

GREENE COUNTY SALES VERIFICATION

The Greene County Assessor records indicate the following information on this parcel. Please correct if necessary.

Parcel Number: 88- _____ - _____ - _____ - _____

Neighborhood Number: _____

Property Address: _____

School District: _____

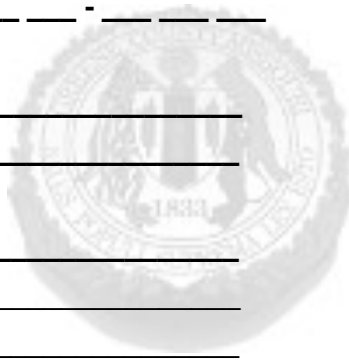
Lot Size: _____

Owner Name _____

Date Acquired: _____

Owner Mailing Address: _____
(if different) _____

Class (if known) _____



1. What was the total sales price? \$ _____

The sales price you indicate does not directly affect Greene County's appraised value of your property.

Deed or Sale Date (mm/dd/yyyy): _____

2. Was any personal property (such as furniture, equipment, machinery, livestock, crops, business franchise, or inventory, etc.) included in the sale price?

Yes No If yes, please describe _____

Estimated value of all personal property items included in the sale price:

\$ _____

If Mobile Home: Year _____ Model _____ Size _____

3. Special Sale Factors (Check all boxes that apply):

- Sale between immediate family members (Specify the relationship): _____
- Sale involved corporate affiliates belonging to the same parent company
- Auction Sale or sale involving multiple non-related parcels
- Deed transfer in lieu of foreclosure or repossession
- Sale by judicial order (by guardian, executor, conservator, administrator, or trustee of an estate)
- Sale involved a government agency or public utility
- Buyer (new owner) is a religious, charitable, benevolent organization, school, or educational association
- Buyer (new owner) is a financial institution, insurance company, pension fund, or mortgage corporation
- Sale of only a partial interest in the real estate
- Sale involved a trade or exchange of properties
- NONE OF THE ABOVE

4. Use of Property at the time of sale:

- Single Family Residence Agricultural Land
- Farm/Ranch with Residence Mineral Rights Included?
- Condominium Unit Yes No
- Vacant Land Commercial/Industrial Building
- Apartment Building (# of Units): _____
- Other (Specify): _____

5. What is the future use of the property?

6. Are you aware of any changes to the property prior to purchase? (Check all boxes that apply):

Additions Demolition New Construction Remodel

Date Completed: _____

7. Have you made or do you plan to make any changes to the property since purchase?

(Check all boxes that apply):

Additions Demolition New Construction Remodel

Anticipated Completion Date: _____

8. Were any delinquent taxes assumed by the purchaser?

Yes No Amount \$ _____

9. Method of Financing? (Check all that apply):

- All Cash New Loan(s) from a financial institution
- Seller Financing Assumption of Existing Loan(s)
- Trade of Property Not Applicable

10. If applicable, what appraised value was arrived at by the bank/mortgage co./fee appraiser? \$ _____

11. Is the property income producing i.e. rental, Airbnb, etc.?

Yes No

11a. If rental, what is the monthly rental income? \$ _____

11b. If Airbnb, was the property to be used solely for renting out the property? Yes No

12. Were there any unusual factors that influenced the sale?

Yes No If yes, please explain: _____

13. Was the property made available to other potential purchasers? Yes No

If no, please explain: _____

14. Do you feel you paid fair market value for your property? Yes No

If no, please explain: _____

15. Does the buyer hold title to any adjoining property? Yes No**16. Did the sale price include an existing business?** Yes No**Please complete all that apply:****My house was built in the year:** _____**My house was gutted and completely remodeled in the year:** _____**My house was not gutted but was updated in the year:** _____**This update included:** _____

Basement: None Crawl Partly Finished Fully Finished**Basement Finished Amount:** 1/4 1/2 3/4 Fully Finished**Basement Finish Type:** Finished divided living area Finished open recreation room**Heating:** None Baseboard Hot water/steam Central Other: _____**Cooling:** None Central air conditioning**Attic (Check ONLY if accessed by a permanent staircase):** None Unfinished Partly Finished Fully Finished

If fully finished, approximate attic square footage: _____

Fireplaces (Please select all that apply): Wood burning masonry # of Chimneys: _____ # of Openings: _____ Prefab/Zero clearance gas # of Chimneys: _____ # of Openings: _____**Bed, Baths, and Beyond:**

of bedrooms including bedrooms used for other purposes: _____

of full baths (full bath is a sink, shower or tub, and toilet): _____

of half baths (half bath is a sink and toilet): _____

of other plumbing fixtures (laundry tub, bar sink, Jacuzzi tub, etc.): _____

of other rooms in my house (family room, media room, etc.): _____

Interior (Please check all that apply):**Flooring:** Carpet Ceramic tile Vinyl Hardwood Laminate Other: _____**Countertops:** Tile Granite Formica/laminate Solid surface Other: _____**Cabinets:** Oak Birch Maple Cherry Metal Other: _____**Out Buildings/Accessory Structures****(i.e. shed, barn, pole building, etc.):**

#1 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No

#2 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No

#3 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No

#4 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No

#5 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No

#6 Type: _____ Size: _____ X _____

Year Built: _____ Living Quarters: Yes NoElectricity: Yes No Water: Yes No # of Fixtures _____Living Quarters: Yes No Concrete floor: Yes No**Additional comments regarding anything on this form:**

Would you like to be contacted by one of our staff regarding your property? Yes No**Are you a new resident of Greene County, Missouri?** Yes No**I CERTIFY THAT THE ADDRESS WHICH TAX STATEMENTS FOR THE PROPERTY ARE TO BE SENT IS CORRECT, AND THIS FORM IS COMPLETED TO THE BEST OF MY KNOWLEDGE.**

Print Name: _____

Phone #: _____

Email: _____

Signature: _____