



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

For Assessor's Use Only

**County Government Center
 1055 Monterey Street, Suite D360
 San Luis Obispo, CA 93408
 (805) 781-5643 FAX: (805) 781-5641
 Web site: www.slocounty.ca.gov/assessor**

Property Owner's Statement of New Residence Construction

PLEASE REFER TO THE ADDRESS LABEL FOR A DESCRIPTION OF THE NEW CONSTRUCTION/PERMIT

We have observed new construction or have been notified that a permit was issued for the property identified above. The Assessor is required by law to gather information regarding all new construction for property tax purposes.

To properly assess your property, an on-site inspection by an appraiser is necessary. This questionnaire has been designed to assist the appraiser with the valuation of your new construction. Please complete this form and return it in the envelope provided, no later than 15 days following completion of the project. Should you have any questions regarding this form, please call (805)781-5643 or if located in the North County call (805) 461-6143.

FOR ALL ROOMS, PLEASE INDICATE:

ROOM	FLOOR LEVEL				FLOOR COVERING					CEILING FINISH			
	B	1	2	3	Carpet	Vinyl	Tile	Wood	Other (specify)	Vaulted	Wood	Open Beam	Sheet Rock
ENTRY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LIVING ROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DINING ROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DINING AREA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FAMILY ROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
KITCHEN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UTILITY ROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BEDROOM #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BEDROOM #2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BEDROOM #3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BEDROOM #4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/> (Specify room)													

KITCHEN: (Examples of counter and splash materials: Formica, Corian, tile, fiberglass, etc.)

Counter material: _____ Length: _____ lineal ft. Back splash height: _____ inches

- | | | |
|--|---|--|
| <input type="checkbox"/> Built-in oven | <input type="checkbox"/> Built-in Microwave | <input type="checkbox"/> Trash compactor |
| <input type="checkbox"/> Counter-top range | <input type="checkbox"/> Garbage disposal | <input type="checkbox"/> Cooking island |
| <input type="checkbox"/> "Jennaire" type range | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Vegetable sink |
| <input type="checkbox"/> Other built-in appliances (specify) _____ | | |

BATHS:

Baths	Floor Level	Floor Covering	Counter Material	Number of Sinks	Bathtub				Shower			Add'l Fixtures (specify)
					Fiber-glass	Ceramic	Other	Back splash material	Overtub	Stall	Back splash material	
Bath #1												
Bath #2												
Bath #3												
Bath #4												

ADDITIONAL FEATURES:

- | | | |
|---|--|--|
| <input type="checkbox"/> Central heating | <input type="checkbox"/> Walk-in closet(s) # _____ | <input type="checkbox"/> Skylights # _____ |
| <input type="checkbox"/> Wall heater | <input type="checkbox"/> Mirror closet door(s) | <input type="checkbox"/> Ceiling fans |
| <input type="checkbox"/> Air conditioning | <input type="checkbox"/> Pantry closet | <input type="checkbox"/> Built-In book shelves |
| <input type="checkbox"/> Laundry sink | <input type="checkbox"/> Jetted bathtub | <input type="checkbox"/> Finished garage |
| <input type="checkbox"/> Wet bar | <input type="checkbox"/> Indoor spa/sauna | |

FIREPLACE/WOOD STOVE:

- | | | |
|---|--|--|
| <input type="checkbox"/> Zero-clearance fireplace | <input type="checkbox"/> Masonry fireplace | <input type="checkbox"/> Wood stove |
| <input type="checkbox"/> Free standing | <input type="checkbox"/> Gas log | <input type="checkbox"/> Stove insert |
| <input type="checkbox"/> Raised hearth | <input type="checkbox"/> Finish of hearth: _____ | <input type="checkbox"/> Finish of facing: _____ |

COST AND DATE OF COMPLETION:

When was the construction completed or the date it became usable? _____

What was the total cost of construction? _____ (Include all costs - i.e. permit fees, grading, utilities, etc. Do not include the cost of the land.)

Work was done by: Contractor Owner Combination***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.*_____
Signature_____
Title (i.e. property owner / tenant / agent / contractor)_____
Printed Name_____
Date_____
Phone No. (8:00 a.m. - 5:00 p.m.)