

NON - RESIDENTIAL PROPERTY VALUE REVIEW QUESTIONNAIRE

You have requested a review of your assessed property value. In order for this office to do a thorough review we will require some pertinent data. Please fill out the following form:

All information provided will be held in strict confidence in compliance with Section 408 of the California Revenue and Taxation Code.

The information on this questionnaire can be supplied by either the landlord (property owner) or the tenant. Information collected on this form will be used to establish and compare fair market rents for Kings County. The data you supply along with data supplied by others will be used to help the Assessor's Office establish the value of properties similar to yours when the Assessor is required to reappraise those properties in accordance with California Law.

APN	PARCEL	ADDRESS			
	Tenant: (Legal Name)	(1	If more than one, s	ee attachm	ent)
	Tenant Mailing Address:				
	Tenant (DBA)				
1. Is	property leased? □YES □NO Or r	ented on a month-to-mo	nth basis? □YE	S □NO	
2. A	pproximate area of leased premises? Land:	Sq. Ft.	Building		Sq. Ft.
3. W (N	What is the monthly rent? Annual Rent? Note: Please include rent schedule or an explanation if rent term is not fixed throughout the lease)				
l. D	ate current lease commences: Month:	Day:	Yea	ar:	
5. D	ate current lease expires: Month:	Day:	Yea	ar:	
E S	Does tenant pay any or all of the following exp Electricity & Gas	laintenance □YES arbage □YES Common Area Ma	Water Insurance	□YES	
'. D	id tenant install any leasehold improvements?	·	JYES 🗆 N	0	
	id landlord install leasehold improvements for yes, please explain or show allowance figures		JYES ON		
	oes tenants' lease include a percentage claus f yes, please explain, i.e. minimum rent plus, o		IYES □N ntage of sales over	-	amount or?)
0. C	Other relevant information: Include any suppo	rting documents			
1. V	Vhat do you think your property is worth?				
Print	Name:		Date:		
Sians	ature:		Telephone:()	