



**MARSHA M. FAUX, CFA, ASA
POLK COUNTY PROPERTY APPRAISER**

255 N. Wilson Ave., Bartow, FL 33830
Telephone (863) 534-4777 Fax (863) 534-4794

CHINESE DRYWALL SURVEY

ACCOUNT NUMBER _____

ADDRESS OF DAMAGED PROPERTY _____

CITY STATE ZIP _____

PART I – QUESTIONNAIRE

If your home sustained damage due to defective Chinese drywall, was the construction or repair complete as of January 1, 2011?

Yes _____ **If Yes** – repairs were complete as of January 1, 2011, no building assessment reduction can be made to the 2011 assessed value. Please complete the property and contact information below and we will note the status in our files. **Thank you and we will advise you in the future if there is a change that allows us to review your value!**

No _____ **If No** – the damage was not repaired as of January 1, 2011. This may affect the 2011 assessed value. Please complete the property and contact information below and we will note the status in our files. In addition, we will need the following information to review your value:

Is the property uninhabitable? _____ If "yes", please list the date you moved out: _____
Do you intend to repair the damage? _____ If yes, please list the anticipated completion date: _____

PART II – DOCUMENTATION

PLEASE PROVIDE THIS OFFICE WITH ANY DOCUMENTATION YOU HAVE SUPPORTING YOUR CLAIM.

Documentation includes but is not limited to: Air Quality Reports, Contractor Repair Estimates, FEMA Reports, Home Inspection Reports, Insurance Reports, Permits Issued, Photographs taken etc... **Documentation is required** and we will examine the documents during our review of the property value.

PART III – CERTIFICATION and CONTACT INFORMATION

I certify that the above information and attached documentation are true and correct to the best of my knowledge and belief.

OWNER SIGNATURE _____

OWNER PRINTED NAME _____ **DATE** _____

For all owners, please provide the following contact information so that we may update our files and be able to contact you regarding your property damage.

OWNERS CURRENT MAILING ADDRESS _____

NOTE: If this is a temporary mailing address, it is the responsibility of the property owner to notify the Property Appraiser of any future changes to the mailing address record. Please notify this office in writing or by using the online address change feature available at www.polkpa.org.

DAYTIME PHONE _____ **CELL PHONE** _____

EMAIL ADDRESS _____

Please return this completed form (in its entirety) along with your documentation to: Polk County Property Appraiser, 255 N. Wilson Avenue, Bartow, FL 33830; Attention: Appraisal Department. Please make a copy of this submission for your records.

**---Documents must be received by the Property Appraiser no later than July 1, 2011---
This is required for compliance with FL Statute 197.122.**