



OFFICE OF THE BOARD OF ASSESSORS

Richard J. Allen, Chairman
Margaret A. Lynch
Patrick Greenhalgh

Springfield City Hall, 36 Court Street
Springfield, Massachusetts 01109
Telephone 413.787.6764
Facsimile 413.787.7721

IMPORTANT NOTICE

To owners of Commercial, Industrial and Apartment property:

FAILURE TO COMPLY WITH THIS REQUEST WILL RESULT IN A \$250 FINE ADDED TO YOUR TAX BILL AND POSSIBLE LOSS OF YOUR APPEAL RIGHTS.

We need to know the rental and expense information related to your property (not the business occupying the property). The information will be considered in determining the assessed values of properties of this type.

Please provide the information by one or more of the following three options:

1. Complete the enclosed form for calendar 2012, and a separate form for the first four months of calendar 2013, and return both to the Assessors office by the deadline; OR
2. Provide a copy of the calendar 2012 operating statement for the property, or a profit and loss statement, in whatever format you use. Also please provide the same information for the first four months of calendar 2013 on a separate copy of the form; OR
3. Provide a copy of your calendar 2012 IRS Schedule E related to the property. Please state the vacant space as of January 1, 2013. Also, please provide the same information for the first four months of calendar 2013 on a separate copy of the form.

You may **Mail** your information to:
Springfield Board of Assessors
Springfield City Hall
36 Court Street
Springfield, Massachusetts 01103

You may **Fax** your information to
413.787.7721

All forms are available in a PDF format on the Assessors Page of the City's website:
www.springfieldcityhall.com

All forms are due to be returned no later than **JULY 29, 2013**. Extensions to file cannot be allowed.

Please see the reverse for more information. Thank you for your co-operation.

May 29, 2013

RETURN THIS FORM WITHIN SIXTY (60) DAYS OF MAILING

RETURN DUE DATE JULY 29, 2013

QUESTIONS, PLEASE CALL 413-787-6164

We request your cooperation in providing information needed to develop property valuations on income type properties in the City of Springfield. By completing the enclosed forms, you will assist the Board of Assessors with determining market levels of rent, vacancy and operating expenses. You also preserve your right to pursue an Appellate Tax Board Appeal of your Fiscal Year 2014 property valuations (see information below). Those who fail to return the completed form are subject to possible dismissal at the ATB as well as a fine of \$50 for residential properties and \$250 for commercial from the City of Springfield.

The form seeks information related to the operation of the real estate and NOT any business occupying the real estate and not your business. If you own a business which occupies some or all of the real estate, please indicate that on the form. Massachusetts General Law (Chapter 59, S. 52B) protects any information supplied on the form from public disclosure.

Completed forms are due no later than 60 days from mailing, which is **JULY 29, 2013** at the address stated on the reverse. Forms are also available on line at www.springfieldcityhall.com. Click to forms/Finance/Assessors.

If you have any questions, please contact 413-787-6164.

Section 38D of Chapter 59

Written Return of Information to Determine Valuation of Real Property

Failure of an owner or lessee of real property to comply with such request within 60 days after it has been made by the board of assessors shall be automatic grounds for dismissal of a filing at the appellate tax board. The appellate tax board and the county commissioners shall not grant extensions for the purposes of extending the filing requirements unless the applicant was unable to comply with such request for reasons beyond his control or unless he attempted to comply in good faith. If any owner or lessee of real property in a return made under this section makes any statement which he knows to be false in a material particular, such false statement shall bar him from any statutory appeal under this chapter.

If an owner or lessee of Class one, residential property fails to submit the information within the time and in the form prescribed, the owner shall be assessed an additional penalty for the next ensuing tax year in the amount of \$50 but only if the board of assessors informed the owner or lessee that failure to submit such information would result in the penalty.

If an owner or lessee of Class three, commercial or Class four, industrial property fails to submit the information within the time and in the form prescribed, the owner or lessee shall be assessed an additional penalty for the next ensuing tax year in the amount of \$250 but only if the board of assessors informed the owner or lessee that failure to so submit such information would

The Board of Assessors thanks you for your cooperation. Please see reverse for more information.

