

| CURRENT OWNER                                                           |  |      |  | TOPO TYPE                                                                  |  | UTILITY    |  | STREET                                                          |  | LOCATION    |  | CURRENT ASSESSMENT                                                  |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|-------------------------------------------------------------------------|--|------|--|----------------------------------------------------------------------------|--|------------|--|-----------------------------------------------------------------|--|-------------|--|---------------------------------------------------------------------|--|---------|-----------|--------------------------------|----------|-------|-----------------------------|--------|--|-------|----------|--------|--|------|----------|
| MAYBURY SANDRA L<br><br>215 PROSPECT ST<br><br>EAST LONGMEADOW MA 01028 |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  | Description                                                         |  | Code    | Appraised |                                | Assessed |       | 1006<br><br>EAST LONGMEADOW |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  | TOPO WET                                                                   |  | EASEMENT   |  | TRAFFIC                                                         |  | CORNER      |  | RESIDNTL.                                                           |  | 101     | 248100    |                                | 248,100  |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  | RES LAND                                                            |  | 101     | 164300    |                                | 164,300  |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  | DRAINAGE                                                                   |  |            |  | VIEW                                                            |  | COMMUNITY   |  | RESIDNTL.                                                           |  | 101     | 9500      |                                | 9,500    |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  | SUPPLEMENTAL DATA                                                          |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  | Alt Prcl ID<br>SP Permit<br>Chapter Land<br>OC Dates<br>In+Ex FY<br>Mailed |  |            |  | Received<br>NIA<br>Field 8<br>Field 9<br>Field 10<br>Assoc Pid# |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
| GIS ID F_381052_2847203                                                 |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  | Total                                                               |  | 421,900 |           | 421,900                        |          |       |                             |        |  |       |          |        |  |      |          |
| RECORD OF OWNERSHIP                                                     |  |      |  | BK-VOL/PAGE                                                                |  | SALE DATE  |  | Q/U                                                             |  | V/I         |  | SALE PRICE                                                          |  | VC      |           | PREVIOUS ASSESSMENTS (HISTORY) |          |       |                             |        |  |       |          |        |  |      |          |
| MAYBURY SANDRA L<br>MAYBURY JOHN F +<br>MAYBURY                         |  |      |  | 08298 0003                                                                 |  | 01-04-1993 |  | U                                                               |  | I           |  | 1                                                                   |  | 1A      |           | Year                           |          | Code  | Assessed                    | Year   |  | Code  | Assessed | Year   |  | Code | Assessed |
|                                                                         |  |      |  | 06691 0250                                                                 |  | 11-23-1987 |  | U                                                               |  | I           |  | 225,000                                                             |  |         |           | 2020                           |          | 101   | 235,000                     | 2019   |  | 101   | 228,400  | 2018   |  | 101  | 223,800  |
|                                                                         |  |      |  | 03382 0541                                                                 |  | 11-18-1968 |  | U                                                               |  | I           |  | 0                                                                   |  |         |           |                                |          | 101   | 164,300                     |        |  | 101   | 161,900  |        |  | 101  | 161,900  |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          | 101   | 9,500                       |        |  | 101   | 9,500    |        |  | 101  | 9,500    |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  | Total   |           | 408800                         |          | Total |                             | 399800 |  | Total |          | 395200 |  |      |          |
| EXEMPTIONS                                                              |  |      |  |                                                                            |  |            |  | OTHER ASSESSMENTS                                               |  |             |  | This signature acknowledges a visit by a Data Collector or Assessor |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
| Year                                                                    |  | Code |  | Description                                                                |  | Amount     |  | Code                                                            |  | Description |  | YEAR                                                                |  | Amount  |           | Comm Int                       |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           |                                |          |       |                             |        |  |       |          |        |  |      |          |
|                                                                         |  |      |  |                                                                            |  |            |  |                                                                 |  |             |  |                                                                     |  |         |           | </                             |          |       |                             |        |  |       |          |        |  |      |          |

