

2025



BUSINESS EQUIPMENT TAX REIMBURSEMENT FORMS AND INSTRUCTIONS 36 M.R.S. §§ 6651 - 6663

For Eligible Personal Property Taxes Paid in 2024

Taxpayer Assistance and Forms

Online:

www.maine.gov/revenue/taxes/property-tax

Email betr.mrs@maine.gov

Mail:

Maine Revenue Services
Property Tax Division
P.O. Box 1064
Augusta, ME 04332-1064

Phone:

Assistance/Forms
(207) 624-9404

All claims must be filed by December 31, 2025

Business Equipment Tax Exemption. Eligibility for the BETR program is generally limited to qualifying business property that was first placed in service after April 1, 1995 and on or before April 1, 2007. BETR also includes qualifying business property placed in service after April 1, 2007 when located at a retail sales facility. With the exception of retail equipment, most business property placed in service on or after April 1, 2008 is eligible for the Business Equipment Tax Exemption (BETE) program, rather than the BETR program. For additional information on the BETE program, contact your municipal assessor or visit the MRS website.

IMPORTANT INFORMATION

To be considered complete, an application must include the following:

- A completed Form 800.
- A completed Form 801A and/or Form 801B.
- Copies of the appropriate tax bills.
- Proof of payment (dated receipt or copy of cancelled check).

Maine Revenue Services (“MRS”) will not process an incomplete application. MRS will deny any application that is incomplete on or after the due date.

A lessor that has received reimbursement must repay a lessee for any portion of that reimbursement relating to property taxes paid by that lessee.

Substitute Forms 801A and 801B may be submitted if they include all the information included on the original Forms 801A and 801B. You must use an original Form 800, either downloaded from the MRS website or printed from a tax software program.

BUSINESSES THAT DO NOT QUALIFY FOR BETR:

- Public utilities.
- Businesses that provide radio paging services.
- Businesses that provide mobile telecommunications services.
- Cable television companies.
- Businesses that provide satellite-based direct television broadcast services.
- Businesses that provide multichannel, multi-point television distribution services.

PROPERTY THAT DOES NOT QUALIFY FOR BETR:

- Property located out-of-state.
- Property placed in service before April 2, 1995 and, generally, after April 1, 2007.
- Land and buildings.
- Vehicles registered for on-road use on which an excise tax has been paid or on which a property tax has been applied as a credit against excise tax.
- Office furniture and light fixtures.
- Gambling machines or devices.
- Personal property used primarily to support a telecommunications antenna used by a business subject to the state telecommunications excise tax.
- Certain energy facilities property, including most natural gas pipelines and property used to produce or transmit energy primarily for sale.
- Property located at a retail sales facility with more than 100,000 square feet of interior customer selling space and used primarily in a retail sales activity. Certain exceptions to this exclusion apply. See 36 M.R.S. § 6652(1-D).
- Pollution control facilities entitled to the property tax exemption under 36 M.R.S. § 656(1)(E). Disqualification does not apply if the property was placed in service after the December 1 immediately preceding the property tax year for which reimbursement is requested and the property has not yet been certified for exemption.
- Property eligible for the Business Equipment Tax Exemption program under 36 M.R.S. §§ 691 - 700-B.
- A facility that stores spent nuclear fuel, as defined in Title 22, section 673, subsection 18, or radioactive waste classified by the United States Nuclear Regulatory Commission as greater-than-Class C waste.

GENERAL INSTRUCTIONS

WHO MAY APPLY. Any business that was assessed personal property tax on eligible property, and made payment toward the assessed tax in 2024, may apply for a reimbursement of a portion of the property tax paid.

“Eligible property” means qualified business property first placed in service in Maine after April 1, 1995 and before April 2, 2007. Certain retail property placed in service after April 1, 2007 may also qualify.

Eligible property includes construction-in-progress commenced in the state after April 1, 1995, repair and replacement parts, improvements and inventory parts. “Inventory parts” means replacement parts for qualified property, rather than inventory, which is not qualified. Construction-in-progress begun prior to April 2, 1995 that was eligible for reimbursement in 1996 remains eligible for reimbursement.

“Qualified business property” means property used or held exclusively for a business purpose and subject to an allowance for depreciation or, in the case of construction-in-progress or inventory parts, would be subject to an allowance for depreciation when placed in service.

Qualified business property does not include land or buildings; however, it does include property affixed or attached to a building or other real estate if it is used to further the particular trade or business activity taking place at that location. Components or attachments to a building used primarily to serve the building (for example, standard heating, air conditioning, plumbing, and lighting systems) do not qualify. Land improvements typically made to further the use of the land (for example, driveways, parking lots, or fences) also do not qualify.

