



MANCHESTER-BY-THE-SEA

BOARD OF ASSESSORS • TOWN HALL
Manchester-by-the-Sea, Massachusetts 01944-1399
Telephone (978) 526-2010 FAX (978) 525-6433
www.manchester.ma.us

DATE REQUESTED: _____

INFORMATIONAL REQUEST FOR FISCAL YEAR 2025
REAL PROPERTY-1, 2,3 FAMILY, CONDOMINIUM

PROPERTY IDENTIFICATION:
Assessed Owner: _____
Assessed Location: _____
Contact person: _____
Phone Number: _____
Mailing Address, City, State, Zip: _____

GENERAL INFORMATION:
This information requisition form is issued pursuant to the authority of the assessors under M.G.L. Ch. 59, section 61A.
COMPLETE THIS FORM AND RETURN IT TO THE MANCHESTER BOARD OF ASSESSORS, 10 CENTRAL ST, MANCHESTER, MA 01944 WITHIN 30 DAYS IN ORDER TO PRESERVE YOUR RIGHTS. COMPLETE THIS FORM BY PROVIDING ALL INFORMATION REQUESTED. TYPE OR PRINT CLEARLY.

PART ONE: GROUNDS FOR COMPLAINT

- A. **Overvaluation:** The assessment exceeds the full & fair cash value of the property:
1. Indicate the assessed value of the property: \$ _____
 2. Indicate your opinion of fair cash value: \$ _____
 3. List the properties (3 or more) in your neighborhood you believe are comparable to your property or (3 or more) comparable sales and their assessed values:
A1) _____ \$ _____
A2) _____ \$ _____
A3) _____ \$ _____
A4) _____ \$ _____
A5) _____ \$ _____

4. For each property listed above, please fill out the detailed listing below:

	Street address	Land Ac	Living Area	RM/Bed/Bath	Style/Cond
Subject					
Comp A1					
Comp A2					
Comp A3					
Comp A4					
Comp A5					

- B. **Improper Classification:** The property's use on January 1, 2024 was improperly noted on the tax bill (or improperly allocated if the property has more than one use)

1. Indicate present classification (from tax bill) _____
2. Indicate class in which property should be classified:
 - Class One (Residential) _____
 - Class Three (Commercial) _____
 - Class Four (Industrial) _____
 - Multiple Use Class _____

PART TWO: PHYSICAL DESCRIPTION

Design:

Bungalow Cape Colonial Contemporary
 Antique Ranch Victorian Split Level
 Other & name _____

Age:

Give approximate age of the home _____, Opinion of Condition _____

Story Height:

Number of stories _____

Attic:

Finished Unfinished None

Garage:

Attached Detached None
 # of cars _____

Basement:

Full Partial None
 Give percent of basement that is finished _____

Heating & Cooling:

Number of systems: _____; Type of fuel: _____; System Type: _____

List the total number of rooms:

Bedrooms Full Bath 1/2 Bath Kitchen
 Den Dining Living Office
 All others

Other attachments:

Porches Patios Decks
 Sun Rooms Other List _____

Rehabilitation / New Construction:

Has there been any new construction or significant rehabilitation performed on the property during the last 5 years? YES _____ NO _____

If YES, list each expenditure made:

Year of Remodel/Construction Description & Cost

_____	_____
_____	_____
_____	_____

Purchase Information: If your property was purchase within the last two years please supply the following information:

Date of Sale: _____

Purchase Price: _____

Down Payment: _____

First Mortgage: Amount: _____ Rate%: _____ terms: _____

Second Mortgage: Amount: _____ Rate%: _____ terms: _____

Was there any non-real-estate items included in the sale? Yes _____ No _____

If Yes, list those items & approximate value:

Rental & Income Information: If any part of the property is rented, please complete the following and supply leases or tax schedules to substantiate rents:

	Furnished?		Monthly Rent\$
Unit 1	Yes	No	_____
Unit 2	Yes	No	_____
Unit 3	Yes	No	_____

Indicate what is included in the Rent (example heat, electricity, trash pickup etc.)

List the yearly expenses for the rental property:

Heating _____ Insurance _____ Repairs _____

Light & Power _____ Other: _____

SIGNATURE:

I CERTIFY UNDER THE PAINS AND PENALTIES OF PERJURY THAT I AM EITHER THE OWNER OF THE PROPERTY OR THE AUTHORIZED REPRESENTATIVE OF THE OWNER AND THAT ALL OF THE INFORMATION SUPPLIED IN THIS REQUISITION IS TO THE BEST OF MY KNOWLEDGE TRUE & CORRECT. AUTHORIZED AGENTS MUST SUPPLY A LETTER FROM THE HOMEOWNER THAT THEY ARE AUTHORIZED TO ACT ON THE OWNER'S BEHALF.

SIGNED

DATE

PRINT FULL NAME