State	Tax
Form	2BE-1

TO BE FILED WITH THE BOARD OF ASSESSORS WITHIN 30 DAYS

COMMONWEALTH OF MASSACHUSETTS

COHASSET

FISCAL YEAR 2016 RETURN

Boat – Ship – Vessel

As required by General Laws, Chapter 60B, Section 2(b)

USE A SEPARATE FORM FOR EACH VESSEL

To the Board of Assessors of the Town of COHASSET:

The following described vessel was owned by _		_on July 1, 2015, whose permanent
mailing address is	Tel # ()and is habitually

moored or docked or is principally situated at ______ (Boat Yard, Wharf, or street address)

in the Town of COHASSET.

See additional information on reverse side

- 1. Name of vessel
- 2. Type/description of vessel (sail, cabin cruiser, inboard, etc.)_____
- 3. Make of vessel (manufacturer's name)_____Model_____
- 4. Hull identification number_____

5. Registration or Documentation number_____

- 6. Year of the manufacturer or year built_____
- 7. Length of vessel _____Color of vessel _____

- b. Engaged exclusively in fishing and documented and carrying "papers" under the laws of the United States?
- 9. Was the vessel actually used in the prosecution of his business by an owner who was engaged exclusively in commercial fishing?
- 10. Trailer or Mooring? ______
- 11. Mooring #:_____
- 12. Estimate of value of the vessel including motor or engine (if any) and all equipment as of July 1, 2015:\$

THE FOREGOING is a **TRUE RETURN** relative to the vessel described herein which was owned or held by the maker of this return on July 1, 2015.

SUBSCRIBED THIS DAY OF, 20	15 UNDER THE PENALTES OF PERJURY.
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SIGNATURE_____

Full name of individual, partnership, association or trust

FAILURE TO FILE A RETURN SEASONABLY MAY RESULT IN A PENALTY EQUAL TO 50% OF THE TAX. A COMPLETE FAILURE TO FILE WOULD RESULT IN A DENIAL OF ANY APPLICATON FOR ABATEMENT.

PLEASE RETURN FORM TO: BOARD OF ASSESSORS, 41 HIGHLAND AVENUE, COHASSET, MA 02025

BY AUGUST 1, 2015