

**SCOPE OF WORK
FOR
DATA ENTRY AND VERIFICATION OF RENDITIONS**

I. PROPOSALS

- a. All proposals must contain a properly completed *Propose to Provide Certification form* (page 18 of 18 in this document) furnished by the Purchasing Office, with supporting material attached. Each vendor is requested to submit any further concessions or services that it may want to offer the District and is invited to make any comments relating to further consideration in selecting a provider of data entry and verification services for the District.
- b. All proposals must be written in ink or by typewriter, inkjet printer, or laser printer. Pencil quotations will not be considered. Proposals must be filed in duplicate and all copies must be manually signed.
- c. Proposals should show net prices, extensions and net total. In case of conflict between unit prices and extension, the unit price will govern.
- d. All proposals are to be based on an as-delivered basis and must include all costs that will be billed (i.e. freight, inside delivery, messenger, handling, trip charges, etc.).
- e. Proposer shall furnish technical specifications and all data pertinent to warranties or guarantees that apply to items and/or services in the proposal.
- f. This proposal must not be altered. Any erasure or alteration of inquiries may invalidate the proposal on the item on which the erasure or alteration is made.
- g. Quotation marks will not be considered in cases where proposer quotes more than one price on an item or services, except where alternate proposals are expressly called for.
- h. All variances from the District's conditions and/or requirements, no matter how slight, must be indicated in the proposal. Otherwise, it will be assumed that your proposal fully complies with the District's conditions and requirements as defined in this document.
- i. Withdrawing a proposal is permissible if such request is received, from the proposer, by the Purchasing Office prior to the proposal opening date and time. All such requests must be typewritten or in ink, manually signed in ink by a responsible officer or employee of the firm, and title of the officer or employee must be shown.
- j. All proposals must show the full name of firm proposing, with the name printed in ink.
- k. All proposals must be signed, in ink, by a responsible officer or employee of the firm and title of the officer or employee must be shown. Obligations assumed by the signature must be fulfilled.

- l. Any deviation from the conditions and requirements of this proposal must be disclosed and approved by the District.
- m. This request for quote does not commit the District to enter into any formal or informal contract, or to incur any costs related to the preparation of a response. All costs for preparation and submission of proposals are the responsibility of the proposer.

II. PRICING

- a. No change in price will be considered in the award of proposals, and all quotations must be on a net basis.
- b. Cash discounts will not be considered in the award of proposals, and all quotations must be on a net basis.
- c. All prices proposed must be firm for the term of agreement.
- d. All proposals must include all costs that will be billed.
- e. Proposed prices must be submitted on a per record basis.

III. TAXES

- a. The District is exempt from the Federal Excise and Transportation Tax, and the limited Sales and Use Tax.
- b. Unless the proposal form or requirements specifically indicate otherwise, the price proposed must be net exclusive of above-mentioned taxes and will be so construed.

IV. PROPOSER QUALIFICATIONS & EVALUATION

- a. Proposers are required to submit a properly completed Bidder Application Form to the District's Purchasing Office. It is the responsibility of the bidder to inform the District's Purchasing Office of any changes/deletions/additions to this form as is deemed appropriate. This application is used to maintain a bidder database for the purpose of a bid mailing list, and other references as required. This form is found on the HCAD website, www.HCAD.org, under the ABOUT menu, in the Procurement section.
- b. Proposers are required to complete and submit a Conflict of Interest form, a Boycott Agreement, GC2270.002 form and a W-9 IRS form. These forms are all on the www.HCAD.org.
- c. Proposers are required to submit a biographical or historical sketch of their firm that must show past performance indicating the ability to perform the services being proposed. As necessary criteria for any proposer, the District requires a showing of responsible performance in previous undertakings of similar nature and/or related projects for a period of

five (5) years. Due to critical legal and practical issues, a record of satisfactory past performance will be required to be met, for a proposer to be a recipient of a contract award.

- d. The District may require proposers to demonstrate any item or service in their proposal, and at their expense, before award of contract. It is mandatory that all proposers certify without reservation that their equipment will be compatible with District equipment, without additional cost to the District or without modification to existing District equipment.
- e. The District reserves the right to reject any proposal at any time after the closing date and to conduct negotiations to the extent the District deems necessary and appropriate. However, proposals should be submitted on the most favorable basis as to price, delivery, or time of completion and other factors since the District may elect to make an award without any further discussions or negotiations.

