



Cranberry Land USA

TOWN OF CARVER ASSESSORS OFFICE

108 Main Street
Carver, Massachusetts 02330
Telephone (508) 866-3410
Fax (508) 866-7401

Confidential Income and Expense Statement March 13, 2025

Dear Property Owner:

The Board of Assessors is requesting INCOME AND EXPENSE information on COMMERCIAL, INDUSTRIAL, MIXED USE and APARTMENT (residential) 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.

When determining income producing 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 and apartments. In accordance with State Law, all information listed on the forms is **not** available to the public for inspection. [CH 59 §52B]

Written Return of Information to Determine Valuation of Real Property: Section 38D of Chapter 59

A board of assessors may request the owner or lessee of any real property to make a 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 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.

Additionally:

If an owner or lessee of Class one, residential (e.g. apartment) 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 result in the penalty.

This letter constitutes such legal notice under the law and all penalties will be enforced as written

Please Note: Failure to respond timely and accurately to this information request within sixty (60) days of the above date shall cause you to lose your right to appeal your assessment and incur the fine as described above. Owner-occupied property may not have income to report but does have property expenses that are a part of this reporting requirement. Forms returned without usable information will be considered a non-response and will be subject to the same action as the failure to return the form at all.

FORM MAILED AND POSTED: 3/13/2025

FORM DUE: May 12, 2025

SCHEDULE A: Apartment Rental Income

Property Location:	Apartment Property	Calendar Year:
Assessing Parcel ID:	Rental Income Statement	Submitted By:

Residential Rental Information: Please provide the following rental information.

Unit Type	No. of Units		Room Count		Monthly Rent		Typical Lease Term	Includes the following: W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
	Total	Rooms	Bath-room	Per Unit	Total	Lease or Tenant at Will (TAW)		
<i>Single Room Occupancy(SRO)</i>								
Studio								
1 Bedroom								
2 Bedroom								
3 Bedroom								
4 Bedroom								
Other Rentable Units (Furnished Units)								
Owner/Manager/Janitor Occupied								
SUBTOTAL								
Garage Parking Space								
Outdoor Parking Space								
Other Income (Specify)								
TOTAL								

SCHEDULE C: Mixed Use Rental Income

Property Location:	Mixed Use Property	Calendar Year:
Assessing Parcel ID:	Rental Income Statement	Submitted By:

Commercial Lease : Please provide information on current leases as of January 1st.					Lease Terms			
Floor Level	Tenant Name	Type of Space	Leased Area (Sq. ft.)	Rent per SF on Jan. 1st	Annual Rent	Start Date (Mo/Yr)	Term in years	Basis Gross, Net, NNN
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			
				\$	\$			

Residential Rental Information: Please provide the following rental information:

Unit Type	No. of Units		Room Count		Monthly Rent		Typical Lease Term	Includes the following: W: Water Sewer E: Electricity Heat: Oil/Gas/Elec Other: Explain
	Total	Rooms	Bath-room	Per Unit	Total	Lease or Tenant at Will (TAW)		
Studio								
1 Bedroom								
2 Bedroom								
3 Bedroom								
4 Bedroom								
Garage Parking Space								
Outdoor Parking Space								

ANNUAL INCOME AND EXPENSE SUMMARY REPORT

Parcel ID:			
Property Address:		Mailing Address:	
Owner:		City/State/Zip:	
1. Primary Property Use: Apartment ___ Office: ___ Retail ___ Industrial ___ Mixed Use ___ Other ___			
2. Gross Building Area (SF)		6. Number of Units	
3. Net Leasable Area (SF)		7. Number of Parking Spaces	
4. Owner Occupied Area (SF)		8. Actual Year Built	
5. Common Area (SF)		9. Year Remodeled	

INCOME - 2024		EXPENSES – 2024	
10. Apartment Rentals (Sched. A)	\$	22. Advertising	\$
11. Office Rentals (Sched. B)	\$	23. Cleaning and Maintenance (Includes Snow Removal and Trash Removal)	\$
12. Retail Rentals (Sched. B)	\$	24. Commissions/Leasing Fees	\$
13. Industrial Rentals (Sched. B)	\$	25. Insurance (Building Only)	\$
14. Mixed Use Rentals (Sched. C)	\$	26. Professional & Legal Fees	\$
15. Other Rentals	\$	27. Management/Admin Fees	\$
16. Parking Rentals	\$	28. Repairs and Maintenance	\$
17. Common Area Maint. (CAM)	\$	29. Supplies	\$
18. Other Property Income (billboard, cell tower, etc.)	\$	30. Utilities (paid by owner)	\$
19. Total Potential Gross Income	\$	31. Other	\$
20. Vacancy and Collection Loss	\$	32. Reserves for Replacement	\$
21. Effective Gross Annual Income <i>(Subtract Line 20 from Line 19)</i>	\$	33. Total Expenses <i>Add lines 22 to 33</i>	\$

Signature _____ **Date** _____

Printed Name/Title _____ **Email** _____

The above identified property is owner occupied _____

The above identified property is leased to a related person, corporation, or business entity _____