Reimbursement is not allowed for office furniture (such as tables, chairs, desks, bookcases, filing cabinets, and modular office partitions) or lamps and lighting fixtures placed in service after April 1, 1996.

Reimbursement is not allowed for gambling machines or devices.

COGENERATION FACILITIES. Reimbursement for cogeneration facilities is based on the energy produced during the property tax year for which a claim is made.

ASSESSOR NOTIFICATION (Forms 801A and 801B). Before filing a request for reimbursement, you must notify the local tax assessor of your intent to claim reimbursement of property tax. **Form 801A** (eligible property claimed for not more than 12 years) and **Form 801B** (eligible property claimed for more than 12 years) are provided for this purpose. You may use your own schedule as a

substitute for Form 801A and Form 801B, as long as it provides all of the information included on the official forms. See **ASSESSOR NOTIFICATION** on page 5.

CONSOLIDATION SCHEDULE. If your business has eligible property in multiple municipalities, complete the consolidation schedule. The consolidation schedule is on the reverse side of Form 800. See **CONSOLIDATION SCHEDULE** on page 5. An electronic spreadsheet version of the consolidation schedule is available to download at www.maine.gov/revenue/tax-return-forms/property-tax.

EXTENSION TO FILE. An extension of time to file through March 2, 2026, may be granted for good cause. A request for extension of time to file must be made in writing, on or before the December 31 due date, to the address under **WHERE DO I FILE?** below or to betr.mrs@maine.gov. The request must include the applicant’s full name, address and federal EIN; the amount of property taxes paid in 2024; the date(s) property taxes were paid in 2024 and the reason an extension is being requested. Extensions may not be granted beyond March 2, 2026.

ROUND TO WHOLE DOLLARS. Round all dollar amounts. Round down to the next lower dollar any amount less than 50 cents. Round up to the next higher dollar any amount 50 cents or greater.

WHERE DO I FILE? Mail your completed application along with the Assessor Notification (Form 801A and/or Form 801B), a copy of your tax bill, and proof of payment to:

Maine Revenue Services
Property Tax Division
P.O. Box 1064
Augusta, ME 04332-1064

AMENDED APPLICATION. An amended application is not necessary for any reason other than if the property tax is reduced or abated after a claim for reimbursement has been filed. An amended application for reimbursement must be filed within 60 days after receipt of the reduction or abatement. If you were assessed supplemental property tax during 2025, this tax may be reimbursed on next year’s application.

Reimbursement of property tax that is subsequently reduced or abated must be repaid to MRS with the amended application. Make your check payable to: Treasurer, State of Maine.

If you fail to file an amended application, including any payment due, within the 60-day period, MRS may issue an assessment for the balance due plus interest and penalties.

Interest accrues from the original reimbursement date to the date of

repayment. The calendar year interest rate is set annually by MRS, in accordance with 36 M.R.S. § 186.

the MRS website at www.maine.gov/revenue/tax-return-forms/property-tax. Forms are also available by calling (207) 624-9404.

The penalty for failure to file an amended application is \$25 or 10% of the amount of the balance due, whichever is greater. The penalty for failure to pay the balance due on time is 1% of the liability for each month the liability is late, up to a maximum of 25%. Penalties are not exclusive.

WHERE DO I GET FORMS? You may download forms from

SPECIFIC INSTRUCTIONS

NOTE: The application form and the consolidation schedule are designed to comply with optical scanning requirements. The spaces indicated in white must be completed carefully with black or blue ink only. Letters and numbers must be entered legibly within the indicated area. Letters must be in uppercase only and aligned on the left; numbers must align on the right. For example:

Business Name	X A V I E R Z F O R R E S T A L I N C
Mailing Address	6 R O C K W O O D D R I V E
5. Original cost of eligible property	1 0 2 9 6 2 5

APPLICATION (FORM 800)

Applicant ID Number and Name. If the applicant is a corporation, partnership, or LLC, enter the federal EIN and business name. If the applicant is a sole proprietor, enter the owner's social security number, name, and address. This should be the same name and ID number used to file other tax forms.

Line 1. Consolidated Application. If you are filing for reimbursement of taxes paid to more than one municipality, check the "YES" box and refer to the consolidation schedule instructions below. If you are filing a claim relating to only one municipality, check the "NO" box.

Line 2. Business Code. Enter the six-digit NAICS code for the type of business for which reimbursement is being requested. The business codes can be found here: www.census.gov/naics/.

