

RETURN THIS APPLICATION TO THE BLOOMINGTON ASSESSOR'S OFFICE BY THURSDAY, MARCH 31, 2016.

Application for property other than residential continued.

Please check type of property.		
Apartment	Office	Warehouse
Motel/Hotel	Commercial	Industrial
Other (describe):		
If an apartment, please complete this section.		
No. of Eff units _____	No. of 1-BR units _____	No. of 2-BR units _____
Rent/unit:	Rent/unit:	Rent/unit:
No. of 3-BR units _____	No. of 4-BR units _____	Pool/Party room:
Rent/unit:	Rent/unit:	Other:
Fire insurance coverage.		
Amount:	Carrier:	
Is any part of the real property NOT owned by you?		
If yes, please explain:		
If you are leasing the property, please complete this section.		
Name of lessee:		
Address of lessee:		
When did the lease start?:	Amount of the lease:	
Terms of the lease:		
Indicate any leasehold improvements:		
If the property is rented, please complete this section. (Attach operating statements)		
Annual gross potential rent:	Annual unreimbursed expenses:	
Explain if the tenant pays any taxes (full or partial), insurance, maintenance, etc:		
In support of income information, please enclose a copy of income statements from all sources, operating expense statements and/or a copy of any leases. Indicate if a lease has been recorded.		
I AM THE OWNER/AGENT OF THE REAL PROPERTY DESCRIBED ON THE REVERSE SIDE OF THIS FORM, AND MY OPINION OF VALUE AS STATED ON THE REVERSE SIDE OF THIS FORM IS ACTUAL VALUE IN MONEY AS OF THE ASSESSMENT DATE OF JANUARY 2, 2016. I DO HEREBY AFFIRM THAT THE ABOVE INFORMATION IS COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
Signature of applicant:		

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RETURN THIS APPLICATION TO THE BLOOMINGTON ASSESSOR'S OFFICE BY THURSDAY, MARCH 31, 2016. YOU MAY BE CONTACTED TO HAVE YOUR PROPERTY REVIEWED PRIOR TO THE SCHEDULED BOARD MEETING.