code

Phone (area code and number)

Name of Business Entity

Account Number

## Part 2. Business Information: Please address all that apply. Optional but very important.

Sales Tax Permit Number

Business Start Date at Location

Business Closed Date

If business closed, were assets still in place as of Jan 1?

Yes  No 

Square Feet Occupied

Business Description

Ownership TypeBusiness Type

The business owned no taxable assets in Harris County as of Jan 1

Business Sold Date

New Owner

 Individual Manufacturing

Business Moved Date

New Location, City, State, Zip Code

 Corporation Wholesale

This is a new business or location for the above tax year

 Partnership Retail Other Service

## Part 3. Market Value Certification: If checked, you will not be required to file a rendition in future years unless you are required to do so by the chief appraiser.

By checking this box, I certify that the total market value of this property is not more than \$125,000. [If checked, you may skip to part 5 and page 2 is optional]

## Part 4. Affirmation of Prior Year Rendition: (Check only if applicable and your assets were exactly the same as the prior rendition form.)

By checking this box, I affirm that the information contained in the most recent rendition statement filed for a prior tax year (the \_\_\_\_\_ tax year) continues to be complete and accurate for the current tax year. [If checked, page 2 is optional]

## Part 5. Sign and Date Form: This form must be signed and dated. By signing this document, you attest that the information contained on it is true and correct to the best of your knowledge and belief.

Indicate if you are filling out this form as:

- Owner / Employee
- Authorized Agent
- Fiduciary
- Secured Party

Signature

Printed Name

**Notarization:** Complete if signer is not a secured party, owner, employee, officer of the company or affiliated company, or on behalf of the property owner where the good faith estimate of value is more than \$150,000.

Company Name

Title

SUBSCRIBED AND SWORN TO BEFORE ME THIS:

(\_\_\_\_\_) Phone No.

Date

Email (optional)

\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_. SEALNotary Public Signature State \_\_\_\_\_

Owner Name: _____	Account Number: _____	
Did you timely apply for a September 1 inventory date? (Optional)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is your inventory located in an active Foreign Trade Zone? (Optional)
Does your inventory involve interstate/foreign commerce? (Optional)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your inventory involve freeport goods? (Optional)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Site # _____

For each part below you may attach additional sheets if necessary, identified by business name, account number, and "part".

**Part 6. Inventory:** List all taxable property by type. If you manage or control property as a fiduciary on Jan 1, also list the names and addresses of each property owner.

**Part 7. Property Under Bailment, Lease, Consignment or Other Arrangement:**

Property Owner's Name	Property Owner's Address	General Property Description

\* Optional but this information helps to prevent incorrect and/or double assessments.

\*\* Applies only if you have products stored in a storage tank or tank farm.