



**BRAZORIA CENTRAL APPRAISAL
DISTRICT 500 N CHENANGO ST
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REQUEST FOR HISTORICAL BUSINESS PERSONAL PROPERTY RENDITION

1. BUSINESS INFORMATION

ACCOUNT NUMBER(S): _____
(Attach additional sheets if necessary)

OWNER NAME: _____

BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

BUSINESS LOCATION: _____

2. RENDITION REQUEST

☐

I AM THE OWNER OR AUTHORIZED AGENT OF THE AFOREMENTIONED BUSINESS (*and related accounts*).
I HEREBY REQUEST A COPY OF THE BUSINESS PERSONAL PROPERTY RENDITION FOR THE FOLLOWING
TAX YEAR(S):

TAX YEAR(S) REQUESTED: _____

PREFERRED METHOD OF DELIVERY:
(provide applicable delivery information)

☐ U.S. Mail

☐ E-Mail

☐ Facsimile

3. SIGNATURE

SIGNATURE: _____ DATE: _____

PRINT NAME: _____ TITLE: _____

TELEPHONE NUMBER: _____ E-MAIL: _____