Lot No._____

Address_____

Alternative Address_____

SALES VERIFICATION FORM
RENT CONTROL/ MULTI-FAM
CITY OF CAMBRIDGE
BOARD OF ASSESSORS

No. of Rent Controlled Units:_____

No. of Exempt Units:_____

Total Purchase Price:_____ Date of Purchase_____

Did this sale:

Occur between relatives?_____Friends?_____

Involve a government agency?_____

Involve a non-profit institution?_____

Reflect a transfer of convenience (change title, etc.)?_____

Reflect a forced sale (divorce, foreclosure, etc.)?_____

Did this transaction relate to another transaction and/or involve multiple parcels?_____

Has the property been renovated or substantially repaired since the date of transfer?_____Describe nature and cost_____

_____

Please briefly explain any unusual financing considerations:

Unpaid taxes, liens, etc?_____

Assumed mortgage?_____

Seller financing?_____

Trade/exchange?_____

Please rank your motivations in purchasing a rent controlled property:

_____Affordable place of residence

_____Tax shelter benefits

_____Extra income from rental units

_____Capital appreciation potential

_____General Investment

_____Other units available for friends or relatives

_____Speculation that rent control may cease

_____Plan to remove from rent control or redevelop site

_____Other:_____

Are you (all owners) occupying more than one unit? (#)_____

If applicable, was the unit you occupy vacant at time of sale?_____

Do you consider yourself familiar with Rent Control Board rules and procedures?_____

Were there any circumstances related to the sale which suggests that the price paid was either more or less than the fair market value?_____

_____

_____

Your Name:_____Address:_____

Phone #_____ _____

Real estate broker handling sale_____

CITY OF CAMBRIDGE

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139 • (617) 498-9007

ASSESSING DEPARTMENT

Sally Powers, Director
Kevin T. McDevitt, MAA, CRA
Faith D. McDonald, CMA, RMA, MAA, CA-S

Dear Property Owner:

Our records indicate that during 1986, 1987, or 1988 you were a party to the sale of the property noted on the enclosed questionaire. The laws of the Commonwealth of Massachusetts specify that all real property must be assessed at 100% of full and fair market value. To meet these standards assessors must continually study property sales patterns.

The enclosed questionaire is intended both to verify our records of the transaction and to solicit information which will enable us to determine whether the sale reflects "true market value."

Please note that the information you provide is NOT used to set your property assessment directly. Rather, your purchase, if deemed to reflect true market behavior, becomes part of the sales information base used to value all properties.

Your prompt cooperation is appreciated. A stamped addressed envelope is enclosed for your convenience in replying.

Very truly yours,

Peter R. Helwig
Revaluation Director

Lot No._____

Address_____

Condo Unit No._____

SALES VERIFICATION FORM
CITY OF CAMBRIDGE
BOARD OF ASSESSORS

Total Sales Price:_____ Date of Purchase:_____

Number of Dwelling Units (when purchased):_____

If you did not purchase full interest (fee simple) in the property, please explain:_____

Was any unusual furniture, equipment, or other personal property included in the sales price? State general nature and approximate value:_____

Were any unpaid taxes, assessments, or liens involved in the sale? Please state amounts and whether or not included in sale price:_____

_____

_____

Was this sale related directly or indirectly to another transaction?

_____

Did you assume any pre-existing mortgage?State amount and whether included in sale price:_____

Was any "creative" or non-standard financing invloved in the sale? Explain:

_____

_____

_____

Did this sale:

Occur between relatives?_____

Occur between friends?_____

Involve a government agency?_____

Involve a non-profit institution?_____

Reflect a transfer of convenience (to correct a title defect; to create a joint tenancy; etc.)? _____

Reflect a forced sale (in lieu of foreclosure; divorce;etc.)?____

Are you aware of any circumstance which may have affected the seller's position adversely with respect to this sale ?_____

_____

Do you consider the sale price to be the fair market value?_____
If not, why?_____

_____

_____

Name_____ Address_____

Phone_____ _____

Real estate agency handling sale:

TOWN of BROOKLINE

Massachusetts

ASSESSORS OFFICE
232-9000

333 WASHINGTON STREET
BROOKLINE, MASS. 02146

QUESTIONNAIRE FOR THE CONFIRMATION OF REAL PROPERTY SALES

Seller: _____

Buyer : _____

Address: _____

Total Sales Price: $_____

Downpayment : $_____

Financing:	Amount	Interest	Years	Name of Lender
1st Mortgage :	$_____	@ ___%	_____	_____
2nd Mortgage :	$_____	@ ___%	_____	_____
3rd Mortgage :	$_____	@ ___%	_____	_____
Other	$_____	@ ___%	_____	_____

