

CONFIDENTIAL: RS 47:2327. Forms filed by a taxpayer shall be used by the assessor, the governing authority, and Louisiana Tax Commission solely for the purpose of administering this statute.

Legal Citation & Instructions: This report shall be filed with the assessor of the parish indicated by April 1st or within forty-five days after receipt, whichever is later, in accordance with RS 47:2324.

LAT 3 REAL PROPERTY TAX REPORT – APARTMENT YEAR

RETURN TO: R. TODD DUGAS, CLA ST. MARTIN PARISH ASSESSOR 415 ST. MARTIN STREET ST. MARTINVILLE, LA 70582		WARD	ASSESSMENT NO.
LOCATION OF PROPERTY		NAME/ADDRESS (Indicate any Changes) Name:	
LEGAL DESCRIPTION		Address:	
		City:	State Zip

CHECK OR FILL IN THE APPROPRIATE SPACES – USE ATTACHMENTS IF NEEDED

SECTION 1. LAND DATA

DIMENSIONS: FRONT _____ x _____ x _____ COST IF PURCHASED AS VACANT LAND: \$ _____

DATE OF PURCHASE: _____ ZONING _____ CHECK ONE: CORNER LOT INSIDE LOT

SECTION 2. BUILDING DATA

(ATTACH RECENT PHOTOGRAPH OF BUILDING)

AGE: _____ DATE OF ACQUISITION: _____ COST OF CONSTRUCTION: _____ AMT. OF INSURANCE: _____

1. QUALITY <input type="checkbox"/> LOW <input type="checkbox"/> FAIR <input type="checkbox"/> AVERAGE <input type="checkbox"/> GOOD <input type="checkbox"/> VERY GOOD		2. CONDITION <input type="checkbox"/> LOW <input type="checkbox"/> FAIR <input type="checkbox"/> AVERAGE <input type="checkbox"/> GOOD <input type="checkbox"/> VERY GOOD		3. STYLE NO. OF STORIES _____ <input type="checkbox"/> SPLIT LEVEL <input type="checkbox"/> 1 ½ STORY FINISHED		4. BASIC STRUCTURE <input type="checkbox"/> STEEL FRAME <input type="checkbox"/> WOOD FRAME <input type="checkbox"/> REINFORCED CONCRETE <input type="checkbox"/> OTHER		5. EXTERIOR WALL <input type="checkbox"/> STUCCO <input type="checkbox"/> SIDING, SHINGLE OR METAL <input type="checkbox"/> BRICK VENEER <input type="checkbox"/> COMMON BRICK <input type="checkbox"/> FIRE BRICK <input type="checkbox"/> CONCRETE BLOCK	
6. FOUNDATION <input type="checkbox"/> PIERS <input type="checkbox"/> CONCRETE SLAB <input type="checkbox"/> RUNNING PIERS		8. HEATING & AIR CONDITIONING <input type="checkbox"/> FLOOR FURNACE <input type="checkbox"/> PANEL WALL <input type="checkbox"/> HEAT AND A/C <input type="checkbox"/> RADIANT <input type="checkbox"/> ELECTRIC <input type="checkbox"/> CENTRAL HOT AIR <input type="checkbox"/> SPACE <input type="checkbox"/> CEILING		9. PLUMBING NO. OF FIXTURES _____ NO. OF ROUGH-INS _____ TUB ENCLOSURES _____		10. FLOOR COVERING CARPET _____ % HARDWOOD _____ % VINYL ASBESTOS _____ % FANCY STONE _____ %			
7. SWIMMING POOL <input type="checkbox"/> HEATER <input type="checkbox"/> CHLORINATOR		11. BUILT-IN APPLIANCES <input type="checkbox"/> BUILT IN RANGE ELECTRIC <input type="checkbox"/> DROP IN RANGE OVEN GAS <input type="checkbox"/> BUILT IN RANGE OVEN GAS <input type="checkbox"/> MICRO-WAVE OVEN ELECTRIC <input type="checkbox"/> DROP IN RANGE OVEN ELECTRIC <input type="checkbox"/> DISPOSAL		12. EXTRA FEATURES <input type="checkbox"/> ELEVATOR LOAD <input type="checkbox"/> UTILITY ROOM <input type="checkbox"/> OUT BUILDING <input type="checkbox"/> OTHER _____ _____ _____					

ADDITIONAL DATA ON BACK (OVER)

13. APARTMENTS

NO. OF EFFICIENCY _____ RENTAL OF EACH _____ NO. OF APT. BUILDINGS _____ SIZE _____ x _____
NO. OF ONE BEDROOM _____ RENTAL OF EACH _____ NO. OF CLUB HOUSES _____ SIZE _____ x _____
NO. OF TWO BEDROOM _____ RENTAL OF EACH _____ NO. OF LAUNDRY BUILDINGS _____ SIZE _____ x _____
NO. OF THREE BEDROOM _____ RENTAL OF EACH _____ NO. OF SWIMMING POOLS _____ SIZE _____ x _____
NO. OF FOUR BEDROOM _____ RENTAL OF EACH _____ NO. OF OTHERS _____ SIZE _____ x _____
EXPLAIN _____ SIZE _____ x _____, EXPLAIN _____ SIZE _____ x _____
TOTAL FLOOR _____ SQUARE FEET

14. PARKING

PARKING SPACES: _____ OPEN: _____ COVERED: _____

15.

INCOME: _____ ANNUAL: _____ MONTHLY: _____ VACANCIES AT THIS TIME: _____

16.

RENTALS INCLUDE: UTILITIES FURNITURE OTHER: _____

ATTACH RECENT PHOTOGRAPH OF BUILDING

SIGNATURE AND VERIFICATION

I declare that under the penalties for filing false reports that this return has been examined by me to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Signature of Taxpayer

Date

Email Address

Phone #