



LESLIE MORGAN, SHASTA COUNTY ASSESSOR-RECORDER
 1450 Court Street, Suite 208-A, Redding, CA 96001-1667
 TEL: 530-225-3600; FAX: 530-225-5673; Intra-County Toll Free 1-800-479-8009
 California Relay Service at 711; County website: www.shastacounty.gov

PROPERTY OWNER'S STATEMENT OF NEW CONSTRUCTION

Please correct mailing address if needed.

Please complete this form as accurately as possible to help us arrive at a fair assessment of the new residence.

PLEASE RETURN WHEN PROJECT IS COMPLETE.

I received a base year value transfer in the last two years
 Yes No

Living Area Additions

Dimensions: 1st Floor _____ ft x _____ ft

Dimensions: 2nd Floor _____ ft x _____ ft

Type of Rooms (bedroom, bath, etc.): _____

1st Floor: _____

2nd Floor: _____

Floor cover: _____

Wall cover: _____

Ceiling type (open beam, vaulted, etc.): _____

Bedroom count after construction _____

Bathroom count after construction _____

Bath Description

Toilets # _____

Sinks # _____

Tubs # _____ Material: _____

Tub/Shower combo # _____ Material: _____

Stall showers # _____ Material: _____

Kitchen Description

Oven Disposal Trash compactor

Range Dishwasher Microwave

Hood/Fan

Countertop finish _____

Length _____ ft _____ in

Heating/Air Conditioning

New Replace
 Central AC Heat Both (circle one)

 Evaporative Cooler

 Mini Split

 Floor or wall Heater

 Fireplace

 Wood burning stove

Garage, Shed, Carport, Covered Patio,

Cabana, Barn (Circle One),

Or Other: _____

Dimensions: _____ ft x _____ ft

Roofing material: _____

Wall framing (describe): _____

Floor material: _____

Other: (elec, plumbing, etc.): _____

Patio, Deck (Check one)

Covered Uncovered

Size: _____ ft x _____ ft

Cover material: _____

Deck material: _____

Generator

Type: Whole House Portable

Automatic Transfer Switch? Yes No

Power Source: Diesel Natural gas

Propane Other

If other, please specify: _____

Wattage: _____

Cost And Completion Data:

