

Official Use Only

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Request tracking number

Date stamp

Tel: 207-282-1611

City of Saco Assessing Department

Fax: 207-282-8209

300 Main Street

Saco Maine 04072

Right-to-Know Law Record Request Form

Name of Requester: _____

Last

First

MI

Signature: _____ Date: _____

Mailing Address: _____

Street/PO Box

City

State

Zip Code

Telephone Number: _____ Email Address _____

Required

Required

Please check the following:

_____ I am requesting **a copy** of the valuation book in Digital text format.

All request must be in written form and accompanied by check payment of \$150.00

Upon receipt of payment a **link to the valuation book** will be emailed to you. With this information you will be able to download the file.

DATA ELEMENTS:

The file is a text file, comma delimited (csv). When imported to Excel the headers are as follows:

Fields:

Map:

Lot:

Unit:

Unit Cut:

Street #:

Street Name:

Location:

Grantee:

Co-grantee's Name:

Mailing Address:

Mailing Address 2:

City:

State:

Zip:

Country:

Total Assessed Land Value:

Total Assessed Improvements:

Total Assessed Parcel Value:

Land Area in Acres:

Sale Date:

Price:

Book:

Page:

Use Description:

AYB: (estimated actual year built)

Style:

Style Description: