542 Liberty St, Hanson MA 02341

Property Use: 4000 [x] Sec.

Tel: 781-293-5259

Apartment or Rooming House

Location:

Key: _____ Parcel ID: _____

Mixed: Residential and Commercial

Hotel, Motel, Inn, B&B, Cottage

Colony, Campground, or Trailer Park

Has sold in the past 3 years, or is currently for sale

FISCAL YEAR 2025

CONFIDENTIAL INFORMATION REQUEST
UNDER MASSACHUSETTS GENERAL LAWS CHAPTER 59 S. 38D
DUE WITHIN SIXTY (60) DAYS OF POSTMARKED DATE

Please check each applicable usage or status and complete the

[] 1,5

[] 2,5

[] 3,5

[]4

[] 1,2,5

sections of the form listed to the right.

As done in the past, the Board of Assessors is requesting income and expense information on Commercial, Industrial and Residential Properties as part of the mandated Revaluation Project.

When determining commercial property values, this Board must weigh financial as well as physical attributes. By completing and returning the enclosed form, you will help insure the development of a sound basis to estimate the Income Approach to value. Please be aware that this information will be used only to generate "market" income and expense levels for commercial and industrial properties. INCOME AND EXPENSE INFORMATION IS NOT OPEN TO PUBLIC INSPECTION; the office staff will take every precaution to prevent its disclosure.

Under Massachusetts General Law Chapter 59, Section 38D, the Board of Assessors can require the owner or lessee of any real estate to make a written return under oath containing information reasonably required by the Board to determine the actual value of the property. This form must be completed by you or your authorized representative, and returned to the Assessing Department within the time specified above. Failure to respond may cause you to lose your right of appeal, unless such failure to comply is by reason beyond your control. Please notify the Assessing Department if you require an extension.

Please note: this request is for income and expense information of the property and not the profession. Please furnish any additional information which you feel may influence the value of the property. The Assessors welcome any suggestions or questions you may have and will provide any assistance needed to complete this form.

If an owner or lessee of Class three, commercial or Class four, industrial or Class zero, multiple-use property (predominantly Commercial) or Class one, residential (e.g. apartment) or Class zero, Multiple-Use property (Predominantly Residential) fails to submit the information within the time and in the forms prescribed, the owner or lessee shall be assessed an additional penalty for the next ensuing tax year in the amount of \$250 for Commercial/Industrial & Residential. The Hanson Board of Assessors intends to assess penalties in accordance with the statute, (Ch59;S38D).

The Board of Assessors thanks you for your cooperation.

Board of Assessors

Town of HANSON, MA

Please return the completed statement to the Assessors' Office no later than the deadline of March 1.

If this questionnaire does not provide sufficient space to include all requested information, please attach additional sheets as necessary (a photocopy of this form is preferred).

I, the undersigned, certify that all information supplied herein is true and correct to the best of my knowledge and belief:

Tel #:	Signature:
Date:	Printed Name:

