



APPLICATION FOR ESTIMATE OF PROPERTY ASSESSMENT AND TAXES

COMMERCIAL PROPERTY

I hereby request that the City of Dover Assessor's Office provide an estimate of the assessment and property taxes that will be levied against the land and improvements described below when such improvements are substantially complete and added to the city assessment roll. In consideration of the estimate, I accept and agree to abide by the terms and conditions that appear below over my signature.

Please provide the following information on the proposed improvements:

1. Property Identification No. (Tax map no.) _____
2. Use/occupancy (e.g. retail, office, hotel, etc.) _____
3. If multi-use, show sq. ft. of area for each use _____
4. Framing (e.g. wood joist) _____ Fireproof or resistant? _____
5. Exterior wall (e.g. brick veneer, metal, con. Block) _____
6. Roof cover (e.g. composition, asphalt tile) _____
7. Floor cover (e.g. concrete, carpet) _____
8. Sprinklers (e.g. wet, dry, none) _____
9. Heating & Air conditioning (e.g. central, unit, none) _____
10. TOTAL Gross Building Area in square feet _____ No. Stories _____
11. Include a footprint (plan view) or sketch of the perimeter of the structure.

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PAGE 2—TERMS AND CONDITIONS

I understand and accept that any estimate provided by the City of Dover Assessor's Office of assessments and property taxes that will apply to the improvements described above, and to their underlying land, is only an estimate and, because it is based on incomplete information, and structural attributes or specifications, tax rates, or valuations or assessment policies or other relevant conditions that may change subsequent to the date of this estimate, such estimate may differ substantially from the actual assessment and taxes which ultimately will be levied against the property. Therefore, I agree that the City of Dover and its employees and representatives cannot be held liable for any damages or other loss which may result from reliance by anyone upon this estimate.

Acknowledged and Agreed: _____ Date: _____
Signature

Print Name shown above _____

Phone No.: _____ Fax No.: _____

FOR USE BY THE CITY OF DOVER ASSESSOR'S OFFICE

Estimate for tax year _____

Property I.D. No. _____

Land Assessment _____

Improvement Assessment _____

Total Assessment _____

Tax Rate (current) _____

Property Taxes _____ (Does not include any utility fees or capitation taxes that may apply)

By _____

Date _____