

TOWN OF COHASSET  
BOARD OF ASSESSORS  
41 Highland Avenue  
Cohasset, MA 02025  
(781)383-4100 ex 5124  
Assessors@Cohassetma.org

February 2022

### ORIGINAL REQUEST FOR INFORMATION

The Board of Assessors has begun the process of reviewing all property assessments for Fiscal Year 2022 to determine if an interim adjustment of property values will be necessary, as required by Mass. General Law. The Department of Revenue requires that commercial, industrial, and other income-producing properties are valued using a minimum of two of the three standard appraisal approaches to value.

The information you provide on the enclosed form will be used to establish income and expense schedules for income-producing properties in the community. These schedules will become the basis for utilizing the income approach as one of the appraisal approaches to value.

***It is imperative that you return this form to the Board of Assessors within sixty (60) days.***

“Failure of an owner or lessee of real property to comply with such request within sixty (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 law further states that failure to provide the requested information can result in a penalty of **\$50 for class one residential property or \$250 for class three commercial and class four industrial** property, to be assessed for the next ensuing tax year.(M.G.L. Ch. 59, Sec. 38D).

The **form must be completed** according to the following guidelines:

1. The assessment date is **January 1, 2022**. Therefore, all information should be as of approximately **December 31, 2021**.
2. All leases should be individually listed by tenant. Do not summarize the information.
3. **If the property is “owner occupied”**, state so in the “Lease Summary” section and fill out the operating expense section.
4. **If the property is regulated**, please submit the applicable standard government forms.
5. Please submit any other information such as building data, property condition, recent appraisal information, etc., that may be helpful in establishing a fair and equitable assessment of the property. **Please print preparer’s name, phone number, email address and date on back of form.**

**All information will remain confidential.** It will be considered with all other information gathered in order to establish uniform guidelines to be equitably applied throughout the town.

YOUR COOPERATION IS GREATLY APPRECIATED!

**PLEASE RETURN FORM NO LATER THAN APRIL 1, 2022 TO:**

Cohasset Assessors Office  
Town Hall  
41 Highland Avenue  
Cohasset, MA 02025

Or by Email to: Assessors@Cohassetma.org

# INCOME & EXPENSE STATEMENT

Dear Property Owner, Manager, or Lessee,

A revaluation of all property is being conducted in your community in order to establish fair and equitable assessments.

By completing the enclosed form, you will help reflect economic conditions within your community which will become the basis for utilizing the income approach to value. The information you provide will remain confidential and will be considered, with all other information gathered, in order to establish uniform guidelines to be equitably applied throughout the community. It is, therefore, requested that you complete the enclosed form and return it to the address shown on the cover letter. Please fill out all sections of the form. Your cooperation is appreciated.

Assessors' Office.

Location:

ParcelID:

LUC:

<b>OFFICE USE ONLY</b>

## COMMERCIAL/INDUSTRIAL LEASE SUMMARY

(APARTMENT, HOTEL AND OTHER INCOME SECTIONS, SEE REVERSE)

- (1) List tenant business name rather than owner name. I.e. "Joe's Restaurant" rather than "J. Smith Enterprises". If vacant, so state and enter asking rent under (8) and months vacant under (11). Be sure to complete (2), (3), (4), (5). If any portion is owner occupied enter O/OCC under (1) and complete (2), (3), (4), (5) and (11).
- (2) Enter your identification or unit number/letter.
- (3) List the area that is leased. If not known, approximate such as "1/4 of first floor". THIS IS VERY IMPORTANT.
- (4) List type of space from following list. If several types, enter most prevalent first RTL-retail, store, shop; OFC-office; MFG-manufacturing; WHS-warehouse, storage; RDV-R&D; RST-restaurant; SER-service/repair/garage; BNK-bank; OTH-other (specify in comments)
- (5) Enter floor level. If several, enter most prevalent first.
- (6) List scheduled rent for that tenant for the year.
- (7) List Common Area Maintenance (CAM), Real Estate Tax, and other reimbursements paid by tenant.
- (8) List expenses included in the rent (paid by landbrd). Using following codes: E-electric; H-heat; M-maintenance; P-plowing; R-rubbish removal; T-real estate taxes; B-real estate taxes over a base; L-parking lot/grounds maintenance; W-water/sewer; I-insurance.
- (9) Enter date lease begins. If month to month, enter M/M.
- (10) Enter date lease ends prior to options.
- (11) Enter comments. Be sure to include options, overage clauses, months vacant for the year, real estate tax clauses.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
TENANT	UNIT NO.	LEASED AREA (SQ. FT.)	TYPE OF SPACE	FLOOR LEVEL	SCHEDULED ANNUAL RENT	CAM, TAX, OTHER REIMBURSEMENT	EXPENSES INCLUDED	LEASE START	LEASE END	COMMENTS
<b>TOTAL</b>										

**PLEASE COMPLETE REVERSE SIDE AND INCLUDE SIGNATURE AND DATE**

**ANNUAL EXPENSES**

INDICATE WITH "X"

Expenses Paid / Items Supplied by Owner

**APARTMENT INCOME**

NO UNITS OF THIS TYPE	NO OF ROOMS	NO OF BATHS	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.


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

PREPARED BY \_\_\_\_\_

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone No. \_\_\_\_\_