

| Complete Survey Online: http://www.reddeer.ca/rfi |  |
|---|--|
| Roll:   |  |
| Survey Key:                                       |  |

## Assessment Request for Information

| Roll Number:  |  |                    |                     |                     |   |
|---|--|--------------------|---------------------|---------------------|---|
| Property Address:   |  |                    |                     |                     |   |
| Owner Name:   |  |                    |                     |                     |   |
| Daytime Phone Number:<br>Email Address:   | _  |                    |                     |                     |   |
| Mailing Address:  |  |                    |                     |                     |   |
|   |  |                    |                     |                     |   |
| What is your lot rent currently?  |  |                    |                     |                     |   |
| 2. What is the serial # for your home? (Generally found on the nside of a kitchen cabinet door) | 8. Indicate number of plumbing fixtu                 | 1                  | Linnor              | Domt/               | _ |
| Serial #  | Description  | Main<br>Floor<br># | Upper<br>Floor<br># | Bsmt/<br>Lower<br># |   |
| 3. What is the year built of your mobile home?<br>Year Built                                    | 2pc bath (sink & toilet)                             |                    |                     |                     | _ |
| What are the dimensions of your mobile home?  Dimensions  | 3pc bath (sink, toilet, tub or shower)               |                    |                     |                     |   |
| 5. Which of the following does the property have?   | 4pc bath (sink, toilet, tub/shower combo)            |                    |                     |                     |   |
| Dimensions<br>☑No deck or patio   | 4pc bath (sink, toilet, tub, separate shower stall)  |                    |                     |                     |   |
| Open (uncovered) deck / patio   | 5pc bath   |                    | 1                   |                     | _ |
| Covered deck<br>☐Enclosed deck / Sunroom  | (double sink, toilet, tub, shower stall)             |                    | <u> </u>            |                     | _ |
| Solarium  | 9. Does your home contain any of th                  | ne followi         | ng?                 |                     |   |
| Other   | ☐9 ft+ main floor ceilings                           |                    | · ·                 |                     |   |
| 6. Describe other buildings on property:  | Outdoor hot tub                                      |                    |                     |                     |   |
| Attached Detached Heated  | Hardwood flooring                                    |                    |                     |                     |   |
| □No carport / garage  | ☐ Ceramic tile flooring ☐ Laminate or vinyl flooring |                    |                     |                     |   |
| ☐Garage ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐   | ☐ Vaulted Ceiling                                    |                    |                     |                     |   |
| Carport   | Granite, quartz or similar counter                   | tops               |                     |                     |   |
|   | ☐ Interior wall finish: Drywall                      |                    |                     |                     |   |
| <u>NTERIOR</u>  | Interior wall finish: Paneling                       |                    |                     |                     |   |
| 7. Indicate the number and type of fireplace: #   | ☐Central air conditioning☐Laundry sink               |                    |                     |                     |   |
| Built-In Gas  |  |                    |                     |                     |   |
| Built-In Wood/Pellet Built-In Electric  |  |                    |                     |                     |   |
| Freestanding Wood Stove   |  |                    |                     |                     |   |
|   |  |                    |                     |                     |   |

## RENOVATIONS / UPGRADES

10. For each category, if renovated, indicate the year renovated. Add comments for further clarification.

| Category   | Year Reno'd          | % Reno'd        | Additional Comments |
|--|----------------------|-----------------|---------------------|
| Soffits and eavestrough                          |                      |                 |                     |
| Windows  |                      |                 |                     |
| Exterior Doors                                   |                      |                 |                     |
| Exterior finish                                  |                      |                 |                     |
| Interior finish (ex: drywall)                    |                      |                 |                     |
| Interior Doors                                   |                      |                 |                     |
| Kitchen cabinets                                 |                      |                 |                     |
| Kitchen counters                                 |                      |                 |                     |
| Interior paint/baseboards                        |                      |                 |                     |
| Flooring   |                      |                 |                     |
| Electrical upgrades (ex: fixtures, panel/wiring) |                      |                 |                     |
| Bathrooms  |                      |                 |                     |
| Plumbing upgrades                                |                      |                 |                     |
| Furnace/boiler                                   |                      |                 |                     |
| Hot water tank                                   |                      |                 |                     |
| Structural additions                             |                      |                 |                     |
| (ex: room additions)                             |                      |                 |                     |
| 11. Your comments:                               |                      |                 |                     |
|  |                      |                 |                     |
|  |                      |                 |                     |
|  |                      |                 |                     |
| 12. All the information provid                   | ded is true and accu | rate to the bes | of my knowledge.    |
| Signature  |                      | Date            |                     |

The information collected is done so under the authority of Municipal Government Act (MGA) section 295(1) and used by the municipality to carry out the duties and responsibilities of an assessor under Parts 9 to 12 and the regulations. The information is protected under the Freedom of Information and Protection of Privacy (FOIP) Act and Municipal Government Act sections 299 to 301.1. If you have questions about the collection, use or protection of this information, please contact Assessment Services.

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