

TOWN OF MENDON  
ASSESSING DEPARTMENT  
#508-473-2738

INFORMATION REQUISITION  
**F.Y.**

Date Sent \_\_\_\_\_

Date Submitted \_\_\_\_\_

**RESIDENTIAL PROPERTY - 1, 2, 3 FAMILY, CONDOMINIUM**

ASSESSED  
OWNER \_\_\_\_\_  
ASSESSED  
LOCATION \_\_\_\_\_

MAP \_\_\_\_\_ LOT \_\_\_\_\_ BILL NO. \_\_\_\_\_ ASSESSED VALUE \_\_\_\_\_

**GENERAL INFORMATION**

This information requisition form is issued pursuant to the authority of the assessors under M.G.L. Ch. 59, S. 61A. Complete this form and return it to the Assessors Office, Town Hall, Mendon, MA 01756- on or before 30 days after receipt of the form in order to preserve your rights. **FAILURE TO SUBMIT ALL REQUESTED INFORMATION WITHIN 30 DAYS COULD CAUSE DENIAL OF THE ABATEMENT APPLICATION.** Complete this form by providing all information requested. Type or print clearly with ballpoint pen.

**PART ONE: GROUNDS FOR COMPLAINT:** Complete all sections which apply to your abatement application.

OVERVALUATION: claims are based on 1 of 2 reasons:

- A) based on **SALES MARKET ACTIVITIES** B) based on **ASSESSED VALUES OF SIMILAR PROPERTIES**

The applicant's opinion of value is \$ \_\_\_\_\_ based on: \_\_\_\_\_

- A) If your claim is based on **SALES MARKET ACTIVITIES** then fill in the following:  
(Use properties with very similar characteristics to your own.)

	MAP/LOT	ADDRESS	DATE OF SALE	PRICE
1)				
2)				
3)				

Use additional sheets as necessary.

- B) If your claim is based on **ASSESSED VALUES OF SIMILAR PROPERTIES** then fill in the following:  
(Use properties with very similar characteristics to your own.)

	MAP/LOT	ADDRESS	ASSESSED VALUES		TOTAL
			BUILDING	LAND	
1)					
2)					
3)					

Use Additional sheets as necessary.

**PURCHASE INFORMATION:** If your property was purchased within the past two years:

DATE OF PURCHASE _____	TOTAL PURCHASE PRICE _____
DOWN PAYMENT _____	FIRST MORTGAGE TERM (YRS) _____
INTEREST RATE (%) _____	ANY SPECIAL FINANCING? (Explain) _____
ANY NON-REAL ESTATE ITEMS INCLUDED IN THE SALE? _____	IF YES LIST _____

**\*\* YOU MUST ALSO COMPLETE THE REVERSE SIDE OF THIS FORM \*\***

I certify under pains of perjury that the information supplied in this requisition is true and correct.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
IF SIGNED BY A REPRESENTATIVE OF THE TAXPAYER, ATTACH COPY OF THE WRITTEN AUTHORIZATION SIGNED BY THE TAXPAYER.

## PART TWO: PHYSICAL DESCRIPTION

Please indicate the NUMBER of each type of room in your home. INCLUDE any rooms intended for regular use in finished basement and finished attic areas.

- ☐ Bathrooms w/ 4 fixtures (A bathtub with a shower in it counts as one fixture)  
☐ Bathrooms w/ 3 fixtures  
☐ Bathrooms w/ 2 fixtures  
DO NOT include bathrooms in total room counts.