| CONSTRUCTION DETAIL |      |             | CONSTRUCTION DETAIL (CONTINUED) |             |             |
|---------------------|------|-------------|---------------------------------|-------------|-------------|
| Element             | Cd   | Description | Element                         | Cd          | Description |
| Style               | 06   | COLONIAL    | Basement Floor                  |             |             |
| Model               | 01   | RESIDENTIAL | Bsmt Garage                     |             |             |
| Grade               | C+   | AVG. (+)    | #Heat Sys                       | 1.00        |             |
| Stories             | 2.00 | 2 STORY     | Units                           | 1           |             |
| Foundation          | 1    | CONCRETE    | MIXED USE                       |             |             |
| Exterior Wall 1     | 4    | VINYL       | Code                            | Description | Percentage  |
| Exterior Wall 2     |      |             | 101                             | ONE FAM     | 100         |
| Roof Structure      | 1    | GABLE       |                                 |             | 0           |
| Roof Cover          | 1    | ASPHALT SH  |                                 |             | 0           |
| Interior Wall 1     | 1    | DRYWALL     | COST / MARKET VALUATION         |             |             |
| Interior Wall 2     |      |             | Adj Base Rate                   |             | 78.04       |
| Interior Floor 1    | 3    | HARDWOOD    | RCN                             |             | 354,400     |
| Interior Floor 2    | 4    | CARPET      | Net Other Adj                   |             |             |
| Heat Fuel           | 2    | GAS         | Year Built                      |             | 1968        |
| Heat Type           | 3    | FORCED H/W  | Effective Year Built            |             | 1988        |
| AC Type             | 03   | FULL        | Depreciation Code               |             | GD          |
| Bedrooms            | 4    |             | Remodel Rating                  |             |             |
| Full Baths          | 1    |             | Year Remodeled                  |             |             |
| Half Baths          | 1    |             | Depreciation %                  |             | 30          |
| Extra Fixtures      | 0    |             | Functional Obsol                |             |             |
| Total Rooms         | 7    |             | External Obsol                  |             |             |
| Bath Style          | A    | AVERAGE     | Cost Trend Factor               |             | 1           |
| Half Bath Style     | A    | AVERAGE     | Condition                       |             |             |
| Kitchens            | 1    |             | % Complete                      |             |             |
| Kitchen Style       | A    | AVERAGE     | Overall % Condition             |             | 70          |
| Extra Kitchens      | 0    |             | RCNLD                           |             | 248,100     |
| Extra Kitchen St    |      |             | Dep % Ovr                       |             |             |
| FBM Sqft            | 857  |             | Dep Ovr Comment                 |             |             |
| FBM Quality         | 3    |             | Misc Imp Ovr                    |             |             |
| Fireplaces          | 1    |             | Misc Imp Ovr Comment            |             |             |
| WS Flues            |      |             | Cost to Cure Ovr                |             |             |
| Central Vac         | 1    | YES         | Cost to Cure Ovr Comment        |             |             |
| Frame               | 1    | WOOD        |                                 |             |             |

| OB - OUTBUILDING & YARD ITEMS(L) / XF - BUILDING EXTRA FEATURES(B) |             |    |           |     |       |            |        |    |      |      |     |      |            |
|--------------------------------------------------------------------|-------------|----|-----------|-----|-------|------------|--------|----|------|------|-----|------|------------|
| Code                                                               | Description | Su | Sub Type  | Lan | Units | Unit Price | Yr Blt | %  | Dep. | Cond | Gra | Qual | Apprais Va |
| 11                                                                 | POOL I-V    | OB | Outbuildi | L   | 512   | 29.00      | 1975   | 60 | 0.00 | AV   | A   | 1.00 | 8,900      |
| 02                                                                 | SHED/FR     |    |           | L   | 128   | 7.48       | 1975   | 60 | 0.00 | AV   | A   | 1.00 | 600        |

| BUILDING SUB-AREA SUMMARY SECTION |             |        |       |          |           |                |  |
|-----------------------------------|-------------|--------|-------|----------|-----------|----------------|--|
| Subarea                           | Description | Living | Gross | Eff Area | Unit Cost | Undeprec Value |  |
| BMT                               | BASEMENT    | 0      | 952   |          | 19.33     | 18,398         |  |
| CNP                               | CANOPY      | 0      | 68    |          | 4.27      | 290            |  |
| EPF                               | ENCL PORCH  | 0      | 550   |          | 29.05     | 15,977         |  |
| FFL                               | 1ST FLOOR   | 974    | 974   |          | 96.83     | 94,313         |  |
| GAR                               | GARAGE      | 0      | 484   |          | 38.81     | 18,785         |  |
| LLV                               | LOWR LEVEL  | 0      | 550   |          | 24.30     | 13,363         |  |
| OFF                               | OPEN PORCH  | 0      | 596   |          | 9.75      | 5,810          |  |
| SFL                               | 2ND FLOOR   | 1,871  | 1,871 |          | 96.83     | 181,170        |  |
| WDK                               | WOOD DECK   | 0      | 461   |          | 13.65     | 6,294          |  |
| Ttl Gross Liv / Lease Area        |             | 2,845  | 6,506 | 3,660    |           | 354,400        |  |

