

## Improvement Estimate Form

Susquehanna County Assessment Office 31 Lake Ave., P.O. Box 218 Montrose, PA 18801 Phone: (570) 278-4600 Ext. 4001 Fax: (570) 278-1302 Office hours: Monday-Friday 8:30AM-4:30PM

Estimates can be requested by property owner, property owner's attorney, and proposed owner.

Date of request:	Parcel	#:•	•••••·	
			Email:	
Property Location:				
Street			ate/Zip Municipality	
Address of proposed build (if differen	nt than above):			
House/Addition (Section A)				
<i>1a</i> . New Build or Existing Structure?				
2a. Dwelling Type (Circle one): Trailer Doublewid	e Stick Built	Modula	r Addition to Structure	
<i>3a</i> . Dimensions:	X feet.	4a. Numb	er of Stories:	
5a. Which of the following is the hou Basement If applicable, is the basement fini	Slab	le one): Crawl Space	Piers	
6a. Exterior Finishes (Circle all which Vinyl Wood	h apply): Brick Stone	Log	Other	
7a. Attached Garage? <b>O</b> Yes <b>O</b> Garage Second Story space? <b>O</b>	No If 'Yes', garag Yes <b>O</b> No If 'Yes	e dimensions: s', will space be fini	shed? <b>O</b> Yes <b>O</b> No	
Outbuilding (Section B)				
<i>lb.</i> Building Type (Circle one): Garage	Closed Shed	Open Shed	Barn	
Pool (In-ground only)	Pole Barn	Other		
2b. Dimensions: X	Kfeet.	<i>3b</i> . Numb	er of Stories:	
4b. Exterior Finished (Circle all which	h apply):			
Vinyl	Wood	Brick	Stone	
Log	Metal	Other		
5b. Flooring (Circle one):				
Concrete	Crushed Stone	Other:		
6b. Utilities to building (Check all whi	ch apply): <b>O</b> Electr	ic <b>O</b> Septic	<b>O</b> Water	
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Please note: Figures formulated, based on this form, are <u>ESTIMATES ONLY</u> and will be adjusted depending on the final review of the construction. 'Size', 'quality' and 'use' are all determining factors and may contribute to a value change. Estimates are based solely on the information available on this form in conjunction with the date of request. Please allow 5-10 business days for all estimates to be completed.