Office of Tom J. Bordonaro, Jr., County Assessor

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www.slocounty.ca.gov/assessor

Assessor's use only:

Property Owner's Statement of Residential Construction/Demolition

PERMIT DESCRIPTION

We have observed new construction or have been notified that a permit was issued for the property identified above. State law requires the Assessor to collect information on all new construction for property tax purposes. To ensure an accurate assessment of your property, an on-site inspection by an appraiser is necessary.

This questionnaire is intended to assist the appraiser with the valuation of your new construction. Please complete this form and return it in the envelope provided within 15 days following completion of the project. If you have any questions regarding this form, please contact our office at (805) 781-5643.

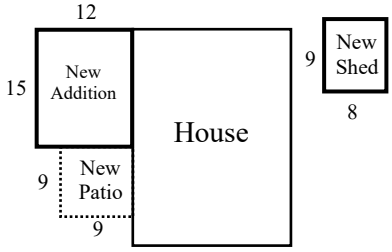
COST AND COMPLETION DATA

Work was done by: ☐ contractor ☐ owner ☐ combination

Date work was completed or project was usable:_____ **TOTAL COST OF PROJECT:** $_____

DIAGRAM OF NEW CONSTRUCTION: Draw a sketch below of the new construction, showing its dimensions and position in relation to existing structure(s). Please label all new items. Copies of your plans are not always provided to this office by other agencies. If additional space is needed, attach a separate sheet.

EXAMPLE:



TYPE OF PROJECT: ☐ **ADDITION** ☐ **CONVERSION** ☐ **REMODEL**

Use of new area:_____ **Previous use of area**:_____

Size of addition or converted/remodeled area:_____sq. ft.

Was any area demolished prior to the new construction? ☐ Yes ☐ No If yes, Cost: $_____

Foundation: ☐ slab ☐ raised ☐ other:_____ **Exterior Walls**: ☐ stucco ☐ siding ☐ other:_____

Roof Cover: ☐ composition shingle ☐ tile ☐ shake ☐ composition roll ☐ hot mop ☐ other:_____

Floor Cover: ☐ ceramic tile ☐ marble tile ☐ carpet ☐ vinyl ☐ hardwood ☐ other:_____

Heating: ☐ forced air ☐ wall ☐ air conditioning ☐ fireplace

Total number of rooms after addition, conversion, or remodel:

Living room_____ Family/Den_____ Kitchen_____ Dining room_____ Utility room_____

Bedrooms_____ Full baths_____ ¾ baths_____ ½ baths_____ Other_____

For kitchen and bath additions or remodels, please provide an interior description in the remarks section on the reverse side.

PLEASE COMPLETE REVERSE SIDE

☐ **DEMOLITION** ☐ **REPAIR** ☐ **OTHER:**

Describe demolition, repair, or other work done:_____

_____

_____

☐ **GARAGE** ☐ **SHED** ☐ **CARPORT** ☐ **BARN** ☐ **ENCLOSED PATIO** ☐ **CABANA** ☐ **OTHER**_____

Size:_____x_____ or _____sq. ft. **Roof cover**:_____

Foundation type:_____ **Exterior wall type**:_____

Interior walls: ☐ drywalls ☐ unfinished **Floor cover type**:_____ or ☐ none

Other (electrical, plumbing, etc.):_____

☐ **COVERED PATIO** ☐ **UNCOVERED PATIO** ☐ **DECK** ☐ **PAVING** ☐ **OTHER** _____

Size:_____x_____ or _____sq. ft. **Material**:_____

Elevation: ☐ on grade ☐ elevated_____ft. ☐ railings ☐ stairs # of steps_____

Roof cover: ☐ shake ☐ composition shingle ☐ tile ☐ hot mop ☐ trellis ☐ other_____

Size of covered area:_____x_____ or _____sq. ft. **Roof type**: ☐ flat ☐ shed ☐ gable

☐ **PHOTOVOLTAIC (SOLAR) SYSTEM**

System type: ☐ Owned system ☐ Leased system

If leased, lessor company name:_____ Lease term:_____years Cost per month: $_____

System capacity (kW, MW):_____ **Location**: ☐ roof mount ☐ ground mount

☐ **POOL** ☐ **SPA** ☐ **HOT TUB**

Pool size:_____x_____ **Depth**:_____ **Material**: ☐ gunite ☐ fiberglass ☐ plastic liner

Heater: ☐ gas ☐ solar ☐ electric ☐ mechanical cover ☐slide ☐ diving board ☐ pool sweep

Spa size:_____x_____ or _____diameter **Spa type**: ☐ portable ☐ built-in ☐ attached to pool

☐ **FIREPLACE** ☐ **WOODSTOVE**

Fireplace: ☐ zero-clearance ☐ masonry ☐ gas log ☐ free standing ☐ single ☐ double

Hearth: ☐ tile ☐ brick ☐ marble tile ☐ raised ☐ other_____

☐ **FENCE** ☐ **RETAINING WALL**

Length:_____lin. ft. **Height**:_____

Fence material: ☐ solid ☐ 3 rail corral ☐ chain link ☐ deer fence ☐ other_____

Wall material: ☐ concrete block ☐ poured concrete ☐ redwood ☐ reinforced ☐ treated lumber

REMARKS:_____

_____

_____

Thank you for your cooperation. An appraiser may contact you for additional information.

I certify (or declare) under penalty of perjury, under the laws of the State of California, that the foregoing information, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

Print Name	Title (i.e. owner/agent/contractor)	Phone Number (8 am – 5 pm)
Signature	Date	Email