

# MERCED CO ASSESSOR'S OFFICE – NEW CONSTRUCTION QUESTIONNAIRE

RURAL PROPERTY

A.P.N. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PLEASE RETURN TO: MERCED COUNTY ASSESSOR  
(209) 385-7631 2222 M ST., MERCED CA 95340

PLEASE CHECK BOXES OR USE REMARKS SECTION TO BEST DESCRIBE CONSTRUCTION

## STEEL BUILDINGS (SKETCH ON REVERSE)

- a. SIZE \_\_\_\_\_ FT. X \_\_\_\_\_ FT. = \_\_\_\_\_ TOTAL SQ. FT.  
EAVE HEIGHT \_\_\_\_\_ INSULATION \_\_\_\_\_
- b. DIMENSIONS & DESCRIPTION OF INT. & EXT ROOMS \_\_\_\_\_
- c. NUMBER & WIDTH OF ROLL-UP DOORS \_\_\_\_\_
- d. CANOPIES OR CONCRETE APRONS \_\_\_\_\_
- e. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_
- BUILDER  SELF  CONTRACTOR \_\_\_\_\_  
PHONE \_\_\_\_\_

## PUMP(S) (SKETCH LOCATION ON REVERSE)

- a.  ADDITION \_\_\_\_\_ HP  REPLACEMENT \_\_\_\_\_ HP  
REPLACES \_\_\_\_\_ HP
- b. TOTAL # OF PUMPS AND HP, THIS PARCEL ONLY \_\_\_\_\_  
HAS THIS CHANGE INCREASED YOUR TOTAL IRRIGATED ACRES?  
 YES  NO
- c. PUMP TYPE  TURBINE  CENTRIFUGAL (BOOSTER)  
 SUBMERSIBLE  LOW LIFT  GEARHEAD  
PUMP CONDITION  NEW  REBUILT  
POWER  ELEC.  DIESEL  PTO  OTHER \_\_\_\_\_  
DEPTH OF SETTING \_\_\_\_\_ FT.
- d. FILTER SYSTEM \_\_\_\_\_
- e. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_  
SEGREGATED COST OF POWER PLANT ONLY \$ \_\_\_\_\_

## IRRIGATION SYSTEM (SKETCH ON REVERSE)

- a.  ADDITION  REPLACEMENT  REMOVAL
- b. TYPE  AUTO  MANUAL ACRES \_\_\_\_\_  
 SOLID SET SPRINKLERS \_\_\_\_\_  
 MICRO SPRINKLERS \_\_\_\_\_  
 DRIP \_\_\_\_\_  
 OTHER \_\_\_\_\_  
 PVC DIAM. \_\_\_\_\_ LENGTH \_\_\_\_\_  
 PIPELINES DIAM. \_\_\_\_\_ LENGTH \_\_\_\_\_  
VALVE SIZE \_\_\_\_\_ NUMBER \_\_\_\_\_
- c. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_  
BUILDER  SELF  CONTRACTOR \_\_\_\_\_  
PHONE \_\_\_\_\_

## MISCELLANEOUS WORK

- PLEASE EXPLAIN IN REMARKS ON REVERSE

## POLE BARN (SKETCH ON REVERSE)

- a. SIZE \_\_\_\_\_ FT. X \_\_\_\_\_ FT. = \_\_\_\_\_ TOTAL SQ. FT.  
HEIGHT \_\_\_\_\_
- b. CONSTRUCTION  WOOD  METAL
- c. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_  
BUILDER  SELF  CONTRACTOR \_\_\_\_\_  
PHONE \_\_\_\_\_

## WELL(S) (SKETCH LOCATION ON REVERSE)

- a.  ADDITION  REPLACEMENT
- b. WELL DIAMETER \_\_\_\_\_ IN. WELL DEPTH \_\_\_\_\_ FT.  
CASING DEPTH \_\_\_\_\_ FT. MATERIAL \_\_\_\_\_  
GAUGE \_\_\_\_\_
- c. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_  
BUILDER  SELF  CONTRACTOR \_\_\_\_\_  
PHONE \_\_\_\_\_

## TREE/VINES CHANGES (SKETCH ON REVERSE)

- a.  ADDITION  REPLACEMENT  
 INTERPLANT  REMOVAL
- |   | AREA#1 | AREA #2 |
|---|--------|---------|
| b. NO. OF TREES   | _____  | _____   |
| TYPE  | _____  | _____   |
| VARIETY   | _____  | _____   |
| PLANT DATE  | _____  | _____   |
| BUD/GRAFT DATE  | _____  | _____   |
| ROOTSTOCK   | _____  | _____   |
| TREES PER ACRE  | _____  | _____   |
| SPACING   | _____  | _____   |
| <input type="checkbox"/> SQUARE <input type="checkbox"/> DIAMOND <input type="checkbox"/> OTHER | _____  | _____   |
| c. <input type="checkbox"/> TRELLIS <input type="checkbox"/> STAKES                             | _____  | _____   |
| STAKE HEIGHT  | _____  | _____   |
| MATERIAL  | _____  | _____   |
| NO. OF WIRES  | _____  | _____   |
| SPACING X   | _____  | _____   |
| CROSSARM SIZE   | _____  | _____   |
| MATERIAL  | _____  | _____   |
| TRELLIS/STAKE COST \$   | _____  | _____   |
- d. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_

## PAVING

- a.  NEW  REPLACEMENT
- b. MATERIAL \_\_\_\_\_ SQ.FT. \_\_\_\_\_
- c. DATE COMPLETED (OR EXPECTED DATE) \_\_\_\_\_  
TOTAL COST \$ \_\_\_\_\_

PLEASE GIVE DAYTIME PHONE \_\_\_\_\_

BEST TIME TO CALL \_\_\_\_\_

PLEASE COMPLETE THE REVERSE SIDE

# ADDITIONAL INFORMATION

DID YOU DO ANY OF THE WORK YOURSELF?  YES  NO

PLEASE DESCRIBE IN REMARKS SECTION (BELOW) ANY OTHER NEW CONSTRUCTION OR DEMOLITION WHICH HAS TAKEN PLACE OVER THE 24 LAST MONTHS

## SKETCH OF NEW CONSTRUCTION

1. MAKE A ROUGH DRAWING OF PROPERTY SHOWING LOCATION OF ROADS, DITCHES, ETC.
2. SKETCH EXISTING STRUCTURES. THEN SHOW ANY CHANGES (ADDITIONS, REPLACEMENTS, REMOVALS, ETC.) AND THEIR RELATION TO OTHER STRUCTURES OR TO PROPERTY LINES.
3. WRITE IN ALL APPROPRIATE MEASUREMENTS FOR THESE CHANGES SHOWING SIZE, LENGTH, ETC.
4. SKETCH NEED NOT BE TO SCALE

REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE ASSESSOR'S OFFICE MAY AUDIT THIS STATEMENT FOR COMPLETENESS AND ACCURACY AND MAY CONTACT YOU FOR ADDITIONAL INFORMATION AS REQUIRED.

I declare under penalty of perjury that this statement, including any accompanying documents, is true, correct, and complete to the best of my Knowledge and belief.

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone (8am – 5pm)