



# Town of West Bridgewater

## Board of Assessors

65 North Main Street • West Bridgewater, Massachusetts 02379  
Phone 508-894-1212 • Fax 508-894-1202

Dear Property Owner,

The Board of Assessors is requesting INCOME AND EXPENSE information on COMMERCIAL, INDUSTRIAL and APARTMENT properties to help us determine equitable values for assessment purposes. This request is for income and expense information relative to the operation of **real estate** and not the business use with the real estate. We appreciate the cooperation that you have shown the Board in the past.

When determining commercial property values, the Board must weigh financial as well as physical attributes. By completing and returning the enclosed form, you help ensure the development of a sound basis to estimate the income approach to value. Please be aware that this information will be used only to determine “market” income and expense levels for commercial and industrial properties. In accordance with State Law, all information listed on the forms is **not** available to the public for inspection. [CH 59 S52B]

While it is in the best interest of property owners to contribute to the establishment of fair assessments, Massachusetts Law also requires such disclosure:

Section 38D of Chapter 59

### Written Return of Information to Determine Valuation of Real Property

A board of assessors may request the owner or lessee of any real property to make written return under oath within *sixty days* containing such information as may reasonably be required by it to determine the actual fair cash valuation of such property.

Failure of an owner or lessee of real property to comply with such request within *sixty days* after it has been made shall bar him from any statutory appeal under this chapter, unless such owner or lessee was unable to comply with such request for reasons beyond his control. If any owner or lessee of real property in a return made under this section makes any statement that he knows to be false in a material particular, such false statement shall bar him from any statutory appeal under this chapter.

If any owner or lessee of real property fails to submit such information within the time and in the form prescribed, in addition to any other penalties, there shall be added to the real property tax levied upon the property in questions for the next ensuing tax year the amount of two hundred and fifty dollars; provided, however, that the board of assessors informed said owner or lessee that failure to so submit such information would result in said penalty.

Please note: Massachusetts General Law provides that failure to respond timely and accurately to this information request within sixty **(60) days** of the postmarked date shall cause you to lose your right to appeal your assessment and will result in the levy of a fifty **(\$50) dollar penalty** for Residential properties and a two hundred and fifty **(\$250) dollar penalty** for Commercial and Industrial properties. [CH 59 S38D]

The Board of Assessors thanks you for your cooperation.

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I certify under the pains and penalties of perjury that the information supplied herewith is true and correct:

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

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

LA-38D (6/2010)

Please sign and date this cover page and page 2 of the attached Income & Expense Form



**APARTMENT INCOME**

INDICATE WITH "X"  
Expenses Paid / Items Supplied by Owner

NO. UNITS OF THIS TYPE	NO. OF ROOMS	NO. OF BEDROOMS	NO. OF BATHS	RENT PER MONTH	FLOOR LEVEL	H E A T	E L E C T R I C	R U B B I S H	A I R C O N D.	R E F R I G E R A T O R	S T O V E	D I S H W A S H E R	D I S P O S A L	F U R N I T U R E	M I C R O W A V E

\* Excluding Bathrooms

**HOTEL/MOTEL INCOME**

TYPE	No. UNITS	RATES			ANNUAL OCCUPANCY PERCENT
		HIGH	LOW	SWING	

**OTHER INCOME**

PARKING	OTHER
LAUNDRY	OTHER
VENDING	OTHER

**SALES INFORMATION**

If the property was purchased within the past 10 years, complete the following.

LAND ONLY	LAND AND BUILDINGS
PRICES _____ DATE ____/____/____	PRICES _____ DATE ____/____/____
COMMENTS ON ANY SPECIAL CONDITIONS	

**CONSTRUCTION COSTS**

Complete if construction or major remodeling was performed within past 10 years


**OTHER INFORMATION**

Please provide any information which may assist in arriving at a fair and equitable appraisal of this property.


**ANNUAL EXPENSES**

Items	20	20	
MANAGEMENT	GROSS AREA		
	NET LEASABLE		
	MNGMNT FEE		
	COMMISSIONS		
	LEGAL		
	ACCOUNTING		
	PAYROLL TAX		
GENERAL	SNOW REMOVAL		
	BLDG SUPPLIES		
	TRASH		
	MISC.		
CLEANING	WAGES		
	SUPPLIES		
	CONTRACT SERVICES		
UTILITIES	HEATING		
	ELECTRIC		
	AIR COND.		
	WATER		
	SEWER		
	ELEVATOR		
	OTHER UTILS.		
CONSTRUCTION	DECORATING		
	REPAIRS AND MAINTENANCE		
	TENANT ALLOW		
	OTHER CONSTR		
FIXED EXPENSE	INSURANCE		
	REAL ESTATE TAXES		
	OTHER TAX		
	DEPRECIATION		
	FURN. & FIXT.		
	INTEREST		
	LAND RENT		
	OTHER	BAD DEBT	
VAC RATE			
OTHER EXP.			
TOTAL			

PREPARED BY \_\_\_\_\_  
DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
Phone No. \_\_\_\_\_