

Board of Assessors
Colleen Healy, Chairperson
Marion A. Fantucchio, MAA
John Rowland, Assessor



Quincy City Hall
1305 Hancock Street
Quincy, MA 02169
P.617.376.1170
F.617. 376.1148

Map /Block/Lot:

04/01/2016

**38D Property Tax Return
FORM NC – New Construction**

Dear Taxpayer,

Please remember the following when submitting your Income and Expense form (38D);

The following information is requested pursuant to Massachusetts General Law Chapter 59, Section 38D, as amended, in order to determine market income and expense standards, and develop fair and equitable valuations. Please submit all requested information within sixty (60) days of the mailing date, 60 days from April 1st is **May 31st**.

Failure to comply within 60 days may bar you from appealing the assessment to the Massachusetts Appellate Tax Board. Furthermore, failure to comply will result in a two hundred fifty-dollar (\$250) penalty being levied. The penalty will appear on next year's tax bill. All information submitted is confidential.

You are signing an **Affidavit**, which is a sworn statement or statements made under oath and under penalty of perjury. When you sign an affidavit form, you affirm that the statements are made with personal knowledge or according to information and belief.

As required by Mass. General Law, chapter 59, Section 38D, I hereby declare under oath that the information and addenda are presented as being true, correct and complete to the best of my knowledge and belief and are submitted under the penalties of perjury.

If there is a Rooftop Antenna or Cell Tower on your property, please provide a copy of an executed lease. Providing the lease will allow the Assessors to send the bill directly to the owner of the Antenna.

Failure to return this form, within 60 days, forfeits your right to file an appeal with the Appellate Tax Board.

Sincerely,

The Board of Assessors

Property and Contact Information

Complete the following.

- 1. Building Name: _____
- 2. Parcel ID Number (s): _____
- 3. Property Location: _____
- 4. Owner Name: _____

If trust, denote all trustees and beneficiaries: _____

If partnership, please list all partners (general and limited): _____

- 5. Company: _____
- 6. Address: _____
- 7. City: _____ 8. State: _____ 9. Zip Code: _____
- 10. Email Address: _____
- 11. Representative: _____ 12. Phone: _____

1. Land Acquisition Data

(mm/dd/yyyy)

Date of Sale	Grantor	Land Area	Sale Price

If there are additional parcels, please note in comment section on page.

2. Demolition Costs: _____

3. Site Preparation Costs: _____

4. Total Construction Costs: _____

(Attach construction contract(s) and copy(s) of pro-forma submitted to financing institutions that granted the construction and /or permanent loan).

5. Building Data: Complete the following:

5a). Number of floors within the structure: _____ 5b). Number of basement levels: _____

Basement Level	Indicate Use (ex. Parking, storage, etc.)
1	
2	
3	
4	

5c.) Indicate primary occupancy type for each floor (If apartment complex, include apartment allocations per floor) gross floor area and net rentable area.

Floor	Use	Unit Type	Gross Floor Area	Net Rentable Area
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Total Floors:

Total Gross Area: Total Rentable Area:

<input type="text"/>	<input type="text"/>
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6. Leases/Letters of Intent

Attach list of all leases or letters of intent signed on or before January 1, 2016. Include lessee(s) name, base rent, square footage leased, utilities and tax escalators to be paid by lessee.

6a.) Please indicate all leases that have received free rent and/or tenant improvements above building standard. These concessions should include the lease term time period and total amount of free rent, building standard amount and total amount of tenant improvement square foot value above the standard.

6b.) Attach copy(s) of primary lease(s).

7. Building Plan:

(Attach copy of building plan or... give name of contact person _____)

8. Financing Obtained:

Date	Amount	Mortgage	Purpose

Sales Transaction

Please describe any and all sales occurring between 1/1/15 through 12/31/15.

Sales Date _____	Mortgage Amount _____
Sale Price _____	Mortgage Debt Ratio _____
% Interest _____	Mortgage Rate _____
Title Reference (Book/Page) _____	Mortgage Term _____
Seller _____	Non Realty Items Included _____
Buyer _____	Value of Non Realty Included _____

Comments

Please provide an overview of the building's operations in calendar year 2015.

Affidavit

As required by Mass. General Law, chapter 59, Section 38D, I hereby declare under oath that the above information and addenda are presented as being true, correct and complete to the best of my knowledge and belief and are submitted under the penalties of perjury.

Signature of Owner: _____ Date: _____

Print Name: _____

Telephone: _____

Contact E-mail address: _____

Signature of Preparer: _____ Date: _____

Print Name: _____ Title: _____

Telephone: _____

Contact E-mail address: _____

**Return this form by Mail
or Email to:**

Assessors Department
Quincy City Hall
1305 Hancock Street
Quincy, MA 02169

jreid@quincyma.gov