

| CURRENT OWNER                                                                                                            |  |      |  | TOPO TYPE                                                                            |  | UTILITY    |  | STREET                                                          |  | LOCATION    |  | CURRENT ASSESSMENT                                                  |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|--------------------------------------------------------------------------------------------------------------------------|--|------|--|--------------------------------------------------------------------------------------|--|------------|--|-----------------------------------------------------------------|--|-------------|--|---------------------------------------------------------------------|-----------|---------|----------|--------------------------------|-----------------------------|---------|---------|----------|--|---------|--|-------|--|----------|--|------|--|-----|--|---------|--|
| SHPAK ANDREW R<br>SHPAK EMILY A<br>16 BLACK DOG LN<br><br>EAST LONGMEADOW MA 01028<br><br>GIS ID F_386425_2850019 Mailed |  |      |  |                                                                                      |  |            |  |                                                                 |  | Description |  | Code                                                                | Appraised |         | Assessed |                                | 1006<br><br>EAST LONGMEADOW |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | TOPO WET                                                                             |  | EASEMENT   |  | TRAFFIC                                                         |  | CORNER      |  | RESIDENTL.                                                          |           | 101     | 346800   |                                |                             |         | 346,800 |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  | RES LAND                                                            |           | 101     | 137500   |                                |                             |         | 137,500 |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | DRAINAGE                                                                             |  |            |  | VIEW                                                            |  | COMMUNITY   |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | SUPPLEMENTAL DATA                                                                    |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | Alt Prcl ID<br>SP Permit<br>Chapter Land<br>OC Dates 4/22/2016<br>In+Ex FY<br>Mailed |  |            |  | Received<br>NIA<br>Field 8<br>Field 9<br>Field 10<br>Assoc Pid# |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  | Total                                                               |           | 484,300 |          | 484,300                        |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
| RECORD OF OWNERSHIP                                                                                                      |  |      |  | BK-VOL/PAGE                                                                          |  | SALE DATE  |  | Q/U                                                             |  | V/I         |  | SALE PRICE                                                          |           | VC      |          | PREVIOUS ASSESSMENTS (HISTORY) |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
| SHPAK ANDREW R<br>TORCIA MICHAEL A<br>TORCIA MICHAEL<br>TORCIA MICHAEL F<br>TORCIA MICHAEL                               |  |      |  | 21182 0167                                                                           |  | 05-18-2016 |  | Q                                                               |  | I           |  | 449,900                                                             |           | 00      |          | Year                           |                             | Code    |         | Assessed |  | Year    |  | Code  |  | Assessed |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | 20995 0352                                                                           |  | 12-18-2015 |  | U                                                               |  | I           |  | 1                                                                   |           | 1A      |          | 2021                           |                             | 101     |         | 332,300  |  | 2020    |  | 101   |  | 318,200  |  | 2019 |  | 101 |  | 309,500 |  |
|                                                                                                                          |  |      |  | 20848 0314                                                                           |  | 08-28-2015 |  | U                                                               |  | I           |  | 1                                                                   |           | 1A      |          |                                |                             | 101     |         | 127,500  |  |         |  | 101   |  | 127,500  |  |      |  | 101 |  | 123,900 |  |
|                                                                                                                          |  |      |  | 20816 0111                                                                           |  | 08-04-2015 |  | U                                                               |  | I           |  | 1                                                                   |           | 1A      |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | 20700 0503                                                                           |  | 05-13-2015 |  | Q                                                               |  | V           |  | 107,000                                                             |           | 1P      |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  | Total                                                                                |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          | Total                          |                             | 459,800 |         | Total    |  | 445,700 |  | Total |  | 433,400  |  |      |  |     |  |         |  |
| EXEMPTIONS                                                                                                               |  |      |  |                                                                                      |  |            |  | OTHER ASSESSMENTS                                               |  |             |  | This signature acknowledges a visit by a Data Collector or Assessor |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
| Year                                                                                                                     |  | Code |  | Description                                                                          |  | Amount     |  | Code                                                            |  | Description |  | YEAR                                                                |           | Amount  |          | Comm Int                       |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |
|                                                                                                                          |  |      |  |                                                                                      |  |            |  |                                                                 |  |             |  |                                                                     |           |         |          |                                |                             |         |         |          |  |         |  |       |  |          |  |      |  |     |  |         |  |