Did the buyer assume payment of any of the seller's existing financing? ____

If yes, please state amount: $_____ @ ___% for _____ years

Did the seller provide the buyer with any financing? ____

If yes, please state amount: $_____ @ ___% for _____ years

Did the buyer assume payment of any unpaid taxes, or other assessments? ____

If yes, please state amount: $_____

Were any furnishings, machinery or other personal property included in the sale? ____

If yes, please describe: _____

Estimated Value : $_____

Was any trade involved in this sales transaction? ____ If yes, please describe:

_____

Was the sale any of the following: transfer between members of the same family, transfer of convenience (i.e., to correct defects in title, create a joint tenancy, etc.), transfer by forced sale (i.e. foreclosure, by court order, an estate sale) ?

If yes, please describe: _____

Note: This information is requested under authority of Chapter 59, Section 38D of the General Laws. Failure to respond may result in the disallowance of any abatement appeals. An early reply within 10 days is respectfully requested.

Signed : _____ Date : _____ Phone : _____

NEWTON ASSESSOR'S OFFICE
SALES QUESTIONNAIRE

Lister # _____

S/B/L _____

SELLER _____ BUYER _____

ADDRESS _____

CONSIDERATION $_____ DATE OF DEED _____ BOOK _____ PAGE _____

1. Type of property purchased: / / 1 Fam / / 2 Fam / / 3 Fam / / Comm / / Indust / / Other (Explain) _____

2. Reason(s) for purchase: / / Home / / Income / / Enlarge Present Business / / Inv't / / Other (Explain) _____

3. Total Sales Price $ _____ month and year sales price agreed upon _____
   a. Cash Down Payment: _____
   b. Financing: 1st mortgage $_____ interest _____% years remaining _____
      2nd mortgage $_____ interest _____% years remaining _____
      3rd mortgage $_____ interest _____% years remaining _____

4. Did the seller retain any of the financing? / / Yes / / No
   If yes amount $_____ @ _____% for _____ years.

5. Did the buyer assume an existing mortgage? / / Yes / / No
   If yes, remaining balance $_____ @ _____% for _____ years.

6. If any of the sale price is to be paid other than in cash (either by trade or credit given against the purchase price), state the value of the property used as part of the payment.
   Personal Property $_____ Real Property $_____ if real property, please state type of property: _____

7. If any furnishings, machinery, or other personal property was included in the sale price, please state the value of such item(s): $_____

8. If any unpaid taxes or assessments were assumed by the purchaser and not included in sales price state above, please stated the amount: $_____

9. If there were special circumstances in the transfer which suggest that the price paid tor the property was either more or less than its fair market value, please explain:
   _____
   _____

10. Was this sale a transfer between relatives / /; a transfer of convenience (i.e. to correct defects in title, create a joint tenancy, etc.) / / a forced sale (i.e. in lieu of foreclosure, an estate, or by a court order, etc.)? / /

11. Is the house presently in the same condition as when it was purchased: / / Yes / / No
    If no, please state the nature of the change and approximate cost: _____

Address: _____ Telephone: _____

Signed: _____ Date: _____

Other Notes: _____

CITY OF CAMBRIDGE

CAMBRIDGE, MASSACHUSETTS 02139
TEL. 498-9011

EXECUTIVE DEPARTMENT
ROBERT W. HEALY
City Manager

RICHARD C. ROSSI
Deputy City Manager

June 26, 1989

To the Honorable, the City Council:

Enclosed is a packet of materials from the Assessing Department which includes the following:

(1) the sales verification form for rent control/multi-family sales,

(2) the cover letter which accompanies this form,

(3) the sales verification form sent to buyers of one- two- and three-family houses and condominium units,

(4) sales verification forms used by the assessors of Brookline, and

(5) sales verification forms used by the assessors of Newton.

Verification of 1986, 1987 and 1988 sales has been completed (with no complaints from taxpayers concerning the forms employed). Prior to getting underway with the verification of calendar year 1989 sales, all sales questionnaires will be reviewed and revised where appropriate. The current questionnaires have been in use for four years.

Please be advised that Assessors' sales questionnaires are not public record and are not made available for any public scrutiny.

Very truly yours,

Robert W. Healy
City Manager

RWH/mbf
Enc.

Agenda Item No. 45-486

Re: enclosed packet of materials from the Assessing Dept. concerning sales verification forms & sales questionnaires.

In City Council,

June 26, 1989

6-26-89

Referred to the Hearing at 6:00 PM on 6-26-89.

Placed on file.