Property Assessment Survey

Contact Information

Full Name:	
Phone No.:	
Email:	

Municipal Information

Municipality:	
Municipal Address:	
Roll No.:	
Survey Key:	

Home Detail Survey

Home Type

Bungalow: ☐	**Bi-level:** ☐	**Two-story:** ☐	**Town House:** ☐
Duplex: ☐	**Mobile Home:** ☐	**Other (please specify):**	
Year Built:			

Estimate Physical Condition

Fair: ☐	**Average:** ☐	**Good:** ☐

Size (Sq ft. Above Ground)

Main Level:	
Upper Level:	
Total:	

Basement

Basement Developed:	Yes ☐ No ☐
Est (%) of basement area	

Bedrooms (# per floor)

Main level:		**Upper Level:**		**Basement:**	

Please complete this survey within 60 days and submit a scanned or .jpg copy at *https://www.kcl-consulting.com/rfi/*
If you require assistance, please contact the assessors at *https://www.kcl-consulting.com/inquiry-form/*

Bathrooms

Main Level:

2 piece: ☐	3 piece: ☐	4 piece: ☐	Additional fixtures:

Upper Level:

2 piece: ☐	3 piece: ☐	4 piece: ☐	Additional fixtures:

Basement:

2 piece: ☐	3 piece: ☐	4 piece: ☐	Additional fixtures:

Heat

- **Forced Air:** ☐
- **Hot Water:** ☐
- **Radiant Roll/Slab:** ☐
- **Radiant Roll/Joist:** ☐
- **Other (specify):**

Miscellaneous Upgrades

- **Solar Array:** ☐
- **Solar Roof Tiles:** ☐
- **Electric Car Charger:** ☐
- **Other (specify)**

Renovations, Upgrades, Additions (Please describe renovations, upgrades, or additions in the past 5 years):

**Also include any recent appraisals, photos or other relevant information with your submission.*

Additional Buildings *(incld. garages, shops, sheds, garden suites, etc.)*

BUILDING(S)	YEAR BUILT	BUILDING DIMENSIONS	BUILDING USE
Example	1990	40 X 60	Farm Equip Storage
Building No. 1			
Building No. 2			
Building No. 3			
Building No. 4			
Building No. 5			

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Reset Form

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