Section 1 - Ap	partment	and Rooming Ho	ouse Rents as	of: Jan. 1	, 2024					
Is this property	subject to	Rent Control? (d	circle one) YE	S NO						
Does this prop	erty bene NO	fit from any Feder If YES, please		stance Progra	ms? (circle o	ne)				
	_	ed by owner? (C		S NO	If YES, # of	units:				
Is Monthly Bas YES	se Rent de NO	etermined by On-S If NO, list Rent	Season and Off- in "On-Season'		? (circle one)					
Please provide	dates for	: "On-Season" Fr	rom to	"(Off-Season"	Fro	m	to		
Unit Type	Unit Count	Monthly Rent On-Season	Monthly Rent Off-Season	Parking *circle type	I	Number of nits Vacar	t Che	Responsibilities ck box for: Tenant La at & A/C []		
Efficiency							—		[]	
1-Bedroom							_	•	[]	
2-Bedroom									[]	
3-Bedroom							_ 1 "		[]	
Other								[]	ΓJ	
TOTAL				TOTA	AL					
		ents depending cribe any factors						pecify amount of	rent	_
variation. Ple	ease des	cribe any factors cial and Indust ed by owner? (c	s that influence	e the rents ar	Jan. 1, 202	of the pro		pecify amount of	rent	_
variation. Ple Section 2 – (Is this building	Commer g occupie NO Name	cial and Indust ed by owner? (c If YES, how r	rial Occupand	e the rents ar	Jan. 1, 202	of the pro		Responsit		_
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Section 2 – C Is this building YES Tenant if vacant, list Comments: S	Commer g occupie NO Name as "Vacar	cial and Indust ed by owner? (c If YES, how r Building #	rial Occupance ircle one) many square for Occupancy	e the rents are cy as of: eet are occup Annual Gross Rent	Jan. 1, 202 Died by own Rental Sq Ft Area	er? Date Lease	Lease Term	Responsit Check box for: Te Landlord Heat & A/C Electricity Water & Sewer Insurance Real Est. Tax Maintenance Build-Out Trash Removal	Dilities enant [] [] [] [] [] []	[] [] [] []
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Section 3 - Hotel, Motel, Inn, B&B, Cottage Colony, Campground, and Trailer Parks Property Use List current rates and occupancy below. Please enclose current rate schedule and brochure. Hotel [] [] Motel Seasons Inn [] On-Season Off-Season Shoulder [] Bed & Breakfast **Date From** [] Cottage Colony Date To [] Campground Occupancy % Trailer Park [] **Nightly Rates** Number of On-Season Off-Season Shoulder Unit Type Units MidWeek MidWeek Weekend MidWeek Weekend Weekend Efficiency Single Double Suite Trailer or Camp Site Other TOTAL

Is this property occupied by the owner? (circle one)

YES NO If YES, specify in comments below.

Is this property seasonal? (circle one)

Yes NO If YES, list opening date and closing date

What is the NET BOOK VALUE of all PERSONAL PROPERTY?

Comments: Section 3

If rates vary depending on floor level, directional exposure, or building please specify. Please describe any factors that influence the rate and/or the value of the property.

Section 4 - Sales Data

Grantor (Seller)

Grantee (Buver)

Sale Date
Days on Market
Asking Price
Sale Price

Grantee (Buyer)	Sale Price
	he Fair Market Value as of the date of the Sale? If NO, please specify below state Broker involved? If YES, list names and telephone number below.
YES[] - NO[]-Was the Sale forced	I (i.e., Court Order, Foreclosure)? If YES, please specify below.
YES [] -NO []-Was the Sale betwe	en relatives or intra-corporate?
YES [] -NO []-Was the Sale a trans	sfer of convenience (e.g., to correct defects in the Title, create joint tenancy)
YES[] -NO[]-Did the seller provide	e any concessions? If YES, please specify below.
YES[] -NO[]-Was there any trade	or any personal property included in the Sale Price? Please specify below.
YES[] -NO[]-Was the property pu	rchased to be used in conjunction with other properties? Specify below.
YES[] -NO[]-Have there been any	y changes to the Property since the date of sale. Please specify below.

Co	mn	nen	te.	Se	ction	١ 4
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(If the property is currently FOR SALE, please list asking price and broker's name and phone number.)

SECTION 5 – Annual Income and Expenses

Annual Income		2024	2022	2022
Annual Income Section 1: Apartments and	2021	2022	2023	
Section 2: Commercial and	9			
	n Rooms, Cottage, Sites, etc.			
This is for the uses listed				
in Section 3 Only	Food & Beverage			
III Section 5 Only	Telephone			
	Other			
Other Income (Specify)				
Reimbursed Operating Expe	enses			
	Gross Annual Income			
Annual Expenses				
Departmental Expenses	Rooms, Cottage, Sites etc.			
for Uses in Section 3 only.	Food & Beverage			
List other expenses below.	Telephone			
	Other			
Management Salary/Fee				
Outside Agency Fees/Comn	nissions			
Legal/Accounting Fees				
Advertising Fees				
Payroll & Payroll Tax				
Group Insurance				
Electricity				
Heat & Air Conditioning				
Water & Sewer				
Supplies				
Cleaning				
Decorating				
Repairs & Maintenance				
Trash Removal				
Snow Removal				
Replacement Reserves				
Insurance Per Year				
Land Rent				
Other (Specify)				
	Sub-Total Expenses			
Real Estate Tax				
Personal Property Tax				
Depreciation				
Interest				
	Total Annual Expenses			