Line 3. Municipal Code. Enter the three-digit municipal code for the location of the reimbursement property. The municipal code list is on pages 7 and 8.

Line 4. Check this box if the business receives reimbursement for personal property taxes under a Tax Increment Financing ("TIF") agreement. If the business receives a TIF reimbursement, the reimbursement under the BETR program may be limited. See the instructions for line 9 below.

Lines 5 – 8. In the **Assessed April 1, 2023** column, enter information relating to property taxes paid in 2023 for property taxes assessed on April 1, 2023. In the **Assessed April 1, 2024** column, enter information relating to property taxes paid in 2024 for property taxes assessed on April 1, 2024. For property taxes assessed before 2023 and paid in 2024, attach a schedule, signed by the municipal assessor, showing original cost, assessed value, property tax rate, and requested reimbursement for that eligible property. Include the requested reimbursement on line 9, Total Reimbursement. If the requested reimbursement is for property taxes assessed by more than one municipality, complete the consolidation schedule (see instructions below), then complete lines 5, 6, 8, and 9.

Lines 5a and 5b. Original Cost of Eligible Property. Enter the total original cost of eligible business property from Form 801A, column E and Form 801B, column E, lines 4, 10, 16, 22, 28, and 34.

Lines 6a and 6b. Assessed Value. Enter the total assessed value of eligible business property from column F of Form 801A and Form 801B, line 37.

Lines 7a and 7b. Property Tax Rate. Enter the property tax rate from Section 3 of Forms 801A and 801B. Leave this line blank if you completed a consolidation schedule for property taxes assessed by more than one municipality.

SPECIFIC INSTRUCTIONS, continued

Lines 8a and 8b. Requested Reimbursement. Enter the amount of tax paid in 2024 on eligible business property. Apportion tax payments to eligible assessed tax. For example, if 50% of the 2023 tax bill was paid in 2024, the tax paid for that tax year would be 50% of the assessed tax in Section 3 of Form 801A and Form 801B for Taxes Assessed April 1, 2023.

Line 9. Total Reimbursement. Total of lines 8a and 8b. For property first subject to property tax assessment on or after April 1, 2008 and for property for which BETR reimbursement has previously been paid by the state for at least 12 years, the total of the BETR reimbursement cannot exceed the total property tax assessment less TIF reimbursement on that property for the year for which BETR reimbursement is requested.

Third Party Designee. If you would like MRS to be able to discuss your application with your representative (such as an accountant), complete this section.

Signatures. The applicant must sign and date the application. If someone other than the applicant completed the application, that individual must also sign the application and provide their social security number or federal EIN.

Phone Number. Provide the applicant and preparer telephone numbers in case questions arise regarding the application during processing and review.

CONSOLIDATION SCHEDULE

Complete this schedule if you are claiming reimbursement for property tax that you paid in more than one municipality. You may ignore this schedule if you are making a claim for only one municipality. If it is required, complete this schedule before completing page 1 of the application. The information on this schedule is needed to complete Form 800, page 1. You may submit more than one consolidation schedule page. A separate Form 801A and Form 801B must be completed for each municipality listed on the consolidation schedule.

An Excel spreadsheet version of the consolidation schedule is available to download at: www.maine.gov/revenue/taxes/tax-relief-credits-programs/property-tax-relief-programs/business-equipment-tax-programs.

For each municipality, enter in the 2023 row information relating to property taxes paid in 2024 that were assessed on April 1, 2023. Enter, in the 2024 row, information relating to property taxes paid in 2024 that were assessed on April 1, 2024.

Column A. Municipal Code. Enter the appropriate three-digit municipal code from the table on pages 7 and 8.

Column B. Original Cost. For each municipality, enter the total original cost of the eligible business property for which reimbursement is being requested as shown on the related Forms 801A, column E and 801B, column E.

Column C. Assessed Value. Enter on this line the total assessed value from the completed Assessor Notification (Forms 801A, column F and 801B, column F).

Column D. Property Tax Rate. Enter, in mills, the applicable property tax rate for each municipality.

Column E. Tentative Requested Reimbursement. Enter the amount of tax paid in 2024 on eligible property. Submit proof of the property tax paid (receipt or cancelled check). For example, if 50% of the 2023 tax bill was paid in 2024, the requested reimbursement for that tax year would be 50% of assessed tax in Section 3 of Form 801A and Form 801B for Taxes Assessed April 1, 2023.

Line 1, Page Total. Enter the sum of columns B, C, and E on each consolidation schedule page.

