



# Office of Tom J. Bordonaro, Jr., County Assessor

1055 Monterey Street, Suite D360, San Luis Obispo, CA 93408  
(805) 781-5643 Fax: (805) 781-5641 Website: [slocounty.ca.gov/assessor](http://slocounty.ca.gov/assessor)

Assessor's use only:

## Property Owner's Statement of Residential Construction/Demolition

### PERMIT DESCRIPTION

We have observed new construction or have been notified that a permit was issued for the property identified above. The Assessor is required by law to gather information regarding all new construction for property tax purposes.

To properly assess your property, an on-site inspection by an appraiser is necessary. This questionnaire has been designed to assist the appraiser with the valuation of your new construction. Please complete this form and return it in the envelope provided, no later than 15 days following completion of the project. Should you have any questions regarding this form, please call (805) 781-5643 or if located in the North County call (805) 461-6143.

#### ADDITION, CONVERSION, REMODEL *(Circle one)*

Use of new area: \_\_\_\_\_

Previous use of area: \_\_\_\_\_

Was any area demolished prior to the new construction?

Yes  No Cost: \_\_\_\_\_

(If yes, please complete Demolition Section on reverse side.)

Size of addition or converted/remodeled area: \_\_\_\_\_ sq. ft.

Foundation:  slab  raised  other: \_\_\_\_\_

Exterior Walls:  stucco  siding  other: \_\_\_\_\_

Roof Cover:  composition shingle  tile

shake  composition roll  hot mop

Floor Cover:  ceramic tile  marble tile  carpet

vinyl  hardwood  other: \_\_\_\_\_

Heating:  forced air  wall

air conditioning  fireplace

For kitchen and bath additions or remodels, please provide an interior description in the remarks section on the reverse side.

Total number of rooms after addition, conversion, or remodel:

Living room _____	Bedrooms _____
Kitchen _____	Full baths _____
Dining room _____	¾ baths _____
Family/Den _____	½ baths _____
Utility room _____	Other _____

#### GARAGE, SHED CARPORT, BARN, ENCLOSED PATIO, CABANA, OTHER \_\_\_\_\_ *(Circle one)*

Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
length width

Foundation type: \_\_\_\_\_

Exterior wall type: \_\_\_\_\_

Roof cover: \_\_\_\_\_

Interior walls:  drywalls  unfinished

Floor cover type: \_\_\_\_\_ or  none

Other: (electrical, plumbing, etc.) \_\_\_\_\_

#### COVERED PATIO, UNCOVERED PATIO, DECK, PAVING, OTHER \_\_\_\_\_ *(Circle one)*

Size: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.  
length width

Material: \_\_\_\_\_

Elevation:  on grade  elevated \_\_\_\_\_ ft.

railings  stairs # of steps \_\_\_\_\_

Roof type:  flat  shed  gable

Roof cover:  shake  composition shingle

tile  hot mop  trellis  other \_\_\_\_\_

Size of covered area: \_\_\_\_\_ x \_\_\_\_\_ or \_\_\_\_\_ sq. ft.

**PLEASE COMPLETE THE REVERSE SIDE**

