



Springfield Board of Assessors  
36 Court Street Rm. 09  
Springfield, MA 01103

Patrick Greenhalgh, Chairman  
Jessica Guerra  
Matthew Fontaine

Parcel ID:  
Property Location:  
Land Use Code:

April 1, 2022

## **VERY IMPORTANT: REQUEST FOR INFORMATION**

### **You Must Include the Post Card with this Submission**

**FAILURE TO COMPLY SHALL RESULT IN A PENALTY OF \$50. IN ADDITION YOU MAY LOSE THE RIGHT TO AN APPEAL AT THE APPELLATE TAX BOARD**

The Board of Assessors is responsible for determining the assessed value of your property. M.G.L c. 59 § 38D provides the assessors with the authority to request information “as may reasonably be required ...to determine the actual fair cash valuation” of your property. We are requesting your cooperation pursuant to this law. **Failure to comply with our request shall result in a penalty of \$50 added to your tax bill. In addition, you may lose your right to appeal at the Appellate Tax Board.** This penalty is authorized by state law. Please note that M.G.L. c. 59, § 52B protects the information provided from public disclosure and limits narrowly the public officials who may view it. The requested information must be returned within sixty (60) days of this mailing or no later than **May 31, 2022.**

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

1. Complete the enclosed form for the entire calendar year **2021**, and return to the Assessors office by **May 31, 2022**;

**OR;**

2. Provide a copy of the entire calendar **2021** operating statement for the property, or a profit and loss statement, in whatever format you use. Please also include a copy of the calendar year **2021** rent roll as of **1/1/2022**.

You can mail all requested documents to the address listed in the top right corner of this page or email to **assessors\_email@springfieldcityhall.com**. If you have any questions, please feel free to call the Assessors office at **(413) 886-5002**.

LUC:  
Mailed: April 1, 2022

**City of Springfield FY 2023 Apartment Property Income Statement**  
**MUST BE RETURNED BY MAY 31, 2022** To Assessor's Office, 36 Court St Rm. 09, Springfield MA 01103  
or **emailed to assessors\_email@springfieldcityhall.com**

Location: Parcel-ID: Contact Name, Phone and Email:

Owner Name: Business Name:

Please provide the following information **AS IT RELATES TO YOUR PROPERTY**. 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 **413-886-5002**.

Provide the following income information for the property during calendar year **1/1/2021 through 12/31/2021 for FY 2023**

APARTMENT LEASE INFORMATION:										
Unit Number / Floor Level	Number of Bedrooms	Number of Full/Half Baths	Heat Included in Rent (Y/N)	Electricity Included in Rent (Y/N)	Monthly Rent	Annual Rent	Leased (Y/N)	Sprinkler Y/N	Furnished or Unfurnished ?	Subsidy: List Amount & Agency

PROPERTY SUMMARY									
Unit Type	Total # of Units	Avg. Rent per Month	Average Annual Rent	Owner Occupied Unit(s)	Is income restricted due to government funding or tax credits? Explain program.	Parking Info		Total # of Spaces	Single Space Month Rent
Studio Units						Indoor			
One Bedroom Units						Outdoor			
Two Bedroom Units						Total			
Three or More Bedroom Units					Comments:				
TOTAL NUMBER OF UNITS									
Total Units Vacant as of <b>01/01/22</b>									

CALENDAR YEAR INCOME SUMMARY							
Total POTENTIAL Gross Rental Income at 100% Occupied (Include subsidy amount and source and vacant space.)	Lost Income due to Concessions	Lost Income due to Vacancies	Lost Income due to Collection Loss	Total Actual Rental Income	Total Laundry/Vending/ Parking Income	Other Income (Billboard, Cell Tower, Parking, Laundry, etc.)	Total Income Collected All Sources
\$	\$	\$	\$	\$	\$	\$	\$

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 shall result in a penalty \$50. In addition, you may lose the right to an appeal at the Appellate Tax Board.**

LUC:

**ANNUAL EXPENSES FOR ALL PROPERTY USES -SPRINGFIELD ASSESSORS OFFICE 413-886-5002**

Return to: ASSESSOR'S OFFICE, 36 COURT ST RM. 09, SPRINGFIELD MA 01103

**Provide the following expense information AS IT RELATES TO THE REAL ESTATE ONLY during calendar year 1/1/2021 through 12/31/2021 for FY 2023**

Location: \_\_\_\_\_ Parcel: \_\_\_\_\_ **EXPENSES FOR CALENDAR YEAR 2021 (FY 2023)**

Management & Administrative		Landlord Amount	Tenant Amount	Maintenance & Cleaning		Landlord Amount	Tenant Amount
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)	\$	\$		\$	\$		
<b>TOTAL</b>	\$	\$	<b>TOTAL</b>	\$	\$		

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

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

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 <i>MUST</i> be signed and dated to be deemed as valid	Telephone Day _____ Email _____ Date _____
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Failure to file this within 60 days of its mailing shall result in a \$50 penalty. In addition, you may lose the right to an appeal at the Appellate Tax Board.