The column B, column C, and column E totals on the consolidation schedule must be separated into their 2023 and 2024 subtotals before entering the amounts on page 1 of Form 800. Enter the 2023 subtotals on lines 5a, 6a, and 8a. Enter the 2024 subtotals on lines 5b, 6b, and 8b. Consolidation schedule applicants should leave lines 7a and 7b blank.

ASSESSOR NOTIFICATION (FORMS 801A and 801B)

Form 800, lines 5a, 5b, 6a, 6b, 8a, and 8b must reflect the combined total from all of the assessor notifications (Forms 801A and 801B) involved.

Form 801A is used for eligible property for reimbursement claims of not more than 12 years. Form 801B is for reimbursement claims of more than 12 years. If requesting reimbursement for property located in more than one municipality, complete separate Forms 801A and 801B for each municipality, and include the totals on the consolidated schedule.

Section 1 and Section 2, columns A through E, are to be completed by the applicant. Include only the items that are eligible for reimbursement. You may use your own schedules as substitutes for Forms 801A and 801B as long as the schedules provide all of the required information. Section 2, column F and Section 3 are to be completed by the local tax assessor.

Section 1. Notice of Intent. On line 1 enter the name of the municipality in which the eligible business property is located, the name of the applicant, and the appropriate municipal code from the table on pages 7 and 8. Enter the name under which you do business at both the local and the state level. If these names are different, enter both names.

Section 2. Schedule for Business Equipment Tax Reimbursement. Enter the location where the property is located. Enter the location that is known to the local assessor. Form 801A is for eligible property for reimbursement claims of not more than 12 years. Form 801B is for eligible property for reimbursement claims of more than 12 years.

Column A. Property Description. Property for which you are claiming reimbursement for the first time must be listed individually. Property for which you have claimed reimbursement in a prior year may be listed by category (machinery & equipment, furniture, other).

Businesses that have previously applied for the BETR program are not required to submit a detailed description of property previously claimed. Detailed property lists are only required for property that has not been previously included in a reimbursement application. For property for which a detailed list is not required, complete Forms 801A and 801B by property categories (machinery & equipment, furniture, other) and by year placed in service.

Column B. State of Origin. Enter, for used property only, the state where property was originally placed in service. See column C instructions below for more information.

Column C. Number of Years Claimed. Form 801A only: Enter the number of years for which you have received reimbursement on this equipment under the BETR program. If you purchased eligible property from a previous Maine owner, add one year for each year the previous owner was reimbursed under BETR for this property. See the chart on right.

Column D. Form 801A (Date Placed in Service): For property listed individually in column A, enter the month and year the property was first placed in service in Maine (whether by you or a previous owner). For property listed by category in column A, enter the original assessment year. The assessment year is the calendar year that includes April 1 following the purchase date.

Column D. Form 801B (Original Assessment Year): Enter the original assessment year. The assessment year is the calendar year that includes April 1 following the purchase date.

Column E. Original Cost. For property listed individually in column A, enter the original cost of the eligible business property. For property listed by category in column A, enter the total original cost for each property category.

Total line. Enter on this line the total of all original cost amounts listed in column E.

Column F. Assessed Value. The local tax assessor will complete this column by entering the assessed value of eligible business property on each line and entering the total assessed value on the total line. The assessed value for property listed on Form 801B is limited to 75% for 13-year property, 70% for 14-year property, 65% for 15-year property, 60% for 16-year property, 55% for 17-year property and 50% for 18-year and higher property.

Section 3. Property Tax Information. The local tax assessor will complete this section by entering the property tax rate, assessed tax, the tax assessment date, signature, municipality name, and date of signing.

NOTE: After the Assessor Notification has been returned to the applicant by the municipal assessor, the applicant must sign it, date it and enter either a social security number or federal EIN.

Forms 801A, 801B Chart		
Original Application Year	Number of Years Claimed Col. C	Form
2025	0	
2024	1	801A
2023	2	801A
2022	3	801A
2021	4	801A
2020	5	801A
2019	6	801A
2018	7	801A
2017	8	801A
2016	9	801A
2015	10	801A
2014	11	801A
2013	12	801A
2012	13	801B
2011	14	801B
2010	15	801B
2009	16	801B
2008	17	801B
2007	18	801B
2006	19	801B

