Date	Submitted:	
$\boldsymbol{\nu}$	Jubilitua.	

## **ELKHART COUNTY ASSESSOR**

117 N 2<sup>ND</sup> STREET GOSHEN, IN 46526 574-535-6700 jboyer@elkhartcounty.com

## **RENTAL DATA COLLECTION SHEET**

The data listed on this sheet will be CONFIDENTIAL and used in studies affecting all residential rental properties by the County Assessor. Please complete and return at your earliest convenience.

IC 6-1.1-4-39: (d) ... If a taxpayer wishes to have the income capitalization method or the gross rent multiplier method used in the initial formulation of the assessment of the taxpayer's property, the taxpayer must submit the necessary information to the assessor not later than the assessment date...

## **GENERAL INFORMATION** Owner Name \_\_\_\_\_ Property Manager (If One) \_\_\_\_\_ Rental Address \_\_\_\_\_ Owner Mailing Address \_\_\_\_\_ Parcel #: \_\_\_\_\_Owner Phone Number \_\_\_\_\_ PROPERTY INFORMATION IF the property was purchased in the last 10 years, sale date was\_\_\_\_\_\_ for: \$\_\_\_\_\_ Was it rented upon purchase? (Yes/No) IF not how much was invested post purchase to remediate/fix issues to rent: \$\_\_\_\_\_ Is any portion of the property owner occupied? \_\_\_\_\_ (Yes/No) IF yes please specify: Please complete the following information based on the most current months of operation: Unit 1 Unit 2 Unit 3 Unit 4 **Monthly Rent** # of Bedrooms # of Bathrooms # of other rooms **Utilities Included? Furnishings Included?** Weeks vacant in last 24 months Lease Begin/End Basement/Finish Any additional features or items we should be aware of:

I certify that the information above to be accurate: \_\_\_\_\_\_ (signature)