Were all materials and labor furnished by a Licensed

Contractor? Yes No Other

If other, please specify: _____

What was the project's Total Cost? \$ _____

Date Project completed _____

If incomplete on the lien date (January 1), what work remains to be done? _____

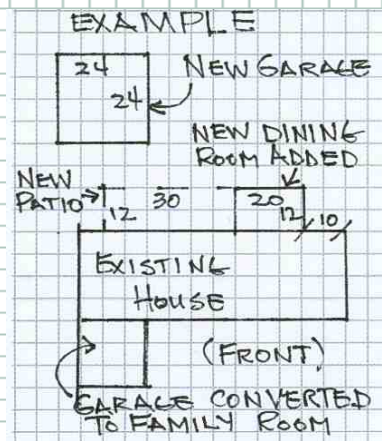
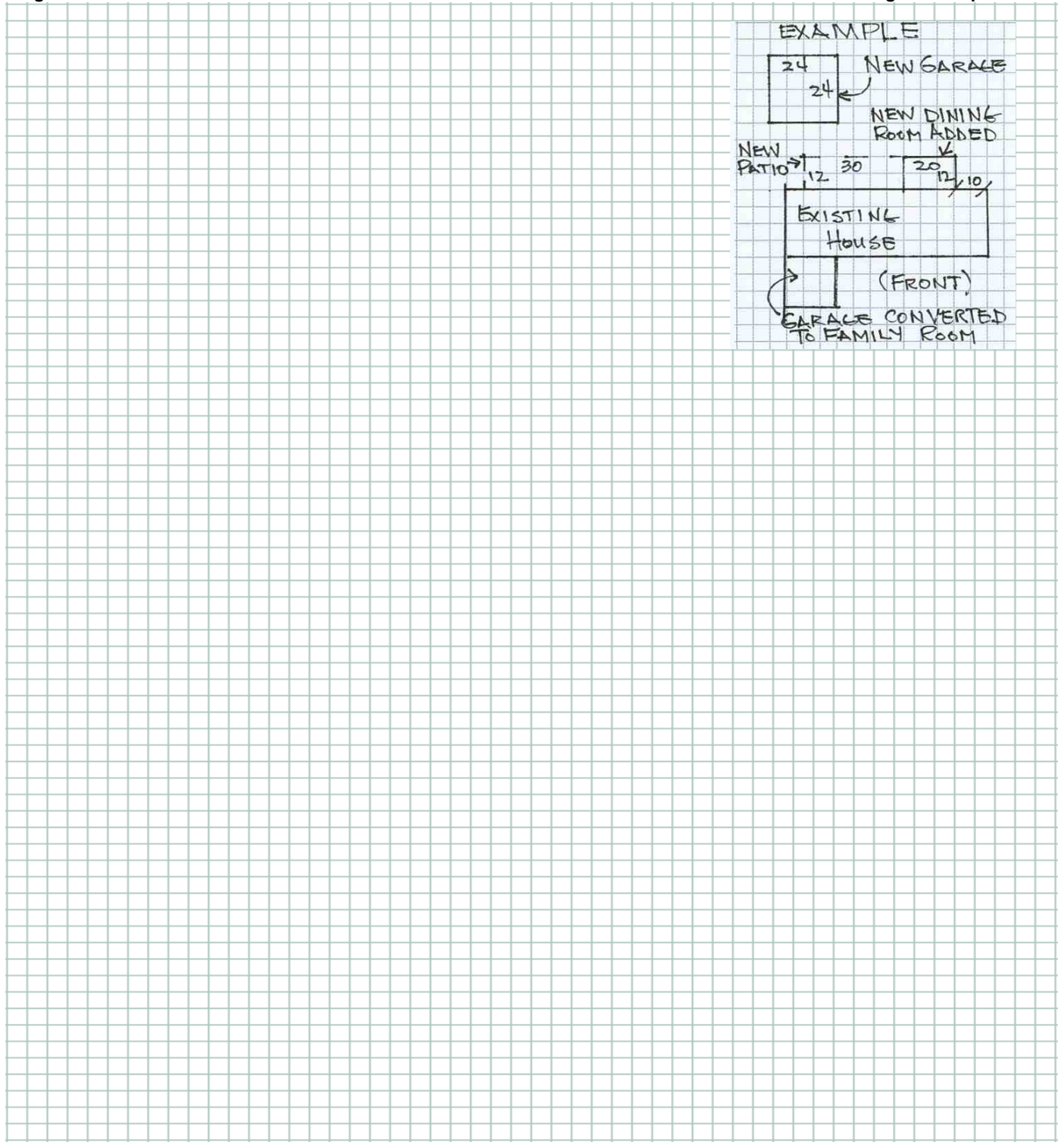
Please enclose copies of any construction contracts and photographs, if available.

You may submit this form and photographs via email to: RealProperty@co.shasta.ca.us – to ensure proper email delivery please include your name and parcel number in the subject line.

PLEASE COMPLETE OTHER SIDE

DIAGRAM OF NEW CONSTRUCTION

Diagram the new construction to show its exterior dimensions and location in relation to other buildings on the parcel.



The Assessor's Office may audit this statement for completeness and accuracy and may contact you for additional information as required. If you have any questions regarding this form, please call (530) 225-3600.

I declare under penalty of perjury that this statement, including any accompanying schedules and financial statements, is true, correct, and complete to the best of my knowledge and belief.

Print name of owner or agent

Signature of owner or agent

Date: _____ Daytime Phone (8am-5pm) _____ Home: _____