

2019 General Revaluation Rockingham County Commercial/Industrial Review Form

Rockingham County Tax Administration- PO Box 68- Wentworth, NC 27375-0068- Phone 336-342-8293-Fax 336-342-8448
e-mail address: thurst@co.rockingham.nc.us

Please provide the information requested as complete as possible. Attach copies of appraisals and/or any other information important to the valuation of this property. Please use a separate form for each property appealed.

Please return this information within 20 days.

If there is **more than one primary structure**, use a separate form for **each** structure.

If this property is *rented or leased*, please provide *detailed income and expense information*. Worksheets are available.

Parcel ID#-_____ **Property owner**-_____

Property address-_____

Required-What is your opinion of value? _____

What information is this opinion based on? _____

Name of Corporate contact person, address, telephone number and/or email-_____

Name of On-site contact person (if different), telephone number and/or email- _____

Primary Building Information Please fill out all applicable information.

Type of business-_____ Use of building-_____

Year of construction-_____ Any changes or additions in the last five years? _____

Exterior wall type- masonry_____, metal_____, concrete_____, or other _____

Total square feet of building-_____ **Building wall height**-_____

	Square Feet	Ceiling Height	Heated Sq. Ft.	Type of Heat	Cooled Sq. Ft.	Type of Cooling	Sprinkled Sq. Ft.
Main Floor Area							
Warehouse/ Storage Area							
Basement Finished							
Basement Unfinished							
Office Main Floor							
Office Second Floor							
Mezzanine Office							
Mezzanine Storage							
Second Floor							
Third Floor							
Fourth Floor							

Is any of the main floor and/or upper floors heated and/or cooled for the sole benefit of the product produced? If yes, how many square feet main floor, _____, upper floors, _____.

Number of freight elevators-_____ type and capacity _____

Number of passenger elevators-_____ type and capacity _____

Number of built-in dock levelers-_____ Age of heating and cooling units- _____

Type of roof and estimated age- _____

SEE REVERSE

Secondary Improvements

If there is not enough room to describe an improvement, please attach additional pages.

Freestanding utility, storage, or equipment housing buildings:

#	Age	Use	Masonry	Metal	Frame	Square Feet
1						
2						
3						
4						
5						
6						

Asphalt pavement- sq. ft. _____ age _____ **Concrete** pavement - sq. ft. _____ age _____

Outside storage tank information:

#	Age	Liquid or Bulk	Use	Diameter and Height or Capacity	Vertical or Horizontal	Construction- Steel, Concrete, or Other	Welded, Bolted, or Pressurized	Height If Elevated
1								
2								
3								
4								
5								
6								

Fencing- Height- _____, Chain link or other _____ Linear feet- _____

Railroad spurs- total length- _____

Pole lights-type and number- _____

Miscellaneous Improvements- _____

Additional Information- Please put any information concerning this property you feel is relevant to the review of the property's value; feel free to attach any appraisals or other information. _____

COUNTY OFFICE USE ONLY

Date Received _____ Was all information provided? _____ Was more information requested? _____

Comments- _____

Expenses for Year 20 _____
PLEASE do not list any expense twice!

ANNUAL OPERATING EXPENSES			
MANAGEMENT	FEE	\$	
	COMMISSIONS	\$	
	LEGAL AND ACCOUNTING	\$	
GENERAL	WAGES AND PAYROLL	\$	
	EXPENSES	\$	
	GROUP INSURANCE	\$	
	BUILDING SUPPLIES	\$	
	GARBAGE COLLECTION	\$	
	ADVERTISING	\$	
	MISCELLANEOUS (DO NOT PUT VACANCY LOSS HERE)	\$	
CLEANING	SUPPLIES	\$	
	CONTRACT SERVICE	\$	
UTILITIES <i>(Not charged to tenant)</i>	ELECTRIC	\$	
	GAS	\$	
	WATER/SEWER	\$	
	TELEPHONE	\$	
ELEVATORS	REPAIRS	\$	
	CONTRACT SERVICE	\$	
MAINTENANCE / REPAIRS	DECORATING	\$	
	MAINTENANCE EXPENSES	\$	
LARGE CAPITAL EXPENSES	MAJOR REPAIRS NOT USUALLY DONE EACH YEAR	\$	
RESERVE FOR REPLACEMENTS	Amount held in reserve for replacing items such as roofs, water heaters, etc.	\$	
FIXED EXPENSE	REAL ESTATE INSURANCE (ANNUAL)	\$	
	REAL ESTATE TAXES	\$	
	OTHER EXPENSES (Homeowner's Association Fees, etc.)	\$	
	DEFINE EXPENSE	\$	
	DEPRECIATION	\$	
	INTEREST ON MORTGAGE	\$	
	LAND RENT (if leased land)	\$	
	TOTAL	\$	

Please attach any additional information that you feel may be related to this data. **If you have this information in another format or spreadsheet, you may submit it in that form.** *Please show only one year's expense per worksheet.*

Signature of Owner or Agent

Telephone Number

Date