

Town of Bradford — 2027 Revaluation Resident Submitted Property Card

Name: _____

Map / Lot Number: _____

Phone Number: _____

Mailing Address: _____

Physical Address: _____

Year Built: _____

Exterior Walls: _____

- | | | |
|--------------|-------------|----------|
| 1. Wood | 5. Shingle | 9. Other |
| 2. Vin/Al | 6. BR/STN | |
| 3. Composite | 7. Single | |
| 4. Asbestos | 8. Concrete | |

Roof Surface: _____

- | | |
|-------------|--------------|
| 1. Asphalt | 5. Composite |
| 2. Slate | 6. Wood |
| 3. Metal | 7. Roll |
| 4. Asbestos | 8. Other |

Foundation: _____

- | | |
|----------------|----------|
| 1. Concrete | 5. Slab |
| 2. C. Block | 6. Piers |
| 3. Brick/Stone | |
| 4. Wood | |

Basement: _____

- | | | |
|--------------|---------------|---------------|
| 1. ¼ BSMT | 5. Crawlspace | 9. Dirt floor |
| 2. ½ BSMT | 6. Dry | |
| 3. ¾ BSMT | 7. Wet | |
| 4. Full BSMT | 8. Damp | |

Finished Basement Area: Rough amount of square footage _____

Description of the finish in basement area:

Heat Type: _____

Cool Type: _____

- | | | | |
|----------------|-------------|--------------|---------|
| 1. Baseboard | 5. FWA | 1. REFRIG | 5. None |
| 2. HWCI | 6. GRAVWA | 2. EVAPOR | |
| 3. Heat Pump | 7. Electric | 3. Heat Pump | |
| 4. Radiant | 8. FL/Wall | 4. W&C Air | |
| 9. Other _____ | | | |

Any Cathedral Area?: Amount of footprint area (1/4, 1/2, 1/3, 2/3, 3/4) circle one

Bedrooms: _____

Bathrooms: _____

Additional Fixtures: _____

Working Fireplaces: _____

List of Outbuildings (Garages, Barns, sheds, Pools etc)

<u>Description</u>	<u>Year Built</u>	<u>Any Living Quarters or Plumbing</u>	<u>Finish Area Type</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is there any part of the structure that is still incomplete? Yes _____ No _____

If yes, please explain what needs to be finished below:

Any additional comments:

Please return completed form to the Town Office. Thank you!