**Board of Assessors**  
**36 Court Street**  
**Springfield, MA 01103**  
Telephone (413) 787-3111  
Facsimile (413) 787-7721

**City of Springfield, Massachusetts**  
**April 1, 2022**

**Parcel ID:**  
**Property Location:**  
**Land Use Code:**

We are writing with respect to the purchase of **apartment** property on <<sale date>> in the amount of \$<<sale price>>. To help us gain an overall understanding of market conditions, we would like to verify the terms of the sale. We hope you understand that the sale is of great importance to us and receiving the enclosed form back from you will assist us in developing fair and equitable assessments for Fiscal Year **2023** for all parcels in the City.

State law, Chapter 59 Section 38D, provides the assessors with the authority to request information “as may reasonably be required ...to determine the actual fair cash valuation” of your property. We are requesting your cooperation pursuant to this law. **Failure to comply with our request shall result in a penalty of \$50 added to your tax bill. In addition, you may lose your right to appeal at the Appellate Tax Board.** This penalty is authorized by state law.

Kindly provide the information pertaining to your purchase based on the factors specified in the enclosed form. Please pay particular attention to answering the questions regarding the terms of sale, sale price, property other than real estate included in sale price, and any other real estate parcels which may have been included in the total sale price. Please provide any additional details about the transaction that you consider relevant. If necessary, please attach a separate sheet. If the parcel is rented at arm’s length, please provide a copy of the current rent roll and a current income and expense statement as it relates to the rental of the real estate. If you own and occupy the space, please note OWNER-OCCUPIED on the form.

If you have any questions please call **Patrick Greenhalgh directly at (413) 886-5002**. Please mail the form back to the Assessors Office 36 Court Street Springfield, MA 01103 within 60 days by **May 31, 2022**. You may also send via email to **assessors\_email@springfieldcityhall.com**. Your time and effort is greatly appreciated!



Board of Assessors  
 36 Court Street  
 Springfield, MA 01103  
 Telephone (413) 787-6092  
 Facsimile (413) 787-7721

**City of Springfield, Massachusetts Sales Verification Form Commercial/Industrial – FY 2023**  
**April 21, 2022**

**Parcel:**  
**Property Location:**

**Pursuant to M.G.L. c. 59 § 38D, please answer the following questions:**

- 1. Any special circumstances affecting the sale:**
  - Sale between immediate family members  
Please specify the relationship \_\_\_\_\_
  - Sale involved corporate affiliates belonging to the same parent company
  - Sale of convenience (correct defects in title; create joint or common tenancy, etc.)
  - Auction
  - Foreclosure
  - Sale of estate from Executor or Executrix
  - Sale involved in a religious, charitable, benevolent organization
  - Sale in which the seller provided financing
  - Sale of only a partial interest in the real estate
  - Sale involved in a trade or exchange of properties
  - Short sale i.e. sale price less than seller's loan balance
  - Other, please state \_\_\_\_\_
- 2. Were any other parcels involved in the sale? If yes, please list the addresses or parcel ID's**  
 \_\_\_\_\_
- 3. How many apartment units?**
  - Studio \_\_\_\_\_
  - 1 Bedroom \_\_\_\_\_
  - 2 Bedroom \_\_\_\_\_
  - 3 Bedroom \_\_\_\_\_
  - 4 Bedroom \_\_\_\_\_
- 4. Was the property leased or rented at the time of the sale? If yes, what percent of the units were leased or rented?**  
 \_\_\_\_\_
- 5. Any recent changes to the property before or after the sale?** Yes No
  - New Construction
  - Remodeling
  - Demolition
  - Addition**What was the estimated cost of the labor & materials**  
 \$ \_\_\_\_\_
- 6. Was there an appraisal made on the property?**
  - Yes, what was the value? \$ \_\_\_\_\_
  - No
- 7. Were any delinquent taxes assumed by the purchaser?**
  - Yes – What amount was included in the purchase \$ \_\_\_\_\_
  - No
- 8. How was the property marketed? (choose all that apply)**
  - Listed with an agent
  - Advertised online
  - Displayed "For Sale" sign
  - Offered by word of mouth
  - Other, please state \_\_\_\_\_
- 9. Was the property available to other potential purchasers?**
  - Yes
  - No, please explain: \_\_\_\_\_
- 10. How long was the property on the market?**  
 \_\_\_\_\_
- 11. What was the asking price? \$** \_\_\_\_\_
- 12. Any seller obligations?** \_\_\_\_\_
- 13. What was the total sale price? \$** \_\_\_\_\_
- 14. Was the sale influenced by any unusual circumstances?**
  - Yes, please explain \_\_\_\_\_
  - No
- 15. Is the total sale price a fair reflection of the market value for the real estate on the sale date?**
  - Yes
  - No – If no, please explain \_\_\_\_\_

**Please sign below:**

Print name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Pursuant to Mass. General Laws, Chapter 59 Section 38D, this form **MUST** be completed and returned to the Assessors Office within 60 days of mailing or no later than **May 31, 2022**.

Failure to comply shall result in a penalty of **\$50**. In addition, you may lose the right to an appeal at the Appellate Tax Board.