



**DEVENS ASSESSING DEPARTMENT  
INFORMATION REQUISITION FORM  
ONE-FAMILY PROPERTY & RESIDENTIAL CONDOMINIUM  
FISCAL YEAR 2026**

<b>PARCEL ID</b>	<b>ASSESSED OWNER</b>	<b>ASSESSED VALUE</b>
<b>PROPERTY LOCATION</b>		
<b>CONTACT NAME</b>	<b>CONTACT PHONE #</b>	
<b>MAILING ADDRESS</b>		

**GENERAL INFORMATION**

*This information request form is issued pursuant to the authority granted assessors under M.G.L. Ch. 59, Sec. 61A. Please complete his form and send to: Board of Assessors, 33 Andrews Pkwy., Devens, MA 01434 or email to jfrank@massdevelopment.com. Please complete, sign and return this form within 30 days in order to preserves your appeal rights. For questions, call Assessor's Office at (978) 870-0524.*

**PART ONE - GROUNDS FOR COMPLAINT**

**A. OVERVALUATION** The assessment exceeds the full and fair cash value of the property.

1. Indicate the assessed value of the property: \$ \_\_\_\_\_
2. Indicate **your opinion** of the value: \$ \_\_\_\_\_
3. Complete the comparable table below for (3) properties in your area.

*Information below can be found online at [WWW.AXISGIS.DEVENS.COM](http://WWW.AXISGIS.DEVENS.COM) and then clicking the IAS PROPERTY CARD button*

YOUR PROPERTY	COMPARABLE 1	COMPARABLE 2	COMPARABLE 3
PARCEL ID			
ADDRESS			
VALUATION			
LAND AREA			
FIN. AREA			
BSMT AREA			
FIN. BSMT.			
BLDG STYLE			
AIR COND			
FIREPLACE			
YEAR BUILT			
TOT ROOMS			
NO. BEDRM			
FULL BATH			
HALF BATH			
BATH QUAL			
KIT QUAL			
CONDITION			
GRADE			
GARAGE AREA			

**B. COMPARABLE SALES:** If you believe the assessment is incorrect based on sales of similar properties, complete the table below for (3) comparable properties near you that have sold in the past two years.

YOUR PROPERTY		COMPARABLE 1	COMPARABLE 2	COMPARABLE 3
PARCEL ID				
ADDRESS				
VALUATION				
LAND AREA				
FIN. AREA				
BSMT AREA				
FIN. BSMT.				
BLDG STYLE				
AIR COND				
FIREPLACE				
YEAR BUILT				
TOT ROOMS				
NO. BEDRM				
FULL BATH				
HALF BATH				
BATH QUAL				
KIT QUAL				
CONDITION				
GRADE				
GARAGE AREA				

**PART TWO: REHABILITATION / NEW CONSTRUCTION**

If there has been any new construction or significant rehabilitation such as new kitchen, new baths, heating or electrical work in the last (3) years, please list below.

YEAR	DESCRIPTION OF CONSTRUCTION OR RENOVATION	COST	COMPLETED?

**PART THREE: PURCHASE INFORMATION**

If your property was purchased in the past (3) years, please supply the following: itchen, new baths, heating or

DATE OF SALE			
PURCHASE PRICE	\$	1ST MORTGAGE	RATE (%) & TERM (YEARS)
DOWN PAYMENT	\$	2ND MORTGAGE	

**SIGNATURE:** I certify under the pains and penalties of perjury, that I am either the owner of the property or the authorized representative of the owner and all information supplied in this requisition is, to the best of my knowledge, true and correct.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_ IF NOT OWNER, PRINT OR TYPE NAME HERE \_\_\_\_\_