



SANDOVAL COUNTY COURTHOUSE  
 P.O. BOX 40 • BERNALILLO, NEW MEXICO 87004  
 (505) 867-7562 • FAX (505) 867-7596

OFFICE OF THE SANDOVAL COUNTY ASSESSOR

Sandoval County Assessor

**ANNUAL LIVESTOCK OWNER'S REPORT**

All livestock located in Sandoval County on January 1 of the tax year shall be valued for property taxation purposes as of January 1. Please complete and return this form to the Sandoval County Assessor's Office by the last day of February. (7-36-21 NMSA)

TAX YEAR \_\_\_\_\_

OWNER # \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_

1. OWNER NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Has livestock been sold? YES  NO  If yes, please provide the Assessor's Office with a copy of bill of sale.

Type	Number of Livestock		Length of time in county	Type	Number of Livestock		Length of time in county
	Commercial	Registered			Commercial	Registered	
<b>"C" CATTLE</b>				<b>"G" GOATS</b>			
Bulls				Angora - Bucks			
Cows				Angora - Others			
Heifers (Replacement)				Common - Bucks			
Heifer Calves				Common - Others			
Steer Calves				Milk Goats			
Steer Yearlings & Over				Goats - Others			
<b>"D" DAIRY CATTLE</b>				<b>"H" HORSES</b>			
Bulls				Horses			
Cows				Llamas			
Heifers				<b>"P" SWINE</b>			
Calves				Boars			
Calf - Operation Only 0 - 340 lbs.				Breeding Sows			
<b>"S" SHEEP</b>				Hogs over 1 yr.			
Rams				Hogs under 1 yr.			
Ewes over 2 yrs.				<b>"B" BISON</b>			
Ewes 1 to 2 yrs.				Cows 3 +			
Sheep under 1 yr.				Heifers 12 - 35 months			
Wethers				Bull Calves			
<b>"R" RATITES (Ostriches or Emues)</b>				Bull			
Breeding Females							
Breeding Males							
Slaughter Animals							

Are the above-listed livestock being grazed on land owned by you? YES  NO

If "NO," please indicate below owner and provide name and address(es) of private land owner(s).

BLM  Stated Leased Land  USFS  Private

PRIVATE OWNER NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

I HEREBY SWEAR OR AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

X  
 SIGNATURE OF OWNER OF LIVESTOCK (OR AGENT) \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

APPROVAL: YES \_\_\_\_\_ NO \_\_\_\_\_ Date Received: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

FILLED  
 ENTERED  
 VERIFIED  
 CARD CHANGED

BY	DATE		
	MO.	DAY	YR.