OSAGE COUNTY APPRAISER'S OFFICE

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Dear Property Owner:

While you were out, a representative was here to confirm information about the dwelling due to one of the following reason:
_____New Construction _____Sales Information _____ A reinspection is required at least once every six years

Please keep in mind that our field representatives are not appraising your property, they are only verifying data on file and recording changes. This information will be evaluated along with local market and economic data before any change in the estimate of value is considered. In an effort to assure that your property receives an accurate and fair evaluation, please complete the questionnaire on the back and return it to us in the provided return envelope **within 10 days**. This will allow us to confirm that the information we have on file is the most correct and current for your property. In the absence of such input from you, it will be necessary to estimate the interior features.

Thank you for taking your time to assist us in this important phase of the appraisal process. Should you have any questions regarding the questionnaire, please contact us at the phone number listed above.

INSTRUCTIONS

1) Utilities – Record all utilities that are available to the property, even if not currently utilized.

2) Year Built - Write the year that the main structure of the home was built. Check estimated if you are unsure of the exact year.

3) Attic/Upper Level - Attic is described as the area above the main living area. Check whether or not the upper area has a permanent staircase for access. Check if it is finished as living area or unfinished area with rafters showing.

4) Heating - Check the listing that best describes the system type that is the main heating source.

5) Air Conditioning - Check the listing that best describes the type of cooling system for the dwelling.

6) Fireplaces – List the number of each type of fireplace. Count each fireplace opening as a separate unit.

7) Number of Bedrooms - List the number of bedrooms on the main and upper living areas. Include bedrooms that are being used for other purposes (i.e., den, office, storage, etc.). Do not include basement bedrooms in this section. They will be listed in the "Basement" section below.

8) Total Rooms – List the number of each type of room, not including bathrooms or utility rooms. Do not include basement rooms as they will be listed in the "Basement" section below.

9) Plumbing - List the number of each type of bathroom and the number of additional plumbing fixtures including those in the basement if any.

10) Basement - Check the basement listing that best describes how much basement is under the main living area or under any additions to the dwelling. List the square feet or dimensions of the basement that has been finished as living area. Finished area in the basement can be divided into two types: area that is similar in finish quality to that of the main living area (drywall, and similar quality doors/trim/floor covering); and area that is finished to a lesser degree of quality than that of the main living area (paneling, drop tile ceilings, vinyl flooring or indoor/outdoor carpet).

11) Garage Finish – Check all that apply to best describe the type of garage finish present and the number of car spaces available.

12) Additions/Renovations - Include the date and cost of rooms added to the original dwelling. Renovation might include reconfiguration of the interior to add a bathroom without changing the exterior.

13) Exterior Remodeling - Check the areas that have been remodeled in the last 10 years and write in the date and total cost if known.

14) Interior Remodeling - Check the areas that have been remodeled in the last 10 years and write in the date and total cost if known.

ADDITIONAL MANUFACTURED HOME INFORMATION

List Make and Model of the Manufactured Home.
Indicate the listing that best describes the type of foundation the Manufactured Home is situated on.
Indicate who the Owner of the Manufactured Home if different than the Land Owner.

15) Please sign and indicate whether you are the owner, tenant, agent or manager.

PARCEL ID: _____ Quick Ref # _____
Property Address: _____ NBHD: _____ DCI: _____
Owner: _____ DATE: _____

Please read the instructions on the reverse side BEFORE answering the following questions.

1) Utilities: (Check all that apply) None___ Public Water___ Public Sewer___ Well___ Gas___ Septic___ Lagoon___
2) Year Built: _____ Check if estimated ____
3) Attic/Upper Level: Is there a permanent staircase? Yes___ No___ Living Area _____sq ft Unfinished Area _____sq ft
4) Heating: System type – Hot Water Baseboard___ Steam Baseboard___ Elec. Baseboard___ Elec. Ceiling Radiant___
Elec. Panel___ Hot Water Floor Radiant___ Hot Water Radiators___ Steam Radiators___ Space Heater___
Gravity Furnace___ Wall Furnace___ Floor Furnace___ Forced Air Furnace___ Geothermal___ Heat Pump___
Wood Stove___ (ducted? Yes or No) Other_____
5) Air Conditioning: Central (with ducts) _____ Wall Unit____ Window Units_____ None_____
6) Fireplaces: (Number of) Brick/Stone_____ Prefabricated Built-in Units_____ Free Standing_____ Direct Vent_____
7) Number of Bedrooms (Not including basement): Bedrooms_____ Converted Bedrooms (dens, studies, etc.) _____
8) Number of Total Rooms (Not including basement): Kitchen___ Dining Room___ Living Room___ Kitchen/Dining Combo___
Living/Dining Combo___ Family Room___
9) Plumbing (all floors including basement): Full Baths____ 3/4 Baths (Shower-no tub) ____ 1/2 Baths_____
Additional Plumbing Fixtures: Separate Tub/Shower____ Double Vanity Sinks____ Water Heaters____
Washer hookup_____ Laundry Sink_____ Spa Tub_____ Bidet_____ Wet Bar_____ Other_____
10) Basement: None___ Crawl Space___ Part___ (size_____) Full___ Is basement finished? Yes ____No ____
If Yes, What is the size of the finished area? _____sq ft or dimensions: _____ft. wide by _____ft. long
Please check the type of finish that applies:
Walls: Sheetrock ____ Paneling ____ Painted Cement ____ Other _____
Ceiling: Sheetrock ____ Drop Ceiling ____ Other _____
Floor: Carpet ____ Tile ____ Other _____
Is the quality of finish similar to the main living area? Yes ____ No ____
Finished Rooms (#): Rec Room____ Bath____ Family Room____ Other _____
Bedrooms (with egress window or walkout basement) _____
11) Garage Finish: None (exposed framing) _____ Insulation_____ Ceiling_____ Walls_____ # of cars: _____
12) Additions/Renovations (please describe)_____
Cost $_____ Date_____
13) Exterior Remodeling (within the last 10 years): Windows_____ Roof_____ Siding_____ Foundation_____
Cost $_____ Date_____
14) Interior Remodeling (within the last 10 years): Kitchen___ Bath___ Electrical____ Plumbing___ Heating/Cooling____
Cost $_____ Date_____

Is this a rental property? Yes____ No____
Monthly Rent $_____ Utilities included in rent? Yes____ No____

Additional Information If a Manufactured Home

Make_____ **Model**_____
Type of Foundation: Continuous Concrete Block____ Continuous Concrete____ Continuous Treated Wood____
None____ Other_____
Do you own the Land? Yes____ No____ If not, Manufactured Home Owner's Name:_____
****
Additional Comments:

Owner____ Tenant____ Agent____ Manager____

Please print name_____ **Signature**_____
Weekday Phone Number between 8:00 A.M. & 5:00 P.M._____