

**FOR OFFICE USE ONLY**

Date (m/d/y): \_\_\_\_\_ Tax roll no.: \_\_\_\_\_

*Request for information*

Legal/rural address: \_\_\_\_\_

**REQUEST FOR INFORMATION: RESIDENTIAL PROPERTY INFORMATION**

The Assessment & Taxation department is required to assess properties at their market value. This is done by comparing the characteristics of your home to the characteristics of homes that have recently sold. To confirm that your assessment is fair in comparison to that of your neighbours, the department inspects a percentage of residences each year, as well as all residences that have had a name change on Title for any reason and any new construction.

While at your property, the Assessor does an Exterior Inspection and takes digital photos of your home. The Assessor may have also measured your home or the buildings on the property. If your property had a name change on Title, the Assessor would have also documented all the improvements that are on the property. Please take the time to complete this questionnaire to help us determine that the assessment information on your home is correct, and that your assessed value is fair. 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 home?: \_\_\_\_\_, and in what year was it built?: \_\_\_\_\_

2. What is the square footage of the basement?: \_\_\_\_\_

3. What type of construction does the basement/foundation have?:

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

4. What type of flooring do you have in the home?: \_\_\_\_\_

5. What type of cabinets and countertops do you have in the home?: \_\_\_\_\_

6. What type of siding do you have on the home?: \_\_\_\_\_

7. What type of roofing do you have on the home?: \_\_\_\_\_

8. What type of heating does the home have?: Forced air Hot water Other \_\_\_\_\_

9. Does the home have any of the following? Please select all that apply:

- |                          |                     |                  |              |
|--------------------------|---------------------|------------------|--------------|
| Central air conditioning | Second kitchen area | Sink by the door | Outdoor pool |
| Separate basement entry  | Laundry sink        | In-floor heat    | Indoor pool  |
| Sauna                    | Hot tub             | Bar sink         |              |

10. 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)  |

11. If applicable, what type of fireplace does the home have and where?: \_\_\_\_\_

12. How many washrooms/bathrooms are in the home?: \_\_\_\_\_. Each washroom/bathroom has a toilet, sink, and which of the following fixtures? Indicate the number of washrooms/bathrooms on each floor that have these fixtures.

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 percentage of the basement has been developed into a living area?: \_\_\_\_\_. Indicate the number and type of rooms developed: \_\_\_\_\_.

Complete the following chart to determine how much of the home 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 home?: \_\_\_\_\_, and year built: \_\_\_\_\_.

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

ITEM	% COMPLETE	ITEM	% COMPLETE
Trim: main floor and upper		Doors hung: basement	
Trim: basement		Basement bathroom	
Painting: main floor and upper		Basement dry-walled and ready for paint	
Painting: basement		Basement flooring	
Doors hung: main floor and upper		Basement ceiling	

Does the home 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.