



Springfield Board of Assessors  
36 Court Street Rm. 9  
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**

**PLEASE RETURN THE POSTCARD WITH THESE FORMS**

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 \$250 (\$50 for class one) 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 take a few minutes to answer the following questions. If, after answering the questions, you believe that an Income and Expense form is required per the instructions, please complete the form as accurately as you can. Please note that M.G.L. c. 59, § 52B protects from public disclosure the information you provide 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**. 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](mailto:assessors_email@springfieldcityhall.com). If you have any questions, please feel free to call the Assessors Office at (413) 787-6092.

**\*\*IMPORTANT – NEW OWNERS\*\***

Since you recently purchased this parcel, please provide **a copy of all appraisals made on the property** pertaining to this sale and your most recent monthly income and expense statement and rent roll if you do not have a copy for the entire **2021** calendar year.

**Ownership, occupancy, and use of the property**

1. Is the property owner occupied? Circle: Yes / No / Part
  2. Please list the owner (s) of the REAL ESTATE. If a corporation, please list the officers. If a trust or limited liability company, please list the registered agent, or disclose further as you prefer. \_\_\_\_\_
  3. Please list the owner(s) or entities with ownership interests in the BUSINESS (ES) occupying the real estate. \_\_\_\_\_
  4. Are any of the individuals or entities listed in your answer to #1 also an answer to #2? Yes or no? Please list. \_\_\_\_\_
  5. How much of the building was occupied as of 1/1/2022? \_\_\_\_\_ %
  6. What is the total amount mortgaged? \_\_\_\_\_
  7. Is the property being offered for sale or lease? \_\_\_\_\_
    - a. What is the asking price or rent? \_\_\_\_\_
  8. Are the businesses occupying the real estate owned in any way by the owner(s) of the real estate?  
Circle: **NO / YES / PART**
- IF:**
- No** – Complete the enclosed form and this cover letter
  - Yes** – Complete this cover letter and return
  - Part** – Complete this cover letter and enclosed form and identify the area which is owner occupied on the form
9. Please state the type of business conducted on the property, i.e. retail, office, storage, etc. \_\_\_\_\_
  10. Please explain any conditions, facts, or extraordinary circumstances which you believe affect the value. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

Date: \_\_\_\_\_  
Email Address: \_\_\_\_\_

<b>LUC:</b>	<div style="text-align: center;"><b>City of Springfield FY 2023 Commercial &amp; Industrial Property Income Statement</b></div> <div style="text-align: center;">Must be returned by <b>May 31, 2022</b> to: Assessor's Office, 36 Court St. Rm 9, Springfield MA 01103 or <b>emailed to assessors_email@springfieldcityhall.com</b></div>
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<b>Mailed: April 1, 2022</b>	<b>Loc:</b> _____ <b>Parcel:</b> _____	<b>Name:</b> _____ <b>Phone:</b> _____
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Owner Name: _____	Business Name: _____
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**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 413-787-6092.**

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

<b>Tenant Name</b> <small>Please list the businesses occupying space at the property AND identify businesses that are owned by owners of the real estate (OO = owner-occupied) and businesses that are strictly tenants (T). Also, for any space that is vacant, please provide the amount of square feet AND asking rent below.</small> <div style="text-align: right;">OO / T</div>	Floor Level	Sprinkler Y/N	Use Type Retail, Office, Warehouse, etc.	Leased Area (Sq Ft)	Rent Per Sq. Ft.	Annual Base Rent	Gross, Net or NNN	Lease Start Date Month/ Yr.	Lease End Date Month/ Yr.	Term in Years	Options
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
					\$	\$					
<b>Vacant Space</b>	<b>Floor</b>	<b>Sprinkler</b>	<b>Use</b>	<b>Vacant Area</b>		<b>Asking Rent</b>	<b>Terms</b>				
					\$	\$					
					\$	\$					

**Total Area Should Equal 100% of Building**

OTHER INCOME: Reimbursements (CAM, RE Tax, Insurance), Cell Towers/Antenna, Billboards, Parking, and/or Other (please specify)			
Source	Monthly Amount	Annual Collected	Additional Comments:
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