MUNICIPAL CODES

Municipality	Code	Municipality	Code	Municipality	Code	Municipality	Code
ABBOT	101	BURNHAM	167	EAGLE LAKE	233	HERMON.....	297
ACTON	102	BUXTON.....	168	EAST MACHIAS.....	235	HERSEY	298
ADDISON	103	BYRON.....	169	EAST MILLINOCKET	236	HIGHLAND PLT.....	299
ALBION	104	CALAIS.....	170	EASTBROOK	234	HIRAM	300
ALEXANDER.....	105	CAMBRIDGE.....	171	EASTON.....	237	HODGDON.....	301
ALFRED	106	CAMDEN	172	EASTPORT	238	HOLDEN.....	302
ALLAGASH.....	107	CANAAN.....	173	EDDINGTON	239	HOLLIS.....	303
ALNA	108	CANTON	174	EDGECOMB.....	240	HOPE	304
ALTON.....	109	CAPE ELIZABETH	175	EDINBURG.....	241	HOULTON	305
AMHERST.....	110	CARATUNK	176	ELIOT	242	HOWLAND	306
AMITY.....	111	CARIBOU	177	ELLSWORTH.....	244	HUDSON	307
ANDOVER.....	112	CARMEL	178	EMBDEN	245	INDIAN ISLAND	
ANSON.....	113	CARRABASSETT VAL.....	596	ENFIELD	246	PENOBSCOT NATION.....	891
APPLETON	114	CARROLL PLT.....	179	ETNA	247	INDUSTRY	308
ARROWSIC.....	115	CARTHAGE.....	180	EUSTIS.....	248	ISLAND FALLS.....	309
ARUNDEL	116	CASCO.....	182	EXETER	249	ISLE AU HAUT	310
ASHLAND.....	117	CASTINE	183	FAIRFIELD	250	ISLESBORO.....	311
ATHENS	118	CASTLE HILL.....	184	FALMOUTH.....	251	JACKMAN	312
AUBURN	120	CASWELL	185	FARMINGDALE.....	252	JACKSON.....	313
AUGUSTA.....	121	CHAPMAN.....	187	FARMINGTON.....	253	JAY	314
AURORA	122	CHARLESTON	188	FAYETTE	254	JEFFERSON	315
AVON.....	123	CHARLOTTE.....	189	FORT FAIRFIELD.....	255	JONESBORO	316
BAILEYVILLE	124	CHELSEA	190	FORT KENT	256	JONESPORT.....	317
BALDWIN	125	CHERRYFIELD	191	FRANKFORT.....	257	KENDUSKEAG.....	318
BANGOR.....	127	CHESTER	192	FRANKLIN.....	258	KENNEBUNK	319
BAR HARBOR.....	128	CHESTERVILLE.....	193	FREEDOM.....	259	KENNEBUNKPORT	320
BARING PLT.....	593	CHINA.....	194	FREEPORT	260	KINGFIELD.....	321
BATH	130	CLIFTON	195	FRENCHBORO	347	KINGSBURY PLT.....	322
BEALS	131	CLINTON.....	196	FRENCHVILLE.....	261	KITTERY	323
BEAVER COVE	597	COLUMBIA.....	198	FRIENDSHIP	262	KNOX	324
BEDDINGTON.....	132	COLUMBIA FALLS	199	FRYEBURG.....	263	LAGRANGE.....	325
BELFAST.....	133	COOPER	200	GARDINER.....	264	LAKE VIEW PLT.....	326
BELGRADE	134	COPLIN PLT.....	201	GARFIELD PLT.....	265	LAKEVILLE.....	327
BELMONT	135	CORINNA.....	202	GARLAND	266	LAMOINE	328
BENTON.....	137	CORINTH	203	GEORGETOWN.....	267	LEBANON	329
BERWICK.....	138	CORNISH.....	204	GILEAD	268	LEE	330
BETHEL.....	139	CORNVILLE	205	GLENBURN.....	269	LEEDS.....	331
BIDDEFORD	140	CRANBERRY ISLES.....	206	GLENWOOD PLT.....	270	LEVANT.....	332
BINGHAM.....	141	CRAWFORD	207	GORHAM	271	LEWISTON	333
BLAINE.....	142	CRYSTAL	208	GOULDSBORO	272	LIBERTY	334
BLUE HILL.....	144	CUMBERLAND	209	GR LAKE STR PLT.....	275	LIMERICK.....	335
BOOTHBAY.....	145	CUSHING.....	210	GRAND ISLE.....	274	LIMESTONE.....	336
BOOTHBAY HARBOR	146	CUTLER	211	GRAY.....	276	LIMINGTON.....	337
BOWDOIN.....	147	CYR PLANTATION.....	212	GREAT POND	417	LINCOLN	338
BOWDOINHAM.....	148	DALLAS PLANTATION.....	213	GREENBUSH.....	277	LINCOLN PLT.....	339
BOWERBANK	149	DAMARISCOTTA	214	GREENE	278	LINCOLNVILLE	340
BRADFORD	150	DANFORTH.....	215	GREENVILLE.....	280	LINNEUS.....	341
BRADLEY.....	151	DAYTON.....	216	GREENWOOD	281	LISBON	342
BREMEN.....	152	DEBLOIS	217	GUILFORD	282	LITCHFIELD	343
BREWER.....	153	DEDHAM.....	218	HALLOWELL.....	283	LITTLETON	344
BRIDGEWATER	154	DEER ISLE.....	219	HAMLIN	284	LIVERMORE	345
BRIDGTON.....	155	DENMARK.....	220	HAMMOND.....	285	LIVERMORE FALLS.....	346
BRIGHTON PLT.....	156	DENNISTOWN PLT.....	221	HAMPDEN.....	286	LONG ISLAND	455
BRISTOL	157	DENNYSVILLE.....	222	HANCOCK.....	287	LOVELL	348
BROOKLIN	158	DETROIT	223	HANOVER.....	288	LOWELL	349
BROOKS.....	159	DEXTER	224	HARMONY	289	LUBEC.....	350
BROOKSVILLE	160	DIXFIELD	225	HARPSWELL	290	LUDLOW	351
BROWNFIELD.....	161	DIXMONT	226	HARRINGTON	291	LYMAN	352
BROWNVILLE.....	162	DOVER FOXCROFT	227	HARRISON.....	292	MACHIAS	353
BRUNSWICK.....	163	DRESDEN	228	HARTFORD.....	293	MACHIASPORT	354
BUCKFIELD	164	DREW PLT.....	229	HARTLAND	294	MACWAHOC PLT.....	355
BUCKSPORT	165	DURHAM.....	230	HAYNESVILLE	295	MADAWASKA.....	356
BURLINGTON.....	166	DYER BROOK.....	231	HEBRON	296	MADISON.....	357

