

HANCOCK COUNTY RESIDENTIAL DATA FORM

Circle the most correct answer. Where a written response is required, please print plainly.

1. Property in the name of (from tax bill) _____
2. Property address _____
3. Taxing District _____ Parcel # _____ (from tax bill)
4. When was the property purchased? Month _____ Year _____ Amount \$ _____
 Were any of the buildings on the property erected after you purchased? YES NO
 If yes, describe briefly, state year erected and cost.
 (Example: Dwelling -2004 - \$155,000 Garage - 2005 - \$14,000) _____
5. Were any of the buildings on the property significantly altered after you purchased the property? YES NO
 If yes, briefly state what was altered, the year and the cost.
 (If NO, proceed to question #6)

DWELLING	REMODELING -	MODERNIZATIONS -	SIGNIFICANT REPAIRS AND ADDITIONS -	
(Example: Exterior - vinyl siding & new windows.		YEAR 2001		COST \$10,000
Exterior	_____	_____	YEAR	COST
Interior	_____	_____	YEAR	COST
Additions	_____	_____	YEAR	COST
Bathrooms	_____	_____	YEAR	COST
Plumbing	_____	_____	YEAR	COST
Elect., Htg, Air Cond.	_____	_____	YEAR	COST
ALTERATIONS TO OTHER BUILDINGS				
Building	Alteration	_____	YEAR	COST
Building	Alteration	_____	YEAR	COST

DWELLING DATA

6. Year erected. House _____ Garage _____ Other improvements and year erected _____
7. Story Height (Circle) 1 1 ½ 2 2 ½ 3 3 ½
8. Living Accommodations: Total # Rooms (Exclude bathrooms) _____ Bedrooms _____
 Den or Family Rooms _____ Tub/Shower Baths _____ Half Bath _____
 Other Plumbing Fixtures _____ Please describe _____
9. Basement type: (Circle) SLAB CRAWL PARTIAL FULL
 If partial, what is size? _____ ft x _____ ft, or _____ sq. ft.
10. Basement Finish: Is any part of the basement finished? (Circle) YES NO
 If YES, what is size? _____ ft x _____ ft, or _____ sq. ft.
11. Attic: (circle) NONE UNFINISHED FINISHED Number of attic rooms? _____
 Is there a permanent stairway? YES NO A permanent sub-floor? YES NO
12. Heating: (Circle) NONE OR SPACE HEATERS CENTRAL OR WHOLE HOUSE SYSTEM
 Heating Fuel: (Circle) GAS ELECTRIC OIL COAL SOLAR
 Heating System: (Circle) WARM AIR ELECTRIC (BASEBOARD OR RADIANT) HOT WATER
 STEAM SOLAR
13. Central Air Conditioning? (Circle) YES NO
14. Are there any built-in fireplaces? (Circle) YES NO
 If yes, How many wood? _____ How many gas? _____
15. What is your opinion of the dwelling's INTERIOR condition RELATIVE to its EXTERIOR condition? (Circle)
 BETTER APPROXIMATELY THE SAME POORER
16. Please indicate other pertinent data. _____

DATE _____ SIGNATURE _____ PHONE _____

ADDRESS (IF DIFFERENT THAN ABOVE) _____

PLEASE ATTACH THIS SHEET TO THE BOARD OF REVISION APPEAL FORM