V. AWARD

- a. All proposals will be evaluated using the same requirements and criteria.
- b. No firm having or having had a contract with the District will be given more consideration than any other proposer.
- c. During any part of the proposal process, from preparation of request for proposal through the issuance of an agreement, the District purchasing office reserves the right to seek any additional information, clarification, and/or verification deemed necessary to render a reasonable responsive evaluation, and recommendation to the District's Board of Directors.
- d. Evaluation will determine the ability of the proposer to provide the most efficient service in the most economical method for the District. Other criteria will include pricing in all respects, quality of service, availability of service, and meeting of all requirements.
- e. The District will evaluate and make award of proposals on the basis of the lowest and best proposal that meets or exceeds the requirements.
- f. The District reserves the right to consider and make award of proposals on items and/or services of similar nature that will in all respects serve the purpose for which the purchase is being made. The District reserves the right to be the sole judge as to whether such items and/or services will serve the purpose.
- g. The District reserves the right to consider and make awards for the best interests of the District.
- h. The District reserves the right to accept in whole or in part any proposal or proposals submitted that offer the most favorable terms and conditions for providing the data entry and verification services to the District, to reject any or all proposal or proposals in whole or in part, or to waive any informalities for the best interests of the District.

- i. Contents of the selected proposal(s) and all conditions and requirements of the request for proposal are contractual obligations.
- j. The District may award a contract on the basis of initial offers received, without discussions. Therefore, each initial offer should contain the proposer's best terms.
- k. Bidders with delinquent property taxes will not be considered for award.
- l. A purchase order will be issued to the successful proposer(s) upon award of the proposal.
- m. Upon awarding the contract, a tabulation of proposals will be available for public inspection in the Purchasing Office. To schedule a time to view such record(s) call (713) 957-7401.

VI. DEPOSIT & PERFORMANCE BOND

No deposit or bond is required.

VII. SUPPLEMENTAL AGREEMENTS

Should the proposer take exception to District's terms and conditions and/or require that supplemental vendor agreements be signed by the District in order to enter into this contract, such agreements must be included with the proposal response and are subject to review and amendment by the District's counsel and under the laws of the State of Texas prior to being executed by the District. All supplemental agreements must include fiscal funding out clauses.

VIII. DELIVERIES

- a. All proposals are for delivery not later than the time stated in the requirements, F.O.B. the point of delivery stated in the requirements.
- b. It is the responsibility of all proposers to keep the District's Purchasing Office notified of any unexpected problems that would prevent the proposer from meeting delivery deadlines, as they become aware of them.
- c. The District reserves the right to reject, without prior authorization, any deliveries not meeting these requirements.

IX. REJECTIONS

Items and/or services not in accordance with samples and requirements shall be modified to reach conformity, by the proposer and at his expense. All disputes concerning quality of deliverables under this proposal will be determined by the purchasing agent or his designated representative.

X. PAYMENT

- a. Payment will be made on completed purchases that are cleared by the last working day of the month.
- b. Partial payments will be made on purchase orders. However, contact must be made with the assistant chief finance officer before the end of the month that the proposer wishes to receive payment on items and/or services delivered. Otherwise, payment will be made on completion of the purchase order.
- c. Payments (complete or partial) will be mailed no later than the fourth Friday of the following month.
- d. The District's obligations will be payable solely from funds appropriated in the District's budget for the year in which such obligations may be due and payable. In the event that no funds or insufficient funds are appropriated for payment of obligations the contract shall be terminated without liability to the District, its officers, agents, or employees.
- e. All invoices must reference **RFQ #2020-01**, and the applicable purchase order number.
- f. All invoices should be submitted to the following address:

Attn: Accounts Payable
Harris County Appraisal District
P. O. Box 920975
Houston, TX 77292-0975

XI. PATENTS & COPYRIGHTS

- a. The contractor agrees to indemnify and save harmless the District, its officers and employees, from all suits and actions of every nature and description brought against them or any of them, for or on account of the use of patented or copyrighted appliances, products, processes, and/or services, and he shall pay royalties and charges which are legal and equitable.
- b. Evidence of such payment or satisfaction shall be submitted, upon request of the Purchasing Office, as necessary requirement in connection with the final estimate for payment in which such patented or copyrighted appliances, products, processes, and/or services are used.

