

CITY OF ANYTOWN, USA
ASSESSOR'S OFFICE

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

August 29, XXXX

Property Location: «Street_Number_Index» «Street_Name»
Parcel ID: «AV_PID»

The City of _____ is continuing the revaluation of all property for _____, XXXX. By state regulation the period from _____ XXXX through _____ XXXX is the sales study period for this revaluation. It is necessary that we have as much information as we can obtain about property transfers during that period. We ask that you assist us in this effort by completing the following questionnaire and returning it to: Assessors Office, City Hall, _____. Thank you for your assistance in this matter.

1. What was the total sale price? \$ _____
2. Type of Property: 1 Family _____ 4 Family _____ Apartment _____ How many units _____
 2 Family _____ 5 Family _____ Commercial/Industrial _____
 3 Family _____ 6 Family _____ Other Use, describe Use _____
3. Did the sale price include any special items or personal property? Yes _____ No _____
If yes, Please explain: _____

4. Were there any special terms in the sale? (assumed payments, etc.) Yes _____ No _____
If yes, Please explain: _____

5. Was this a sale between relatives? Yes _____ No _____
6. Was this a sale between related businesses? Yes _____ No _____
7. Was it a sale of a foreclosed property? Yes _____ No _____
8. Was it a bankruptcy sale? Yes _____ No _____
9. Was it an auction sale? Yes _____ No _____
10. Was it an estate sale? Yes _____ No _____
11. Was the sale influenced by any unusual circumstances? Yes _____ No _____
If yes, please explain: _____

12. Do you consider the total sale price listed above to be the full value of this property as of the date of sale of this property? Yes _____ No _____
If no, please explain: _____

13. What was the condition of the property at the time of sale? _____

14. Has any work (improvements or removals) been done since the date of sale? Yes _____ No _____
If yes, please explain: _____

Signature of the person who answered this questionnaire: _____

Please print name of the person who signed this questionnaire: _____

Date: _____