

PLACER COUNTY ASSESSOR'S OFFICE

Matthew R. Maynard, Assessor

2980 Richardson Drive • Auburn, CA 95603-2640

Telephone: (530) 889-4300 • Fax: (530) 889-4305

Website: www.placer.ca.gov/assessor • E-mail: assessor@placer.ca.gov



New Construction Cost Statement - Residential Pools - Spas - Site Improvements

Fee Parcel (APN):

Property Address:

Permit Number:

Project Description:

IMPORTANT

Our records indicate that a building permit was issued or new construction has occurred on your property. Please complete and return this form **within 15 days of project completion**. Assessed values are based on information you provide, along with comparable cost and market data. Please include any documentation you believe will assist our office in valuing your new construction.

<p>Owner Information</p> <p>Name _____</p> <p>Daytime Telephone _____</p> <p>Email _____</p> <p>Project Completion Date _____ <input type="checkbox"/> Actual <input type="checkbox"/> Estimated</p> <p><small>*Please attach plans or diagram the new construction on reverse side</small></p>	<p>Construction Costs <input type="checkbox"/> Check if Owner-Builder</p> <p style="text-align: right;">Cost of Labor \$ _____</p> <p style="text-align: right;">Cost of Materials \$ _____</p> <p style="text-align: right;">TOTAL CONSTRUCTION COSTS \$ _____</p> <p>Contractor Name _____</p> <p>Contractor Telephone _____</p>																										
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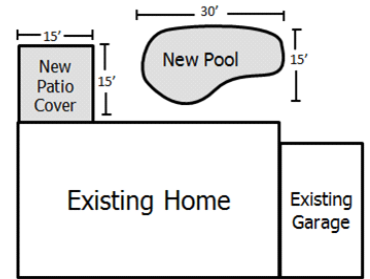
DIAGRAM OF NEW CONSTRUCTION

Diagram the new construction showing its exterior dimensions and location in relation to other buildings on the property. In lieu of completing this section, a copy of the plans may be submitted.

1 SQ = 1'

FRONT of Residence or Road

Sample Sketch – Example Only



Dimensions of New Construction

Pool = 30' x 15'
 Patio Cover = 15' x 15'

Dimensions of New Construction

_____ = _____ X _____
 _____ = _____ X _____
 _____ = _____ X _____
 _____ = _____ X _____
 _____ = _____ X _____
 _____ = _____ X _____
 _____ = _____ X _____

Remarks

If you have a new mailing address, please enter below:

The Assessor's Office may contact you for additional information regarding this statement.
I certify that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.

Signature of Owner _____ Date _____

Thank you for your cooperation.

RETURN COMPLETED STATEMENT TO: Placer County Assessor, 2980 Richardson Drive, Auburn, CA 95603-2640

FOR ADDITIONAL INFORMATION, PLEASE CONTACT OUR OFFICE OR VISIT OUR WEBSITE.

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