XII. CANCELLATION

- a. Cancellation of the agreement by the proposer must be submitted in writing to the District's Purchasing Office 120 calendar days prior to the effective date.
- b. Cancellation of the agreement by the District must be submitted in writing to the proposer 60 calendar days prior to the effective date.

XIII. SEVERABILITY

If any section, subsection, paragraph, sentence, phrase, or work in this request for quote shall be held invalid, such holding shall not affect the remaining portions of this request for quote and it is hereby declared that such remaining portions would have been included in this request for quote as though the invalid portion had been omitted.

XIV. CONDITIONS PART OF PROPOSAL

The General Conditions of quote defined herein shall be a part of the attached quote.

REQUIREMENTS OF QUOTE

1. TASK IDENTIFICATION

Vendor must provide data entry and verification service for all personal property documents received from Harris County Appraisal District (HCAD) according to the following specifications:

- a. Error rate must be guaranteed to be less than two percent (2%). The error rate will be calculated according to the following formula: Observed character errors divided by total number of characters entered for a random sample of ten records per document file.
- b. Data must be keyed from scanned documents which may vary in size and format. HCAD will provide a batch instruction sheet (Exhibit A) for each document file.
- c. Any number of records must be accepted by vendor for each job order (each file submitted to vendor with a batch control form will be considered a job order). There will be no minimum job order. Document records may vary widely as to number of records per file. Vendor may bid according to record volume per group of job orders, *e.g.*, per hundred, per thousand, per ten thousand, *etc.*

2. EXHIBITS

- a. General and Vehicle Index, Data and Control and Records – The format in which vendor must provide data.
- b. General and Vehicle Rendition Forms – The Rendition forms are labeled with the Key ID from the Control and Data Records.
- c. Quote Form
- d. Proposed Pricing Schedule

Exhibit A

Index File - pipe delimited text

Key ID	Field Name	Description	Format
1	acct	HCAD Account Number (may have leading zeros)	text
2	doc_rsn	HCAD document number	text
3	zip_file	name of zip file where image is located	text

Data Record Vehicle

Key ID	Field Name	Description	Format	Start	Length	End
1	vehicle_id	Vehicle ID number (from database, not on rendition)	12 characters	1	12	12
2	account	HCAD Account Number	7 characters	13	7	19
3	model_yr	Vehicle Model Year	yyyy	20	4	23
4	make	Vehicle Make	50 characters	24	50	73
5	model	Vehicle Description (Model)	50 characters	74	50	123
6	vin	Vehicle VIN number (database search item)	22 characters	124	22	145
7	license	Vehicle License Plate Number (database search item)	10 characters	146	10	155
8	rend_val	Good Faith Estimate of Value	12 characters	156	12	167
9	orig_prc	Original / Historical Cost	12 characters	168	12	179
10	purchase_yr	Year Acquired	yyyy	180	4	183
11	mileage	Odometer	6 characters	184	6	189
12	q_own	Does form indicate vehicle not owned?	Y or N	190	1	190
13	q_county	Does form indicate vehicle not in Harris County?	Y or N	191	1	191
14	pbm_dscr	Please describe any problems with this line item (unable to read, etc.)	100 characters	192	100	291
15	part	Indicate if this item was provided in Part 5 or 6	5 or 6	292	1	292

Data Record General

Key ID	Field Name	Description	Format	Start	Length	End
1	Account	HCAD Account Number (from index file)	7 characters	1	7	7
2	Asset_Type	Asset Type Code (INV, SUP, RAW, WIP, FF, M06, SE, ME, C2, X1)	3 characters	8	3	10
3	Value_Opinion	"Good Faith Estimate" Expressed as Whole Dollar Amount, truncating cents, no symbols	numeric	11	12	22
4	Yr_Acquired	Year of Acquisition	YYYY	23	4	26
5	Original_Cost	"Original Cost" Expressed as Whole Dollar Amount, truncating cents, no symbols	numeric	27	12	38
6	Description	Description Provided on Rendition	alphanumeric	39	50	88
7	pbm_dtl_dscr	Describe any problem with this line item (unable to read, etc.) if any.	100 characters max	89	100	188

