

FOR OFFICE USE ONLY

Date (m/d/y): _____ Tax roll no.: _____ *Request for information*

Legal/rural address: _____

REQUEST FOR INFORMATION: RECREATIONAL PROPERTY DETAILS

The Assessment & Taxation department is required by the Government of Alberta to assess all residential property at market value. Recreational property is considered residential property and must be assessed as such. This is done by comparing the characteristics of your cabin to the characteristics of cabins that have recently sold. To confirm that your assessment is fair in comparison to that of your neighbours, the department inspects a percentage of properties each year, as well as all properties that have had a name change on Title for any reason and any new construction.

While at your property(s), the Assessor conducts an exterior inspection and takes digital photos of your cabin. The Assessor may have also measured your cabin or the buildings on the property. If your property had a name change on Title, the Assessor would have also documented any improvements that are on the property. To guarantee the assessment information on your cabin is correct, and that your assessed value is fair, please complete and return this questionnaire to the County. If you have any questions, please contact the Assessment & Taxation department.

CONTACT INFORMATION

Full name of Owner: _____

Mailing address: _____

City: _____ Province: _____ Postal code: _____

Tel: _____ Cel: _____ Email: _____

QUESTIONNAIRE

1. What is the square footage of your cabin?: _____, and when was it built? Year: _____

2. What type of construction does the foundation of the cabin have?:

- | | | | |
|----------|--------------|------------------|--------------------------|
| Concrete | Cinder block | Wood | Insulated concrete forms |
| Dirt | On piles | Crawl space only | |

3. What type of flooring do you have in the cabin?: _____

4. What type of cabinets and countertops do you have in the cabin?: _____

5. How many linear feet of cabinets are in the cabin?:

Wash/bathrooms: _____, Kitchen lower cabinets: _____, Upper cabinets: _____

6. What type of siding do you have on the cabin?: _____

7. What type of roofing do you have on the cabin?: _____

8. What type of heating does the cabin have?: _____

9. Is the cabin insulated?: yes no

10. Does the cabin have any of the following?: Central air conditioning In-floor heat Hot tub Sauna

11. If applicable, what type of fireplace does the cabin have and where?: _____

12. Please indicate which services are on the property:

- | | | | |
|-----------------|-------------|------------|---|
| Water well/line | Solar power | ATCO power | Sewer holding tank (must be truck away) |
| Water cistern | Natural gas | Propane | Sewer tank and field (not hauled away) |

13. How many washrooms/bathrooms are in the cabin?: _____. Each washroom/bathroom has a toilet, sink, and which of the following fixtures? Please indicate the number on each floor that have these fixtures.

TAX ROLL NO.: _____

FIXTURE	MAIN FLOOR	UPPER FLOOR	BASEMENT
Tub with shower combination			
Jetted tub with shower combination			
Second sink			
Shower stall			
Jetted tub			
Soaker tub			
Toilet and sink only			

What type of interior finish does the cabin have?:

Painted drywall Wood paneling Bare studs Tung and groove wood finishing Other: _____

Please complete the following chart to help us determine how much of the cabin has been updated.

ITEM	ORIGINAL		% UPDATED	YEAR UPDATED	ITEM	ORIGINAL		% UPDATED	YEAR UPDATED
	yes	no				yes	no		
Roofing	yes	no			Countertops	yes	no		
Siding	yes	no			Bathroom cabinets	yes	no		
Windows	yes	no			Bathroom fixtures	yes	no		
Exterior doors	yes	no			Interior doors	yes	no		
Flooring	yes	no			Heating	yes	no		
Kitchen cabinets	yes	no							

Please indicate the size of any additions to the cabin?: _____, and year built: _____.

Are any of the following not complete in your home? If so, please indicate the percentage that is complete.

ITEM	% COMPLETE	ITEM	% COMPLETE
Interior finishings		Countertops	
Painting		Trim	
Cabinets		Bathroom	

Does the cabin have any issues that you feel would affect its value? If so, please explain:

Have you purchased, sold, or listed the property within the last year? If so, please explain and indicate the price:

All the information provided is true and accurate to the best of my knowledge.

Date (m/d/y): _____

Name of Owner: _____ Signature: _____

This personal information is being collected in accordance with section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act*. This information will form part of a file that is publicly available on request. If you have any questions about the collection, use or disclosure of this personal information, please contact Lac Ste. Anne County FOIP Coordinator at the address below.