SUPPLEMENTARY ASSESSMENT REQUEST

MUNICIPALITY

_____

ITEM #	OWNER'S NAME	PARCEL ID / CIVIC ADDRESS	LAND				RESIDENTIAL									COMMERCIAL						NON-TAXABLE						CLERK'S COMMENTS	ASSESSOR'S NOTES
			SUB-DIVIDED	LAND N.P.A.	BACK LAND	OTHER	NEW	TENANT CHANGE	MOBILE HOME	EXTENSION	GARAGE/SHED	RENOVATIONS	TORN DOWN	BSMT ROOMS	OTHER	NEW	EXTENSION	RENOVATIONS	TENANT CHANGE	TORNDOWN	OTHER	FEDERAL	PROVINCIAL	MUNICIPAL	SCHOOL	CHURCH	OTHER		

DATE SUBMITTED _____ ***SIGNATURE OF CLERK*** _____