Control Record Vehicle

Key ID	Field Name	Description	Format	Start	Length	End
1	acct	HCAD Account Number	7 characters	1	7	7
2	acct_correct	Does the HCAD Account number match the number on the form?	Y or N	8	1	8
3	bus_name_chg	Does form indicate a business name change?	Y or N	9	1	9
4	own_chg	Does form indicate an ownership change?	Y or N	10	1	10
5	mail_addr_chg	Does form indicate a mailing address change?	Y or N	11	1	11
6	loc_chg	Does form indicate a property address change?	Y or N	12	1	12
7	sales_tax	Sales Tax Permit Number	alphanumeric	13	12	24
8	Bus_start	Business start date at location	m/d/yyyy	25	10	34
9	bus_close_dt	Business close date	m/d/yyyy	35	10	44
10	bus_sold_dt	Business sold date	m/d/yyyy	45	10	54
11	Bus_Sold	Does form indicate a new owner?	Y or N	55	1	55
12	bus_move_dt	Business move date	m/d/yyyy	56	10	65
13	Bus_Moved	Does form indicate a new location address?	Y or N	66	1	66
14	own_type	I: Individual, P: Partnership, C: Corporation, O: Other	1 character	67	1	67
15	bus_type	M: Manufacturing, W: Wholesale, R: Retail, S: Service	1 character	68	1	68
16	no_vehs	Does form indicate business owned no vehicles as of Jan 1?	Y or N	69	1	69
17	new_business	Does form indicate this to be a new business or location?	Y or N	70	1	70
18	py_affirm	Is the "Affirmation of Prior Year Renditions" box checked?	Y or N	71	1	71
19	over_20k	Assets Worth \$20K or more?	Y, N, or Null	72	1	72
20	rend_as	O: Owner / Employee, A: Agent / Fiduciary, S: Secured Party	1 character	73	1	73
21	rend_signed	Does the Rendition form bear a signature?	Y or N	74	1	74
22	email_addr	Email Address	alphanumeric	75	100	174
23	notary_date	Does form bear a notary date?	Y or N	175	1	175
24	notary_sig	Does form bear a notary signature?	Y or N	176	1	176
25	notary_seal	Does form bear a notary seal?	Y or N	177	1	177
26	sec equip	Page 2, Part 8: Is anything written in this section?	Y or N	178	1	178
27	sec_own	Page 2, Part 9: Is anything written in this section?	Y or N	179	1	179

28	sec_situs	Page 2, Part 10: Is anything written in this section?	Y or N	180	1	180
29	sec_lease	Page 2, Part 11: Is anything written in this section?	Y or N	181	1	181
30	postmark	Postmark date from last page of doc (envelope) if available and legible.	m/d/yyyy	182	10	191
31	attachment	Do any additional pages (other than envelope) exist with rendition?	Y or N	192	1	192
32	pbm_dscr	Please describe any problems with the control form data (unable to read, etc.)	103 characters	193	100	292
33	Page 2 exists?	Use a Y to indicate if the rendition has a page 2, N if it does not	Y or N	293	1	293

Control Record General

Key ID	Field Name	Description	Format	Start	Length	End
1	Account	HCAD Account Number (from index file)	7 characters	1	7	7
2	acct_correct	Does the HCAD Account number match the number on the form?	Y or N	8	1	8
3	Bus_Name_Chg	Does form indicate a business name change?	Y or N	9	1	9
4	Own_Chg	Does form indicate an ownership change?	Y or N	10	1	10
5	Mail_Addr_Chg	Does form indicate a mailing address change?	Y or N	11	1	11
6	Loc_Chg	Does form indicate a property address change?	Y or N	12	1	12
7	Sales_Tax_Permit	Sales Tax Permit Number	alphanumeric	13	12	24
8	Bus_start	Business start date at location	m/d/yyyy	25	10	34
9	bus_close_dt	Business close date	m/d/yyyy	35	10	44
10	Sq_Ft	Occupied Square Feet (expressed as whole number - no symbols)	numeric	45	12	56
11	Bus_Desc_Chg	Does form indicate a business description change?	Y or N	57	1	57
12	bus_sold_dt	Business sold date	m/d/yyyy	58	10	67
13	Bus_Sold	Does form indicate a new owner?	Y or N	68	1	68
14	bus_move_dt	Business move date	m/d/yyyy	69	10	78
15	Bus_Moved	Does form indicate a new location address?	Y or N	79	1	79
16	assets_place	Assets in place on Jan 1?	Y or N	80	1	80
17	Owner_Type	I: Individual, P: Partnership, C: Corporation, O: Other	1 character	81	1	81
18	bus_type	M: Manufacturing, W: Wholsale, R: Retail, S: Service	1 character	82	1	82
19	no_assets	Does form indicate business owned no assets as of Jan 1?	Y or N	83	1	83
20	new_business	Does form indicate this to be a new business or location?	Y or N	84	1	84
21	py_affirm	Is the "Affirmation of Prior Year Renditions" box checked?	Y or N	85	1	85
22	Asset_Desc_Inv	Is the "Inventory" box checked?	Y or N	86	1	86
23	Asset_Desc_Sup	Is the "Supplies" box checked?	Y or N	87	1	87
24	Asset_Desc_Raw	Is the "Raw Materials" box checked?	Y or N	88	1	88
25	Asset_Desc_Wip	Is the "Work In Process" box checked?	Y or N	89	1	89
26	Asset_Desc_FF	Is the "Furniture & Fixtures" box checked?	Y or N	90	1	90

