

# Application for Personal Property Exemption of Landfill-Generated Gas Conversion Facility

Appraisal District's Name

Phone (area code and number)

Address	City	County	State	Zip Code
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**GENERAL INSTRUCTIONS:** This application is for use in claiming an exemption on tangible personal property owned and used in a landfill-generated gas conversion facility pursuant to Tax Code Section 11.311. This exemption applies to tangible personal property that is located on or in close proximity to a landfill and is used to:

- collect gas generated by the landfill;
- compress and transport the gas;
- process the gas so that it may be delivered into a natural gas pipeline or used as a transportation fuel in methane-powered vehicles or equipment; and
- deliver the gas into a natural gas pipeline or to a methane fueling station.

**FILING INSTRUCTIONS:** You must furnish all information and documentation required by this application so that the chief appraiser is able to determine whether the statutory qualifications for the exemption have been met. This document and all supporting documentation must be filed with the appraisal district office in each county in which the property is located. Do not file this document with the Texas Comptroller of Public Accounts. A directory with contact information for appraisal district offices may be found on the Comptroller's website.

**APPLICATION DEADLINES:** You must file the completed application beginning Jan. 1 and no later than April 30 of the year for which you are requesting an exemption.

**ANNUAL APPLICATION REQUIRED:** You must apply for this exemption each year you claim entitlement to the exemption.

## OTHER IMPORTANT INFORMATION

Pursuant to Tax Code Section 11.45, after considering this application and all relevant information, the chief appraiser may request additional information from you. You must provide the additional information within 30 days of the request or the application is denied. For good cause shown, the chief appraiser may extend the deadline for furnishing the additional information by written order for a single period not to exceed 15 days.

State the tax year for which you are rendering property.

Tax Year

## STEP 1: Property Owner/Applicant Information

The applicant is the following type of property owner:

Individual     Partnership     Corporation     Other (specify): \_\_\_\_\_

Name of Property Owner

Driver's License, Personal I.D. Certificate  
Social Security Number or Federal Tax I.D. Number\*

Physical Address	City	County	State	Zip Code
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Primary Phone Number (area code and number)

Email Address\*\*

Percent Ownership Interest %

**STEP 1: Property Owner/Applicant Information (continued)**

Applicant's mailing address (if different from the physical address provided above):

Physical Address	City	County	State	Zip Code
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- Select the box if the ownership interest identified above is less than 100 percent in the property for which you are claiming the exemption. Provide on a separate sheet the following information for each additional individual or entity who has an ownership interest in the property: property owner's name; driver's license, personal ID certificate, social security number or federal tax ID number; primary phone number; mailing address; and percentage of ownership interest in the property. Under Tax Code Section 11.41(a), if the applicant is not the sole owner of the property to which the exemption applies, the exemption shall be multiplied by a fraction, the numerator of which is the value of the property interest the applicant owns and the denominator of which is the value of the property.

If you are an Individual property owner filing this application on your own behalf, skip step 2 and go to step 3; all other applicants are required to complete step 2.

**STEP 2: Authorized Representative**

Provide the following information for the individual with the legal authority to act for the property owner in this matter:

Name of Authorized Representative	Driver's License, Personal I.D. Certificate Social Security Number or Federal Tax I.D. Number*
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Title of Authorized Representative	Primary Phone Number (area code and number)	Email Address**
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Mailing Address	City	County	State	Zip Code
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**STEP 3: Location of Landfill**

Provide the name and address of the landfill for which your tangible personal property is used in a landfill-generated gas conversion facility:

Name of Landfill	Phone (area code and number)
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Physical Address	City	County	State	Zip Code
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The tangible personal property used in a landfill-generated gas conversion facility is located on or within the landfill site at the address above:

- Yes  No

If you answered no to the previous question, provide the physical address where the tangible personal property used in a landfill-generated gas conversion facility is located:

Physical Address	City	County	State	Zip Code
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STEP 4: Tangible Personal Property of Landfill-Generated Gas Conversion Facility

Provide a general description of the tangible personal property which is used in a landfill-generated gas conversion facility and for which you are claiming an exemption under Tax Code Section 11.311. Attach additional pages if necessary.

_____	_____
Personal Property Description	Appraisal District Account Number (if known)
_____	_____
Personal Property Description	Appraisal District Account Number (if known)
_____	_____
Personal Property Description	Appraisal District Account Number (if known)
_____	_____
Personal Property Description	Appraisal District Account Number (if known)

STEP 5: Certification and Signature

**NOTICE REGARDING PENALTIES FOR MAKING OR FILING AN APPLICATION CONTAINING A FALSE STATEMENT: If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.**

"I, \_\_\_\_\_, swear or affirm the following:  
Printed Name of Property Owner or Authorized Representative

(1) that each fact contained in this application is true and correct; (2) that the property described in this application meets the qualifications under Texas law for the exemption claimed; and (3) that I have read and understand the Notice Regarding Penalties for Making or Filing an Application Containing a False Statement."

**sign here** ➔

_____	_____
Signature of Property Owner or Authorized Representative	Date

\* Disclosure of your social security number (SSN) may be required and is authorized by law for the purpose of tax administration and identification of any individual affected by applicable law. Authority: 42 U.S.C. § 405(c)(2)(C)(i); Tax Code Section 11.43(f). Except as authorized by Tax Code Section 11.48(b), a driver's license number, personal identification certificate number or social security number provided in this application for an exemption filed with your county appraisal district is confidential and not open to public inspection under Tax Code Section 11.48(a).

\*\* An email address of a member of the public could be confidential under Government Code Section 552.137; however, by including the email address on this form, you are affirmatively consenting to its release under the Public Information Act.