



# Residential Property – Self-Reporting Form

<b>Name:</b>	<b>Assessment ID:</b>
	<b>Civic Address:</b>

**Dear Property Owner:**

In accordance with Section 171 of *The Cities Act*, we are asking for your co-operation in completing this form and returning it to SAMA by \_\_\_\_\_. **This form is intended for residential buildings.** To provide details of any commercial buildings located on the property, please include the information on the opposite side of this form/page. To view your property information currently on file, please go to [www.sama.sk.ca](http://www.sama.sk.ca) \ Property Owner Services \ Assessments Online .

Please expect a SAMA Appraiser will visit your property to review the exterior and take an exterior photo(s) of buildings.

**Please fill in the blanks and circle the appropriate responses where applicable.**

**Building Details:** Please indicate the DIMENSIONS (in feet):

Deck \_\_\_\_\_ Storage Shed \_\_\_\_\_

Covered Patio \_\_\_\_\_

**Interior Details:** Fireplace(s): Yes / No Number \_\_\_\_\_ Air Conditioning: Yes / No Type: central/window/portable

Does your home include suites? Yes / No If so, number of suites: \_\_\_\_\_

**Plumbing Fixtures:** Please indicate the total number of plumbing fixtures: \_\_\_\_\_

(If your home contains suites, please **also** include number of plumbing fixtures in all suites.)

The following each constitute **one** plumbing fixture:

bathroom sink, kitchen sink, toilet, bathtub, separate shower stall, water heater

(**Example:** water heater + two bathrooms sinks + two toilets + two bathtubs + one kitchen sink = 8 plumbing fixtures)

**Basement Finish:** Basement area is considered finished when 2 of the 3 following components are present:

- Finished Walls
- Finished ceilings
- Floor covering

If 2 of these components are present in your basement, **what is the estimated** Finished Area (check one):

\_\_\_\_\_ 0%    \_\_\_\_\_ Minimal (10%)    \_\_\_\_\_ ¼    \_\_\_\_\_ ½    \_\_\_\_\_ ¾    \_\_\_\_\_ Full\*

(\*Full finish allows for a small area to be unfinished for the utility/furnace room areas.)

**Faults or Defects:** Please itemize any significant abnormal faults with this property that could affect value:

\_\_\_\_\_

Please **sign** to confirm the above information is correct: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please return completed form in postage paid return envelope OR email to [moosejaw.region@sama.sk.ca](mailto:moosejaw.region@sama.sk.ca). If you have any questions, please contact SAMA at 306-694-4425 or 1-866-398-7889