27	Asset_Desc_ME	Is the "Machinery & Equipment" box checked?	Y or N	91	1	91
28	Asset_Desc_Cmp	Is the "Computers" box checked?	Y or N	92	1	92
29	Asset_Desc_Misc	Is the "Miscellaneous" box checked?	Y or N	93	1	93
30	Alt_location	Does form indicate an Alternate location exists?	Y or N	94	1	94
31	Misc_desc	Description of Miscellaneous Category	alphanumeric	95	50	144
32	Over20K	Assets Worth \$20K or more?	Y, N, or Null	145	1	145
33	rend_as	O: Owner / Employee, A: Agent / Fiduciary, S: Secured Party	1 character	146	1	146
34	Rendition Signed	Does the Rendition form bear a signature?	Y or N	147	1	147
35	email_addr	Email Address	alphanumeric	148	100	247
36	Notary Date	Does form bear a notary date?	Y or N	248	1	248
37	Notary Signature	Does form bear a notary signature?	Y or N	249	1	249
38	Notary Seal	Does form bear a notary seal?	Y or N	250	1	250
39	Sep_1	Page 2, Does form indicate rendered Sept 1 Inventory?	Y or N	251	1	251
40	inv_ifc	Page 2, Does form indicate inventory in interstate/foreign commerce?	Y or N	252	1	252
41	inv_fpt	Page 2, Does form indicate inventory freeport-able?	Y or N	253	1	253
42	Rental_Inv	Page 2, Part 7: ("Property Address...Where Taxable") Does detail exist?	Y or N	254	1	254
43	manage_pp	Page 2, Part 7: ("Property Owner Name/Address...") Does detail exist?	Y or N	255	1	255
44	Lease_Item	Page 2, Part 8: Does detail exist?	Y or N	256	1	256
45	Postmark	Postmark date from last page of doc (envelope) if available and legible.	m/d/yyyy	257	10	266
46	Attachment	Do any additional pages (other than envelope) exist with rendition?	Y or N	267	1	267
47	pbm_cntrl_dscr	Describe any problem with the control form data (unable to read, etc.) if any.	alphanumeric	268	100	367
48	Page 2 exists?	Use a Y to indicate if the rendition has a page 2, N if it does not	Y or N	369	1	369

Exhibit B

Return to: **Harris County Appraisal District**
 Business & Industrial Property Div
 PO Box 922007
 Houston, TX 77292-2007

BUSINESS PERSONAL PROPERTY RENDITION

CONFIDENTIAL

2020 **PP130**

January 1, 2020

ACCOUNT NUMBER

Form 22.15 (11/17) For assistance, please refer to instructions on pages 3 & 4 of this form.

Part 1. Property Owner Name, Business Name, Address, Phone and Physical Location or Situs (Required)

3 Business Name 4 Business Owner 2 Account Number

5 Mailing Address, City, State, Zip Code IFile™ Number

6 Property Location Address, City, State, Zip Code Phone (area code and number) Agent Name

Agent ID#

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

7 Sales Tax Permit Number 8 Business Start Date at Location 9 Business Closed Date 16 If business closed, were assets still in place as of Jan 1? Yes No

10 Square Feet Occupied 11 Business Description 17 Ownership Type 18 Business Type 19 The business owned no taxable assets in Harris County as of Jan 1

12 Business Sold Date 13 New Owner Individual Manufacturing Wholesale

14 Business Moved Date 15 New Location, City, State, Zip Code Corporation Retail This is a new business or location for the above tax year

Partnership Service 20

Other

Part 3. 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, you may skip to Part 6.]