IMPORTANT INFORMATION/TRANSLATE IMMEDIATELY

**YOU WILL BE FINED AND LOOSE YOUR RIGHTS TO
APPEAL YOUR ASSESSMENT SHOULD YOU NOT RETURN
THE COMPLETED FORM TO THE ASSESSORS BY JULY 29, 2013**

ANNUAL EXPENSES FOR ALL PROPERTY USES -SPRINGFIELD ASSESSORS OFFICE 413-787-6164

Provide the following expense information **AS IT RELATES TO THE REAL ESTATE ONLY** during calendar year **1/1/12 through 12/31/12 for FY 2014**

Location:	Parcel ID	EXPENSES FOR CALENDAR YEAR : 2012 (FY 2014)
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Landlord Amount		Tenant Amount		Landlord Amount		Tenant Amount	
Management & Administrative				Maintenance & Cleaning			
Management Wages or Fees	\$	\$	Wages	\$	\$		
Legal & Accounting	\$	\$	Supplies	\$	\$		
Security Wages	\$	\$	Maint. Service Contract Fee	\$	\$		
Payroll	\$	\$	Grounds Keeping	\$	\$		
Group Insurance	\$	\$	Rubbish Removal	\$	\$		
Telephone	\$	\$	Snow Removal	\$	\$		
Advertising	\$	\$	Exterminator	\$	\$		
Commissions	\$	\$	Other (Explain)	\$	\$		
Other (Explain)	\$	\$		\$	\$		
TOTAL	\$	\$	TOTAL	\$	\$		

Repairs & Alterations		Capital Improvements			
Exterior	\$	\$	Describe Project(s):	\$	\$
Interior	\$	\$		\$	\$
Mechanical	\$	\$		\$	\$
Electrical	\$	\$		\$	\$
Plumbing	\$	\$		\$	\$
Other (Explain)	\$	\$		\$	\$
TOTAL	\$	\$	TOTAL	\$	\$

Utilities		Other Expenses			
Electrical	\$	\$	Real Estate Taxes	\$	\$
Gas	\$	\$	Reserve for Replacement	\$	\$
Oil	\$	\$	Apartments for Employees	\$	\$
Water/Sewer	\$	\$	Insurance (1yr. Premium)	\$	\$
Other (Explain)	\$	\$	Other (Explain)	\$	\$
TOTAL	\$	\$	TOTAL	\$	\$

Additional Comments:

I declare that to the best of my knowledge and belief, this return is true, correct and complete.

Signature of Owner/Taxpayer/Agent _____
 Print Name _____
 Mailing Address _____

This document MUST be signed and dated to be deemed as valid

Telephone Day _____
 Telephone Eve _____

Failure to file this within 60 days of its mailing may result in fines or loss of appeal rights

Date _____

RETURN TO : ASSESSORS OFFICE 36 COURT ST SPRINGFIELD MA 01103

Return to: Assessors Office 36 Court St Spfld MA 01103
MUST BE RETURNED BY APRIL 15, 2013

City of Springfield FY 2014 Mixed Use Property Income Statement

FOR ASSESSORS USE ONLY	Location	Parcel ID	Contact Name & Phone

If property is OWNER OCCUPIED, please indicate owner and business name. YOU MUST STILL COMPLETE THE FORM FOR EXPENSES.

Owner Name: _____ Business Name: _____

Please provide the following information **AS IT RELATES TO YOUR PROPERTY AND NOT YOUR BUSINESS.** Use additional sheets if necessary. If you prefer to use your own computer rent roll or spreadsheets, please use this format as a guide. FOR MORE INFORMATION OR TO ANSWER QUESTIONS, PLEASE CALL 413-787-6164.

Provide the following income information for the property during calendar year **1/1/12 through 12/31/12 for FY 2014**

COMMERCIAL LEASE INFORMATION:										
Tenant Name	Floor Level	Sprinkler Y/N	Use Type	Leased Area (Sq Ft)	Rent Per Sq. Ft.	Annual Rent	Start Date (Month/Yr.)	End Date (Month/Yr.)	Term in Years	Gross, Net or NNN

RESIDENTIAL LEASE INFORMATION:										
Unit Type		Total # of Units	Rent per Month	Annual Rent	Incentives		Start Date (Month/Yr.)	End Date (Month/Yr.)	Heat Included (Y/N)	Electric Included (Y/N)
					Free Rent (if applicable)	Free # of Months				
Studio Units										
One Bedroom Units										
Two Bedroom Units										
Three or more Bedrooms										

CALENDAR YEAR INCOME SUMMARY									
Total POTENTIAL Gross Income		Total Rent Concessions	Total Vacancies	Total Collection Loss	Total Parking Income	Total Laundry/Vending Income	Other Income (Billboard, Cell Tower, etc.)	Total Rent Collected	
\$		\$	\$	\$	\$	\$	\$	\$	\$

Pursuant to Mass. General Laws, Chap. 59 Section 38D, this form **MUST** be completed and returned to the Assessors Office within 60 days of mailing.

Failure to comply may result in a fine of Fifty Dollars (\$50.00) and loss of appeal rights to the Appellate Tax Board.
SEE REVERSE SIDE FOR EXPENSE INFORMATION