



AGRICULTURAL PROPERTY OWNER "NEW CONSTRUCTION" STATEMENT

DAN GOODWIN, MAI
ASSESSOR OF VENTURA COUNTY

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Assessor's Parcel Number:
Agricultural Preserve Number:
Situs:
CL: SU:
Date Permit Issued:
Permit Type:

Step 1

Return completed by: _____

Please briefly describe your project: _____

Date Useable/Complete: _____

If Not Complete: Percentage complete by Jan 1st following permit date: _____%

Total/Estimated Cost \$ _____

Contact Phone (_____) _____ **Email Address:** _____

Was any work completed by property owner?
 Yes No

If yes, please describe _____

Please Proceed to Step 2.

Step 2

Please check all that apply for this project.

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Barn/Stable (A,B) | <input type="checkbox"/> Guest House (A,B,C) | <input type="checkbox"/> Repair (A,B) | <input type="checkbox"/> Tennis Court (A,B) |
| <input type="checkbox"/> Storage Building (A,B) | <input type="checkbox"/> Carport (A,B) | <input type="checkbox"/> Patio Cover/Deck (A,D) | <input type="checkbox"/> Remodel/Renovation (A,B) |
| <input type="checkbox"/> Shop (A,B) | <input type="checkbox"/> Fireplace Outdoor (D) | <input type="checkbox"/> Corral/Arena Fencing (G) | <input type="checkbox"/> Yard Improvements (D) |
| <input type="checkbox"/> Office (A,B) | <input type="checkbox"/> Solar Energy System (B) | <input type="checkbox"/> Mobile Home (H) | <input type="checkbox"/> Room Addition (A,B) |
| <input type="checkbox"/> Pump House (A,B) | <input type="checkbox"/> Garage Conversion (A,B,C) | <input type="checkbox"/> Greenhouse (A,F) | <input type="checkbox"/> Repair (A,B) |
| <input type="checkbox"/> Dwelling (A,B) | <input type="checkbox"/> Demolition (I) | <input type="checkbox"/> Pool/Spa (E) | <input type="checkbox"/> Other _____
(Please Explain in Remarks) |

Please Proceed to Step 3

Step 3

Each option you selected in Step 2 is followed by a letter or series of letters. These letters correspond to the parts you're required to complete here in Step 3. For example, if you checked "Barn/Stable" you'll need to complete parts A and B. *Please complete the following part(s) that correspond to your Selection(s) in Step 2.*

Part A

- | | |
|--|---|
| Structural Walls | Roof |
| <input type="checkbox"/> Wood Frame | <input type="checkbox"/> Composition |
| <input type="checkbox"/> Concrete Block | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Steel Frame | <input type="checkbox"/> Aluminum |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| Exterior Walls | Floor |
| <input type="checkbox"/> Stucco | <input type="checkbox"/> Raised Wood |
| <input type="checkbox"/> Siding | <input type="checkbox"/> Concrete Slab |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| Interior Walls | Floor Cover |
| <input type="checkbox"/> Sheetrock (Drywall) | <input type="checkbox"/> Carpet |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Wood |
| Ceilings | <input type="checkbox"/> Vinyl Linoleum |
| <input type="checkbox"/> Wood/Beam | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Sheetrock (Drywall) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Other _____ | |

Part B

- | | | |
|---|--------------------------------------|---------------------------------------|
| Heating & Air | Built-Ins | Fixtures |
| <input type="checkbox"/> Central A/C | <input type="checkbox"/> Cabinets | <input type="checkbox"/> Bathtub |
| <input type="checkbox"/> Thru-wall A/C | Linear Feet _____ | <input type="checkbox"/> Stall Shower |
| <input type="checkbox"/> Forced Air Furnace | <input type="checkbox"/> Range | <input type="checkbox"/> Sauna |
| <input type="checkbox"/> Wall Heater | <input type="checkbox"/> Oven | <input type="checkbox"/> Sink |
| | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Toilet |
| | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Bidet |
| Fireplace | | <input type="checkbox"/> Water Heater |
| <input type="checkbox"/> Single | | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Double | | <input type="checkbox"/> New |
| <input type="checkbox"/> Prefab | | <input type="checkbox"/> Replacement |
| <input type="checkbox"/> Masonry | Solar Energy System | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> New | <input type="checkbox"/> Owned | |
| <input type="checkbox"/> Replacement | <input type="checkbox"/> Leased | |

Step 3

Continued from reverse side.