21 Signature and Affirmation

Part 4. Description of Assets: A description of assets is required unless you checked Part 3 of this form. Please check all that apply.

22 Inventory 24 Raw Materials 26 Furniture & Fixtures 28 Computers 30 Location (if different from above)

23 Supplies 25 Work in Process 27 Machinery & Equipment 29 Miscellaneous 31 Describe Miscellaneous Assets:

Part 5. Market Value: What do you estimate to be the total market value of your business assets? [Required, unless you checked Part 3 of this form.]

32 Under \$20,000 [If "Under \$20,000" is checked, Page 2 is optional as long as a general description of the property by type or category has been provided in Part 4.]

32 \$20,000 or more [If "\$20,000 or more" is checked, you must complete all of Page 2.]

Part 6. 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 filing out this form as:

33 Owner / Employee Signature Printed Name Notarization: Complete if signer is not a secured party, or owner, employee, or officer of the company or affiliated company.

Authorized Agent Company Name Title 36 day of _____, 20____

Fiduciary () 37 Notary Public Signature State 38

Secured Party Phone No. Date Email (optional)

If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or state jail felony under Section 37.10, Penal Code.

Page 1

Owner Name _____ Account Number 1 _____

39 Did you apply for a September 1 Inventory Date? (Optional) Yes No 41 Does your inventory involve freepport goods? (Optional) Yes No

40 Does your inventory involve interstate/foreign commerce? (Optional) Yes No 42 Is your inventory located in an active Foreign Trade Zone? (Optional) Yes No

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

Part 7. Inventory, Raw Materials, Work in Process and Supplies. List all taxable property by type.

	Asset Type/Category	Description	Estimate Of Quantity	Good Faith Estimate of Market Value*	OR	Historical Cost When New**	AND	Year Acquired **	Property Address or Address Where Taxable (if different from page 1)	Property Owner Name/Address (if you manage or control property as a fiduciary)
2(INV)	A. Inventory			3		5		4	43	44
2(RAW)	B. Raw Materials			3		5		4	43	44
2(WPI)	C. Work in Process			3		5		4	43	44
2(SUP)	D. Supplies			3		5		4	43	44

Part 8. Furniture, Fixtures, Machinery, Equipment, Computers: Total all new or used furniture, fixtures, machinery, equipment and computers still in possession on January 1.

2	Asset Type/Category	2(IF)		2(M06)		2(SE)		2(ME)		2(C2)		2(C1)		2(X1)		Describe Miscellaneous Assets (from column G)
		A. Furniture & Fixtures	B. Office Machines	C. Mobile Radio, Telephone, PBX, Cell Phone, Fax	D. All other Machinery & Equipment	E. Computers: PCs, Servers & Peripherals	F. Computers: Mainframes	G. Miscellaneous (signs, rental inventory, etc.)								
3	Good Faith Estimate of Market Value*														6	
Historical Cost When New** and Year Acquired**	4	2005 & Prior	5												6	
	4	2006	5												6	
	4	2007	5												6	
	4	2008	5												6	
	4	2009	5												6	
	4	2010	5												6	
	4	2011	5												6	
	4	2012	5												6	
	4	2013	5												6	
	4	2014	5												6	
	4	2015	5												6	
	4	2016	5												6	
4	2017	5												6		
4	2018	5												6		
4	2019	5												6		
COST TOTALS																

Part 9. Property Under Bailment, Lease, Consignment or Other Arrangement:

Property Owner's Name	Property Owner's Address	General Property Description
45		
45		
45		

* If you provide an amount in the "good faith estimate of market value", you need not complete "historical cost when new" and "year acquired".
 ** If you provide an amount in the "historical cost when new" and "year acquired", you need not complete "good faith estimate of market value".

Page 2



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

VEHICLE RENDITION
CONFIDENTIAL

2017

PP135

January 1, 2017

ACCOUNT NUMBER

Form 22.15VEH (10/10)

For assistance, please refer to instructions on pages 3 & 4 of this form.

