

Board of Assessors
1146 Route 28
South Yarmouth, MA 02664
Town of Yarmouth, MA Reval 17
PID: «REM_PID»



September 4, 2015

«Grantee»
«Co_grantees_Name»
«Mailing_Address»
«Mailing_address_2»
«City», «ST» «Zip»

TOWN OF YARMOUTH
ASSESSOR'S OFFICE
1146 Route 28
South Yarmouth, MA 02664
Tel. (508) 398-2231, ext. 1222

Dear Property Owner:

A State-Mandated Property Revaluation Program is now being conducted in our community, by Vision Government Solutions, in order to establish current and equitable values for tax purposes. Questionnaires, like the one enclosed, have been mailed to owners of commercial, industrial and apartment properties.

Completing the enclosed form will help us determine the economic conditions within the town that will become one of the bases for the calculation of commercial values. **Please note that we are seeking information regarding the income and expense attributable to the rental or leasing of the real estate only**, during the calendar years 2014 and 2015. Exceptions to this are Nursing Homes, Assisted Living Facilities and Motels where annual income from the operation is required. If the entire property is owner occupied, please note that it is "owner occupied" on the front of the questionnaire and provide as much annual expense information, remodeling data or other data as possible. **Additional forms may be obtained on the Town's website, www.yarmouth.ma.us.**

The information you furnish this office will be held in strict confidence and is **not** a public record. Failure to respond will require the Revaluation Company to estimate these figures. Your cooperation in this matter is imperative to guarantee equitable assessments. **Please return the questionnaire by May 2, 2016 to Assessor's Office, 1146 Route 28, South Yarmouth, MA 02664.**

If you have any questions regarding this form, please call the Director of Assessing at 508-398-2231, ext. 1225.

Sincerely,

Andy Machado
Director of Assessing

INSTRUCTIONS FOR COMLETING INCOME AND EXPENSE QUESTIONNAIRE

PROPERTY DATA

Identify if property is known by a particular name. Identify gross building area; net leasable area (gross area less owner occupied space); and if any space is owner occupied. Indicate total number of rental units and year built of structure if known.

INCOME DATA

Indicate gross income per occupancy - as if 100% occupied. Indicate dollar amount due to vacancy loss or bad debt collection. Indicate any forms of additional income due to overages or expense reimbursements. Note that income data may be supplied for the most recent two year calendar period or fiscal years where the information is available. Please change the year in the column heading.

EXPENSES

Supply all operating expenses for the entire property. Expenses that are allowable are those necessary to the operation of the real estate and not the business. Prorate any expenses which may be for a period of time longer than one year.

ANNUAL RENTAL DATA

This section is to itemize rental income per tenant. This section does not pertain to apartments, motels, nursing homes or assisted living facilities. Indicate information for tenants with leases or at-will situations. Additional sheets may be provided to expand upon this section. Actual lease agreements or lease summary printouts may be supplied in lieu of filling out this section.

MARKET DATA

Indicate sale data only if the property was acquired since January 1, 2013. If the sale included other considerations, such as inventory, equipment, goodwill, licenses, etc., please note in this section.

COST DATA

Provide data in this section only if work was performed since January 1, 2013. Work would include new construction; additions to existing construction or renovations to existing space.

APARTMENT BUILDINGS/MOTELS/NURSING HOMES/ASSISTED LIVING

Supply income data in this section segregated by unit type. Indicate number and type of unit(s).

EXPENSE RESPONSIBILITIES

Place an 'x' or check mark to indicate which expenses are paid by the landlord and those paid by the tenant.