CALENDAR YEAR INCOME SUMMARY					
100% Occupied Total Potential Gross Income	Total Concessions (Free Rent)	Total Vacancy Loss	Total Collection Loss	Total Other Income	Total Income 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 shall result in a penalty of \$250 (\$50 for class one). In addition, you may lose the right to an appeal at the Appellate Tax Board.**  
**SEE REVERSE SIDE FOR EXPENSE INFORMATION**

LUC:

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

Return to: ASSESSOR'S OFFICE, 36 COURT ST RM 9, 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:	<b>EXPENSES FOR CALENDAR YEAR 2021 (FY 2023)</b>			
<b>Management of Real Estate ONLY</b>	<b>Landlord Amount</b>	<b>Tenant Amount</b>	<b>Maintenance &amp; Cleaning (Recurring)</b>	<b>Landlord Amount</b>	<b>Tenant Amount</b>
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>\$</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>	<b>\$</b>

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

<b>Utilities</b>			<b>Other Expenses</b>		
Electrical	\$	\$	Real Estate Taxes	\$	\$
Gas	\$	\$	Reserve for Replacement	\$	\$
Oil	\$	\$	Apartments for Employees	\$	\$
Water/Sewer	\$	\$	Insurance (1yr. Premium)	\$	\$
Other (Explain)	\$	\$	Other ( <b>Explain</b> )	\$	\$
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>	<b>\$</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 MUST be signed and**dated to be deemed as valid*

Telephone Day

Email

Date

*Failure to file this within 60 days of its mailing shall result in a **\$250 (\$50 for class one)** 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:**

**Parcel Location:**

We are writing with respect to the purchase of **commercial** property on **«SALEDT»** in the amount of **\$«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 \$250 (\$50 for class one) 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 Matthew Fontaine directly at **(413) 787-6092**. 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](mailto: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 1, 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  
Specify the relationship \_\_\_\_\_
- ☐ Sale involving corporate affiliates belonging to the same parent company
- ☐ Sale of convenience (correct defects in title; create a joint or common tenancy, etc.)
- ☐ Auction
- ☐ Foreclosure
- ☐ Sale involving a religious, charitable, educational or benevolent organization
- ☐ Sale in which the seller provided financing
- ☐ Sale of only a partial interest in the real estate
- ☐ Sale involving trade or exchange of properties
- ☐ Short sale i.e. sale price less than seller's loan balance
- ☐ Other, please state the circumstance \_\_\_\_\_

**2. What was the real estate use at time of sale?**

- ☐ Retail
- ☐ Office
- ☐ Warehouse
- ☐ Other (specify) \_\_\_\_\_

**3. Were any other parcels of real estate involved in the sale? If yes, please list the addresses or parcel ID's**

\_\_\_\_\_

**4. Did the sale price include an existing business?**

- ☐ Yes, What is the business value \$ \_\_\_\_\_
- ☐ No

**5. Was any personal property (such as furniture, equipment, machinery, and inventory) included in the sale price?**

- ☐ Yes, personal property value \_\_\_\_\_
- ☐ No

**6. Any recent changes to the real estate?**

- ☐ Yes, what was the estimated cost of the labor & materials \$ \_\_\_\_\_
- ☐ Before or after the sale? \_\_\_\_\_
- ☐ No

**7. Was there an appraisal made on the real estate?**

- ☐ Yes, what was the value \$ \_\_\_\_\_
- ☐ No

**8. Were any delinquent taxes assumed by the purchaser?**

- ☐ Yes, please state amount \$ \_\_\_\_\_
- ☐ No

**9. 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 \_\_\_\_\_

**10. Was there any seller or special financing? If yes, please explain.**

- ☐ Yes, \_\_\_\_\_
- ☐ No

**11. Was the property available to other potential purchasers?**

- ☐ Yes
- ☐ No, please explain \_\_\_\_\_

**12. How long was the property on the market?**

\_\_\_\_\_

**13. What was the asking price?** \_\_\_\_\_

**14. Any seller obligations? Please explain any repairs, renovations, replacements** \_\_\_\_\_

\_\_\_\_\_

**15. What was the total sale price?** \_\_\_\_\_

**16. Was the sale influenced by any unusual circumstances?**

- ☐ Yes, Please explain \_\_\_\_\_
- ☐ No

**17. Is the total sale price a fair reflection of the market value for the real estate on the sale date?**

- ☐ Yes
- ☐ 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.**

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