



ASSESSMENT REQUEST FOR INFORMATION
MOBILE HOME PARK
2025 Assessment Year

The *Municipal Government Act* (MGA) authorizes collection of this information under s.294(1)(b), s.295(1) and s.295(4).

This information is due on or before **July 9, 2025**

Property Address:	Tax Roll Account:
Property Owner Name:	
Name of Park:	
Total Sites on Property:	

Expenses must reflect the annual fiscal period ended prior to July 1, 2025.

To be considered complete, Rent Rolls and Financial Statements **MUST** cover all requested information.

Note: Assessment values are prepared using any other available information should this request fail to be completed.

PROPERTY INCOME

Site or Unit #	Asking Rent if Vacant	Actual Rent as of June 2025	Date of Last Rent Change	Number of Months Vacant

If you need extra space, please attach additional page.

Vehicle / RV Parking Income	
Number of Stalls Rented	
Monthly Rent per Stall	
Other Parking Income	

Other Income (Annual)	
Common Area Charges	
Laundry	
Other Income (Please Specify)	

PROPERTY EXPENSES (Actual Annual Property Expenses)

(DO NOT INCLUDE mortgage, bank charges, debt charges, depreciation, or business expenses)

GENERAL:	AMOUNT PAID
Management	
Wages: Caretaker	
Annual Insurance	
Utilities (water, sewer, power, gas, cablevision, internet)	
Property Taxes	
License Fees	
MAINTENANCE & REPAIR:	
Painting / Decorating	
Repairs / Maintenance <i>(Please specify in comment section below)</i>	
Grounds Maintenance	
Snow Removal	
MISCELLANEOUS:	
Supplies	
Legal & Audit	
Advertising / Marketing	
Other <i>(Please Specify)</i>	
TOTAL ACTUAL ANNUAL REPORTED EXPENSES	

CAPITAL EXPENDITURE

Items Replaced or Upgraded <i>i.e., infrastructure, capital upgrades (not mobile home renovations)</i>	Year Built	Year of Renovation	Cost

*If you need extra space, please attach additional page.***COMMENTS**

APPRAISALWas there an appraisal done on the property in the last 3 years? ☐ Yes ☐ No

If Yes, Date of Appraisal: _____ Purpose of Appraisal: _____ Amount: _____

CERTIFICATION**All information provided herein has been examined by me and is true, current, and complete to the best of my knowledge.**

Signature: _____

Name: _____

Daytime Phone No: _____

Email: _____

Date: _____