2025

BUSINESS EQUIPMENT TAX
REIMBURSEMENT APPLICATION

99

Form 800 (page 1)

(for eligible personal property taxes paid in 2024)

1510700

Application must be filed no later than **December 31, 2025.**

If applicant is a corporation, partnership or LLC, enter federal EIN

Business Name:

OR

If applicant is a sole proprietor, enter social security number

First Name:

MI:

Last Name:

Mailing Address:

City/Town:

State:

ZIP Code:

1. Consolidated Application (Is property located in two or more municipalities?)

(If YES, skip lines 3 and 7. Lines 5, 6 and 8 must reflect the total from all municipalities. If NO, complete lines 2-9.)

YES

NO

2. Business Code:

4. Check this box if the business also receives reimbursement for
personal property taxes under a TIF agreement (see instructions)

3. Municipal Code:

(see pages 7 and 8)

Enter the following information for property tax payments made in calendar year 2024 based on the April 1, 2023 and/or April 1, 2024 assessments.
See Instructions.

Assessed April 1, 2023

Assessed April 1, 2024

5. Original Cost of Eligible Property.....5a.

\$

5b.

\$

6. Assessed Value6a.

\$

6b.

\$

7. Property Tax Rate7a.

mills

7b.

mills

8. Requested Reimbursement

(see instructions)8a.

\$

8b.

\$

9. Total Reimbursement. Line 8a plus line 8b

9.

\$

Include taxes paid for eligible property only, taking into account any early payment discounts, but exclusive of any interest, penalties or any other charges. Dated proof of tax payment and a copy of the tax bill must be included with your application. Other limitations apply. See instructions.

Third Party Designee: Check this box if you want to allow another person to discuss this return with Maine Revenue Services

Designee's Name

Phone #

Email

Applicant (or business owner) signature: **DECLARATION(S) UNDER THE PENALTIES OF PERJURY.** I declare that I have examined this return/report/document and (if applicable) accompanying schedules and statements and to the best of my knowledge and belief they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Applicant (or business officer) Signature and date

Phone #

Email

Preparer

Signature

Phone #

Date

Preparer ID Number

MAIL TO: MAINE REVENUE SERVICES
P.O. BOX 1064
AUGUSTA, ME 04332-1064

REVISED 7/2025

2025

CONSOLIDATION SCHEDULE

(Use whole dollars)



99

Form 800 (page 2)

1510701

A Municipal Code		B Original Cost	C Assessed Value	D Property Tax Rate (mills)	E Tentative Requested Reimbursement
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []
[]	2023	\$ []	\$ []	[] . []	\$ []
	2024	\$ []	\$ []	[] . []	\$ []

Column B

Column C

Column E

1. PAGE TOTAL \$

For those with property in ten or more municipalities, an Excel spreadsheet version of the consolidation schedule may be downloaded from the MRS website at: www.maine.gov/revenue/taxes/tax-relief-credits-programs/property-tax-relief-programs/business-equipment-tax-programs Please return completed spreadsheet electronically to betr.mrs@maine.gov.