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

Business Name _____ Business Owner _____
Mailing Address, City, State, Zip Code _____
Property Location Address, City, State, Zip Code _____ Phone (area code and number) _____

Account Number _____
iFile™ Number _____
Agent Name _____
Agent ID# _____

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

7 Sales Tax Permit Number _____ 8 Business Start Date at Location _____ 9 Business Closed Date _____ 14 Ownership Type _____ 15 Business Type _____ 16 The business owned no vehicles in Harris County as of Jan 1

10 Business Sold Date _____ 11 New Owner _____ Manufacturing _____ Wholesale _____ Retail _____ Service _____ 17 This is a new business or location for the above tax year

12 Business Moved Date _____ 13 New Location, City, State, Zip Code _____

Part 3. 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, you may skip to Part 6. "Signature and Affirmation"]*

Part 4. Market Value: What do you estimate to be the total market value of your business assets? [Required, unless you checked Part 3 of this form.]

19 Under \$20,000 *[If "Under \$20,000 is checked Page 2 is optional, however, this information prevents incorrect and/or double assessments.]*
 \$20,000 or more *[If "\$20,000 or more" is checked, you must complete all of Page 2.]*

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:
21 Signature _____ Printed Name _____
20 Owner / Employee _____
 Authorized Agent Company Name _____ Title _____
 Fiduciary () _____
 Secured Party Phone No. _____ Date _____ Email (optional) _____

Notarization: Complete if signer is not a secured party, or owner, employee, or officer of the company or affiliated company.
SUBSCRIBED AND SWORN BEFORE ME THIS:
23 _____ day of _____, 20____ <seal>
24 _____ Notary Public Signature _____ State _____ 25

If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or state jail felony under Section 37.10, Penal Code.

Owner Name _____ (Attach additional sheets if necessary, identified by name, account, and Part) Account Number 2
List only vehicles that are licensed in the name of the business as shown on Page 1. Vehicles disposed after Jan. 1 are taxable for the year and must be listed below.

Part 6. Vehicles in Our Records: Identify each vehicle already listed on this account.

Description *			Detail *		Value Information				Check if Vehicle not owned on January 1 (see Part 9)	Check if Vehicle Situs Not in Harris County (see Part 10)
Year	Make	Model	VIN Number	License	Good Faith Value Estimate	Original Cost *	Year Acquired *	Mileage* (odometer)		
3	4	5	6	7	8	9	10	11	12	13
#	Chevy	Tahoe	1234567891011	G&R4WIN	\$10,000	\$45,000	2003	99,999	<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/>	<input type="checkbox"/>

Part 7. Vehicles not listed in Part 6: Identify all vehicles not already listed on this account.

Description *			Detail *		Value Information			
Year	Make	Model	VIN Number	License	Good Faith Value Estimate	Original Cost *	Year Acquired	Mileage * (odometer)
3	4	5	6	7	8	9	10	11

26 Part 8. Special Equipment Mounted on Vehicles: Identify any mounted special equipment and the vehicle from Part 6 or 7 the equipment is mounted on.

VIN Number* (of equipped vehicle)	Description of Equipment	Good Faith Estimate of Value	Original Cost *	Year Acquired *

27 Part 9. Vehicles Not Owned on Jan 1: Identify the vehicles marked as disposed of from Part 6.

VIN Number *	Transaction Date	New Owner Information (name, address, telephone number) / Method of Disposition (if not sold)

28 Part 10. Vehicles with Situs Not in Harris County: Identify the vehicles marked as "not in Harris County" from Part 6.

VIN Number *	Location Address / Situs	County	State

29 Part 11. Leased Vehicles (not owned): Leased vehicles must be reported showing the name and address of the owner.

Year *	Make *	Model *	VIN Number *	License *	Owner Information (name, address, telephone number)

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

3. CONFIDENTIALITY

Vendor must agree in writing to complete confidentiality with regard to all documents received from HCAD.

4. DISTRICT COMPUTER MEDIA FORMAT REQUIREMENTS

All data elements and information must be provided according to the following specifications:

- a.* CD or DVD
- b.* Fixed Length
- b.* Text File

See Exhibit B for Required Record Description

5. DISTRICT QUALITY REVIEW

The district reserves the right to review in a reasonable manner the accuracy and completeness of the product returned pursuant to the terms of the proposal as accepted by the district board of directors.

6. DELIVERY DATES

The information must be converted by the vendor as received and returned to HCAD in the required format within five (5) working days. This five day period must include transit time.

7. TEST DATA

The proposal should include the submission of sample deliverable product (test data) converted from the example information attached as Exhibit A.