

MAINE REVENUE SERVICES, PROPERTY TAX DIVISION

P.O. BOX 9106, AUGUSTA, MAINE 04332-9106

(207) 624-5600

Unorganized Territory Property Status April 1, 2020

To verify our records, the Property Tax Division is requesting information about the status of your property as of April 1, 2020. Complete this form and return it in the enclosed envelope by July 1. If you do not return this form by July 1, you may give up your right to appeal your tax bill and the Division's determination of your property's value. 36 M.R.S. § 706-A.

THIS IS NOT A TAX BILL

ACCOUNT INFORMATION

[Empty box for account information]

If the name, property address, and property location above is incorrect, write in the correct information to the right of the incorrect information.

Owner's email: _____ Phone: _____

Mailing address where you would like your bill sent, if different from property address: _____

Please fill out the information for the main structure on the property. If you need additional forms, go to www.maine.gov/revenue/forms/property/appsformspubs.htm, or contact the Property Tax Division at prop.tax@maine.gov or 207-624-5600.

Has the property been transferred since April 1, 2019? Yes No

EXISTING MAIN STRUCTURE AND ACCESSORY BUILDINGS

House Camp Mobile home (Year, make and model _____)

Age of structure: _____

Basement: Full Crawlspace Slab None Other (Type: _____)
Finished basement (Area: _____ sq. ft.)

Roof: Asphalt Shingles Metal (Preform/corrugated Standing seam
Other (Material: _____)

Exterior: Vinyl siding Wood shingles Clapboards T-111 Log
Other (Material: _____)

Floors: Hardwood Plywood Laminate Other (Material: _____)

Heating system: Hot water baseboard Forced hot air Radiant floor
Electric Floor/wall unit Heat pump Direct vent (gas) None
Number of fireplaces: _____

Bathrooms: Number of full bathrooms: _____ Number of half bathrooms: _____ None

Electrical: 60 amp 100 amp 200 amp Solar Generator None

Water supply: Drilled well Dug well Municipal water Lake/spring None

Septic System: Full septic Gray water only Holding tank only None

Overall condition of the structure Above average Average Below average

Garages, sheds, other: Shed (Age _____) Garage (Age _____)
Other (Type: _____ Age: _____)

Electricity Plumbing

New building construction and removal of buildings, see reverse side of form.

NEW CONSTRUCTION

Complete this section if you have added structures to or expanded existing structures on your property that are not included in the description above.

House Camp Addition Porch Deck

Dimensions: _____

Mobile home (Year, make and model _____)

Basement: Full Crawlspace Slab None Other (Type: _____)
 Finished basement (Area: _____sq. ft.)

Floors: Hardwood Plywood Laminate Other (Material: _____)

Exterior: Vinyl siding Wood shingles Clapboards T-1-11 Log
 Other (Material: _____)

Roof: Asphalt Shingles Metal (Preform/corrugated Standing seam
 Other (Material: _____)

Heating system: Hot water baseboard Forced hot air Radiant floor
 Electric Floor/wall unit Heat pump Direct vent None
 Number of fireplaces: _____

Bathrooms: Number of full bathrooms: _____ Number of half bathrooms: _____ None

Electrical: 60 amp 100 amp 200 amp Solar Generator None

Water supply: Drilled well Dug well Municipal water Lake/spring None

Septic System: Full septic Gray water Holding tank None

Garages, sheds, other: Shed (Age _____) Garage (Age _____)
 Other (Type: _____ Age: _____)
 Electricity Plumbing

Please draw an overhead view sketch of your structure:

Describe any structures that were removed or added since April 1, 2019:

Signature: _____ Date: _____