ASSESSOR NOTIFICATION
PROPERTY CLAIMED FOR 12 OR FEWER YEARS

SEE INSTRUCTIONS

Municipal Code: _____
(see pages 7 and 8)

SECTION 1. Notice of Intent.

1. MUNICIPALITY OF _____

Dear Assessor: Pursuant to 36 M.R.S. § 6653, you are hereby notified that :

_____ (applicant name)
intends to file an application with Maine Revenue Services for reimbursement of property tax associated with eligible
business property first placed in service in Maine after April 1, 1995 for taxes assessed April 1, _____.

SECTION 2. Schedule for Business Equipment Tax Reimbursement. (Attach additional sheets if needed)

The eligible business property is situated at (street address, map & lot, account #, etc.):

Valuation components determined by the local tax assessor establishes an essential basis for taxpayers wanting to participate in this program. I am requesting that you provide information pertaining to the assessed value for eligible business property in column F and relevant assessment information in Section 3. Please enter the necessary information sorted by "Number of Years Claimed" and return this schedule to me within 60 days or make this information available to me when the tax bills are issued, whichever occurs later. I believe the following property constitutes business property which is eligible for reimbursement by the State of Maine.

A. Property Description	B. State of Origin (if acquired used)	C.* Number of Years Claimed	D. Date Placed in Service (month/year)	E. Original Cost	F. Assessed Value (To be completed by local tax assessor.)
1. _____	_____	_____	____/____	\$ _____	\$ _____
2. _____	_____	_____	____/____	_____	_____
3. _____	_____	_____	____/____	_____	_____
4. _____	_____	_____	____/____	_____	_____
5. _____	_____	_____	____/____	_____	_____
6. _____	_____	_____	____/____	_____	_____
7. _____	_____	_____	____/____	_____	_____
8. _____	_____	_____	____/____	_____	_____
9. _____	_____	_____	____/____	_____	_____
10. _____	_____	_____	____/____	_____	_____
11. _____	_____	_____	____/____	_____	_____
12. _____	_____	_____	____/____	_____	_____
13. _____	_____	_____	____/____	_____	_____
14. _____	_____	_____	____/____	_____	_____
15. _____	_____	_____	____/____	_____	_____

* Form 801A is for property claimed 12 or fewer years. See instructions.

ASSESSOR NOTIFICATION
PROPERTY CLAIMED FOR 12 OR FEWER YEARS

A. Property Description	B. State of Origin (if acquired used)	C.* Number of Years Claimed	D. Date Placed in Service (month/year)	E. Original Cost	F. Assessed Value (To be completed by local tax assessor.)
16. _____	_____	_____	____/____/____	\$ _____	\$ _____
17. _____	_____	_____	____/____/____	_____	_____
18. _____	_____	_____	____/____/____	_____	_____
19. _____	_____	_____	____/____/____	_____	_____
20. _____	_____	_____	____/____/____	_____	_____
21. _____	_____	_____	____/____/____	_____	_____
22. _____	_____	_____	____/____/____	_____	_____
23. _____	_____	_____	____/____/____	_____	_____
24. _____	_____	_____	____/____/____	_____	_____
25. _____	_____	_____	____/____/____	_____	_____
26. _____	_____	_____	____/____/____	_____	_____
27. _____	_____	_____	____/____/____	_____	_____
28. _____	_____	_____	____/____/____	_____	_____
29. _____	_____	_____	____/____/____	_____	_____
30. _____	_____	_____	____/____/____	_____	_____
31. _____	_____	_____	____/____/____	_____	_____
32. _____	_____	_____	____/____/____	_____	_____
33. _____	_____	_____	____/____/____	_____	_____
34. _____	_____	_____	____/____/____	_____	_____
35. _____	_____	_____	____/____/____	_____	_____
36. _____	_____	_____	____/____/____	_____	_____
TOTALS				\$ _____	\$ _____

(Attach additional sheets if needed)

* **Form 801A is for property claimed 12 or fewer years. See instructions.**

SECTION 3. Property Tax Information (To be completed by local tax assessor.)