<p>Part C</p> <p>Guest House</p> <p><input type="checkbox"/> Garage Conversion <input type="checkbox"/> Detached <input type="checkbox"/> Attached to Main <input type="checkbox"/> Access to Main from Guest House</p>	<p>Part E</p> <p>Pool _____ sq.ft.</p> <p><input type="checkbox"/> Gunite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Plastic Lined <input type="checkbox"/> Above Ground <input type="checkbox"/> Gas Heated <input type="checkbox"/> Solar Heated <input type="checkbox"/> Not Heated</p> <p>Pool Extras</p> <p><input type="checkbox"/> Beach Entry <input type="checkbox"/> Grotto <input type="checkbox"/> Waterfall <input type="checkbox"/> Diving Board <input type="checkbox"/> Slide <input type="checkbox"/> Swim-up Bar <input type="checkbox"/> Other _____</p> <p>Decking _____ sq.ft.</p> <p>Spa _____ sq.ft.</p> <p><input type="checkbox"/> Gunite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Redwood <input type="checkbox"/> Gas Heated <input type="checkbox"/> Electric Heated</p> <p><input type="checkbox"/> Solar Heated <input type="checkbox"/> Attached to Pool <input type="checkbox"/> Above Ground <input type="checkbox"/> Portable</p>	<p>Part F</p> <p>List Quantities Below</p> <p>Sprinklers</p> <p><input type="checkbox"/> Automatic _____ <input type="checkbox"/> Manual _____</p> <p>Heating/Air</p> <p><input type="checkbox"/> Heaters _____ <input type="checkbox"/> Portable <input type="checkbox"/> Fans _____</p> <p>Lighting</p> <p><input type="checkbox"/> Lighting _____</p>
<p>Part D</p> <p>Patio / Gazebo</p> <p><input type="checkbox"/> Lattice Covered <input type="checkbox"/> Solid Covered <input type="checkbox"/> Gazebo <input type="checkbox"/> Enclosed Existing <input type="checkbox"/> New Enclosed</p> <p>Outdoor Improvements</p> <p><input type="checkbox"/> Built-in BBQ <input type="checkbox"/> Fire Pit (Gas) <input type="checkbox"/> Fountain <input type="checkbox"/> Kitchen</p>	<p>Part G</p> <p>Fencing</p> <p><input type="checkbox"/> Pipe <input type="checkbox"/> Steel <input type="checkbox"/> Wood <input type="checkbox"/> Plastic <input type="checkbox"/> Other _____</p> <p>Size _____ Linear Feet</p> <p>Number of Rails _____</p> <p><input type="checkbox"/> Hot Walker Quantity _____ Capacity of Each _____</p>	<p>Part H</p> <p>Manufactured Home</p> <p>Manufacturer _____ Model _____ Year Built _____ Size _____ License/Decal No(s) _____ Expiration Date _____</p> <p>Do you own the Manufactured Home? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If not, please provide name and address of owner _____ _____ _____ _____</p>
<p>Part I</p> <p>Demolition/Structure Removed</p> <p>Describe any structure (or portion of structure) removed or altered. _____ _____ _____ _____</p> <p>Was this structure present when you purchased the property? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Step 4</p> <p>Demolition/Structure Removed</p> <p><i>Describe any structure (or portion of structure) removed or altered if not mentioned in Part I.</i></p> <p>_____ _____ _____ _____ _____ _____ _____ _____</p> <p>Was this structure present when you purchased the property? Yes <input type="checkbox"/> No <input type="checkbox"/></p>	

Step 5

Is New Construction Leased? Yes No

List name and address of Lessee: _____

Remarks (optional) _____

I declare that the foregoing and all information hereon, including and accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief. The information you provide is held confidential as regulated by California Law.

Signed in the City of _____, California by (Printed Name) _____

Signature of Owner (Agent) _____ Date _____