



# JACKSON COUNTY

## Tax Administration

### INDIVIDUAL PERSONAL PROPERTY EXTENSION REQUEST FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Account Number: \_\_\_\_\_

Date to Which you are Requesting Extension (in accordance with N.C.G.S. 105-307(c), the maximum allowable extension is April 15): \_\_\_\_\_

Reason for request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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#### OFFICIAL USE ONLY

Approved:            Denied:

Tax Administration Department Signature: \_\_\_\_\_

Date: \_\_\_\_\_