Property Tax Rate _____ Assessed Tax \$ _____ For Taxes Assessed April 1, _____

Assessor Signature _____ Municipality Name _____ Date _____

Applicant (or agent) Signature _____

Social Security Number or Federal EIN (see note, page 5) _____

Date _____

ASSESSOR NOTIFICATION
PROPERTY CLAIMED FOR MORE THAN 12 YEARS

SEE INSTRUCTIONS

Municipal Code: _____
(see pages 7 and 8)

SECTION 1. Notice of Intent.

1. MUNICIPALITY OF _____

Dear Assessor: Pursuant to 36 M.R.S. § 6653, you are hereby notified that :

_____ (applicant name)

intends to file an application with Maine Revenue Services for reimbursement of property tax associated with eligible business property first placed in service in Maine after April 1, 1995 for taxes assessed April 1, _____.

SECTION 2. Schedule for Business Equipment Tax Reimbursement. (Attach additional sheets if needed)

The eligible business property is situated at (street address, map & lot, account #, etc.):

Valuation components determined by the local tax assessors establish an essential basis for taxpayers wanting to participate in this program. I am requesting that you provide information pertaining to the assessed value for eligible business property in Column F and relevant assessment information in Section 3. Please enter the necessary information sorted by "Number of Years Claimed" and return this schedule to me within 60 days or make this information available to me when the tax bills are issued, whichever occurs later. I believe the following property constitutes eligible business property which is eligible for reimbursement by the State of Maine.

A. Property Description Category	B. State of Origin (if acquired used)	C.* Number of Years Claimed	D. Original Assessment Year(s)	E. Original Cost	F. Assessed Value (To be completed by local tax assessor.)
1. Machinery & Equipment	_____	13	_____	\$ _____	\$ _____
2. Furniture	_____	13	_____	_____	_____
3. Other.....	_____	13	_____	_____	_____
4. TOTALS (for columns E & F, add lines 1, 2, and 3).....				_____	_____
5. Value Limitation75
6. Allowable Assessed Value (in column F, multiply line 4 by line 5)					_____
7. Machinery & Equipment	_____	14	_____	_____	_____
8. Furniture	_____	14	_____	_____	_____
9. Other.....	_____	14	_____	_____	_____
10. TOTALS (for columns E & F, add lines 7, 8 and 9).....				_____	_____
11. Value Limitation70
12. Allowable Assessed Value (in column F, multiply line 10 by line 11)					_____
13. Machinery & Equipment	_____	15	_____	_____	_____
14. Furniture	_____	15	_____	_____	_____
15. Other	_____	15	_____	_____	_____
16. TOTALS (for columns E & F, add lines 13, 14 and 15)				_____	_____
17. Value Limitation65
18. Allowable Assessed Value (in column F, multiply line 16 by line 17)					_____

* Form 801B is for property claimed more than 12 years. See instructions for this form.

Continued on next page ➡

ASSESSOR NOTIFICATION
PROPERTY CLAIMED FOR MORE THAN 12 YEARS

A. Property Description Category	B. State of Origin (if acquired used)	C.* Number of Years Claimed	D. Original Assessment Year(s)	E. Original Cost	F. Assessed Value (To be completed by local tax assessor.)
19. Machinery & Equipment	_____	16	_____	_____	_____
20. Furniture	_____	16	_____	_____	_____
21. Other	_____	16	_____	_____	_____
22. TOTALS (for columns E & F, add lines 19, 20 and 21)					_____
23. Value Limitation60
24. Allowable Assessed Value (in column F, multiply line 22 by line 23)					_____
<hr/>					
25. Machinery & Equipment.....	_____	17	_____	_____	_____
26. Furniture	_____	17	_____	_____	_____
27. Other	_____	17	_____	_____	_____
28. TOTALS (for columns E & F, add lines 25, 26 and 27)					_____
29. Value Limitation55
30. Allowable Assessed Value (in column F, multiply line 28 by line 29)					_____
<hr/>					
31. Machinery & Equipment	_____	18+	_____	_____	_____
32. Furniture	_____	18+	_____	_____	_____
33. Other	_____	18+	_____	_____	_____
34. TOTALS (for columns E & F, add lines 31, 32, and 33)					_____
35. Value Limitation50
36. Allowable Assessed Value (in column F, multiply line 34 by line 35)					_____
37. Total Allowable Assessed Value (in column F, add lines 6, 12,18, 24, 30, and 36)					\$ _____

SECTION 3. Property Tax Information (To be completed by local tax assessor.)

Property Tax Rate _____ Assessed Tax \$ _____ For Taxes Assessed April 1, _____

Assessor Signature _____ Municipality Name _____ Date _____

Applicant (or agent) Signature _____

Social Security Number or Federal EIN (see note, page 5) _____

Date _____