- ☐ Bedrooms  
☐ Kitchens  
☐ Dining Area (not formal, not part of kitchen)  
☐ Living Rooms

- ☐ Family Room (not part of living room)  
☐ Formal Dining Room (not dining area, dinette, or breakfast nook)  
☐ Large Foyer (over 70 square feet)  
☐ Den  
☐ Laundry Room  
☐ Office  
☐ Study  
☐ Exercise Room  
☐ Library

- ☐ Recreation Room  
☐ Sun Room  
☐ Apartment - In Law  
☐ Apartment - Rented  
☐ Other  
☐ Other

TOTAL ROOM COUNT (DO NOT include bathrooms - DO include rooms in finished attics & basements)

### COUNTS of Interior Plumbing Fixtures

- ☐ Bathtubs Standard \_\_\_\_\_ Jacuzzi type  
☐ Shower Stalls (Separate - Not in bathtub)  
☐ Toilets  
☐ Sinks (Bath and Kitchen)  
☐ Water hookups indoors (Laundry Supply, etc)  
☐ Hot Tub (indoors or outdoors) \_\_\_\_\_ size

### Please indicate QUANTITY of each

- ☐ # of bedrooms adjoining a bathroom or sitting room  
☐ # of wood burning masonry fireplaces (working)  
☐ # of rooms with Hardwood, Stone, Ceramic Tiles or Marble floors  
☐ # of rooms with stained or varnished woodwork  
☐ # of exterior walls with 50% or more brick or stone  
☐ # of bathrooms with ceramic tile

### WALL MATERIAL (Predominant)

- ☐ Drywall  
☐ Plaster  
☐ Paneling (4x 8 sheets)  
☐ Pine  
☐ Plaster/antique type panels (not 4 x 8 sheets)  
☐ Unfinished  
☐ Other \_\_\_\_\_

### FLOOR MATERIAL (Predominant)

- ☐ W/W Carpeting  
☐ Pine/Fir boards  
☐ Hardwood  
☐ Wide Boards (Antique)  
☐ Linoleum/Vinyl Tile  
☐ Ceramic Tile  
☐ Concrete  
☐ Stone  
☐ Other \_\_\_\_\_

### SWIMMING POOLS

- ☐ Above Ground  
☐ In Ground  
☐ Pool Material  
☐ Liner Material  
☐ Pool Size  
☐ Deck Area  
☐ Pool Patio Area  
☐ Other \_\_\_\_\_  
☐ Other \_\_\_\_\_

### HEATING SYSTEM

- ☐ Forced Hot Air (No Air-conditioning)  
☐ Floor Furnace  
☐ Wall Furnace  
☐ Gravity Furnace (Includes wood stoves)  
☐ Floor Radiant (Hot Water)  
☐ Ceiling Radiant (Hot Water)  
☐ Electric Baseboard  
☐ Baseboard Hot Water  
☐ Radiators Hot Water/Steam  
☐ Central Air Conditioning (not window units)  
☐ No Heat  
☐ Heat Pump  
☐ Solar

### TYPE OF FOUNDATION / BASEMENT

- ☐ Full Basement Cement walls \_\_\_\_\_ Check here if dirt floor  
☐ Crawl Space only (Cement walls)  
☐ Slab Foundation only  
☐ Post / Piers only  
☐ Outside basement entrance  
☐ Inside basement entrance

☐ % if any, of BASEMENT with FINISHED rooms  
(family room, recreation room, bed rooms, etc.)

☐ % if any, of ATTIC with FINISHED rooms

\_\_\_\_\_ Heated \_\_\_\_\_ Not Heated

### HEATING FUEL USED

- ☐ Oil  
☐ Gas  
☐ Electric  
☐ Solar Assisted

### TYPE OF WINDOWS

- ☐ Thermal Pane  
☐ Single Pane  
☐ Storm Windows

### INSULATION

- ☐ Well Insulated  
☐ Poorly Insulated  
☐ No Insulation

### GENERAL CONDITION

- Foundation  
Roofing  
Siding  
Windows  
Floors  
Walls  
Ceilings  
Heating System  
Electrical System  
Plumbing System

GOOD AVG. FAIR POOR

GOOD	AVG.	FAIR	POOR

## PART THREE: RENTAL INFORMATION

Fill in if you rent any portion of the property.

Number of Rooms      Tenant Name      Monthly Rent      Furnished or Unfurnished      Months Vacant

PLEASE USE ADDITIONAL SHEETS AS NECESSARY FOR COMMENTS THAT AFFECT THE FAIR MARKET VALUE OF YOUR PROPERTY