

West Boylston Board of Assessors Residential Property Questionnaire

Name

Property Address: _____

Our office requires information about the interior of your home. Please complete the form and return it to our office at your earliest convenience. Exterior information will be verified by field inspection. Some data changes require an interior inspection.

1. Enter the number of rooms of each type found in your home for each floor, the number and type of fireplace(gas/wood), and year of updates if performed, if original leave blank.

Type of Room	Basement	Floor 1	Floor 2	Floor 3	Fireplace(s)	Type & Year of Update
Bedrooms						
Full Bathrooms						
Half Bathrooms (no tub or shower)						
Kitchens						
Living Rooms						
Dining Rooms						
Family Rooms						
Studies/Dens						
Utility Rooms/Mud Rooms						
Lofts						
Unfinished Walk-up Attics(not pulldown)						
Finished Walk-up Attics						
Recreation Rooms						
Workshops						
Other (specify)						

2. If you have a finished basement please provide additional detail: Approximate percentage of total basement area that is finished

___%

)
Panel walls
Ceiling tiles
-

Type of floor c	covering:
1 ype of moor e	covering.

3. For the MAIN (above ground level) living areas mark all that apply.

Central Air Conditioning: Y	es No	
Type of heating system		Heating system fuel type
Hot water baseboard		Oil
Forced air		Natural gas
Radiator/steam _		Propane gas
Wall furnace		Electric
Electric baseboard/radiant		Coal
Solar – passive		Wood
Radiant floor heat		Solar
Other (specify)		None
No conventional heat		
Comments/Amenities:		

Owner's Signature(s)

_ Date __

Telephone # : _____

Please return to: 140 WORCESTER STREET West Boylston, MA 01583 Phone or Fax 774-261-4040