Dear Property Owner:

Please complete the rental survey included with this letter for the property address listed above and return it to our office. The rental information you provide helps ensure that fair and equitable values are placed on all rental properties.

The information you provide is kept confidential and will be used in mass appraisal analysis to establish market trends. It will not be filed with the public records and will not be available for public inspection.

If you need any assistance filling out this form, please call Danielle directly at 303-441-4842 (dsimpson@bouldercounty.org), or Sara directly at 303-441-3566 (sthorpe@bouldercounty.org). You may also submit this form by faxing it to 303-441-4996. Please provide this information to the Assessor’s Office by April 1.

Sincerely,

Cynthia Braddock
Boulder County Assessor

Rental Information

Property Address: ________________________________________________________________

1) Total # of bldgs.: ____________________

2) 2014 Average Vacancy Rate: _________ %

3) Condition (circle one): Fair Average Good Very Good Excellent

4) Remodel Year (if applicable): ____________________
   If remodeled, please describe the extent of the remodel:
   ________________________________________________________________


(CONTINUED ON REVERSE)  

Attn: Danielle or Sara  1/27/2017
5) Total # of Units:

<table>
<thead>
<tr>
<th>Studios:__________</th>
<th>Baths:______</th>
<th>Avg Rent:_______</th>
<th>Avg Sqft: _______________</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Bdrm:___________</td>
<td>Baths:______</td>
<td>Avg Rent:_______</td>
<td>Avg Sqft: _______________</td>
</tr>
<tr>
<td>2 Bdrm:___________</td>
<td>Baths:______</td>
<td>Avg Rent:_______</td>
<td>Avg Sqft: _______________</td>
</tr>
<tr>
<td>3 Bdrm:___________</td>
<td>Baths:______</td>
<td>Avg Rent:_______</td>
<td>Avg Sqft: _______________</td>
</tr>
<tr>
<td>4+ Bdrm:___________</td>
<td>Baths:______</td>
<td>Avg Rent:_______</td>
<td>Avg Sqft: _______________</td>
</tr>
</tbody>
</table>

6) Are any of the units Sleeping Rooms (Rent bedroom only, have use of a community kitchen/bath)?
   If yes, how many sleeping rooms? ______ Avg rent per Sleeping Room? ______

7) Are there any subsidized Rents? Y / N Price per Unit: ____________

8) Are any units restricted by age or disability? Y / N # of Units: ______

9) Utilities Paid by Tenant (circle all that apply):  Gas   Electric   Water   Cable   Internet   None

10) Type of Off-street Parking:

<table>
<thead>
<tr>
<th>Open/Parking Spaces</th>
<th>Carport</th>
<th>Enclosed/Garage</th>
<th>Fee for Parking</th>
<th>No Parking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total #</td>
<td>Total #</td>
<td>Total #</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

11) Laundry (circle one): Onsite facility W/D hookups in units W/D in units None

12) Additional Amenities (circle all that apply): Clubhouse Pool Gym Tennis Court Elevators Security Entrance

13) Additional Information: Please use the space below to include any additional information.

________________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Thank you for taking the time to respond to this survey and assisting our office in maintaining accurate records.

COMPLETED BY (please print): ____________________________________________________________

CONTACT NUMBER: ____________________________  1/27/2017