Property Location 16 BLACK DOG LN  
 Vision ID 6846 Account # 6846

Map ID 51/ 6/ 7/ /  
 Bldg # 1

Bldg Name  
 Sec # 1 of 1

Card # 1 of 1

State Use 101  
 Print Date 11/9/2021 9:11:17 AM

| CONSTRUCTION DETAIL |    |             | CONSTRUCTION DETAIL (CONTINUED) |             |             |
|---------------------|----|-------------|---------------------------------|-------------|-------------|
| Element             | Cd | Description | Element                         | Cd          | Description |
| Style               | 06 | COLONIAL    | Basement Floor                  | 12          | CONCRETE    |
| Model               | 01 | RESIDENTIAL | Bsmt Garage                     |             |             |
| Grade               | B  | GOOD        | #Heat Sys                       | 1.00        |             |
| Stories             | 2  |             | 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                   |             | 92.00       |
| Interior Floor 1    | 3  | HARDWOOD    | RCN                             |             | 357,479     |
| Interior Floor 2    | 4  | CARPET      | Net Other Adj                   |             |             |
| Heat Fuel           | 2  | GAS         | Year Built                      |             | 2015        |
| Heat Type           | 1  | FORCED H/A  | Effective Year Built            |             | 2015        |
| AC Type             | 03 | FULL        | Depreciation Code               |             | GD          |
| Bedrooms            | 4  |             | Remodel Rating                  |             |             |
| Full Baths          | 2  |             | Year Remodeled                  |             |             |
| Half Baths          | 1  |             | Depreciation %                  |             | 3           |
| Extra Fixtures      |    |             | Functional Obsol                |             |             |
| Total Rooms         | 7  |             | External Obsol                  |             |             |
| Bath Style          | G  | GOOD        | Cost Trend Factor               |             | 1           |
| Half Bath Style     | G  | GOOD        | Condition                       |             |             |
| Kitchens            | 1  |             | % Complete                      |             |             |
| Kitchen Style       | G  | GOOD        | Overall % Condition             |             | 97          |
| Extra Kitchens      |    |             | RCNLD                           |             | 346,800     |
| Extra Kitchen St    |    |             | Dep % Ovr                       |             |             |
| FBM Sqft            |    |             | Dep Ovr Comment                 |             |             |
| FBM Quality         |    |             | Misc Imp Ovr                    |             |             |
| Fireplaces          | 1  |             | Misc Imp Ovr Comment            |             |             |
| WS Flues            |    |             | Cost to Cure Ovr                |             |             |
| Central Vac         |    |             | 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 |
|                                                                    |             |    |          |     |       |            |        |   |      |      |     |      |            |

| BUILDING SUB-AREA SUMMARY SECTION |             |        |       |          |           |                |  |
|-----------------------------------|-------------|--------|-------|----------|-----------|----------------|--|
| Subarea                           | Description | Living | Gross | Eff Area | Unit Cost | Undeprec Value |  |
| BMT                               | BASEMENT    | 0      | 934   |          | 25.69     | 23,994         |  |
| FFL                               | 1ST FLOOR   | 934    | 934   |          | 128.31    | 119,844        |  |
| GAR                               | GARAGE      | 0      | 603   |          | 51.28     | 30,923         |  |
| OPF                               | OPEN PORCH  | 0      | 35    |          | 14.66     | 513            |  |
| SFL                               | 2ND FLOOR   | 934    | 934   |          | 128.31    | 119,844        |  |
| TQS                               | 3/4 STORY   | 452    | 603   |          | 96.18     | 57,997         |  |
| WDK                               | WOOD DECK   | 0      | 240   |          | 18.18     | 4,363          |  |
| Ttl Gross Liv / Lease Area        |             | 2,320  | 4,283 | 2,786    |           | 357,479        |  |

