



PROPERTY LOCATION

No	Alt No	Direction/Street/City
23		BEDFORD RD, LINCOLN

OWNERSHIP Unit #: _____

Owner 1: CLARKE BRUCE E
 Owner 2: CLARKE KAREN J A
 Owner 3: _____
 Street 1: 23 BEDFORD RD
 Street 2: _____
 Twn/City: LINCOLN
 St/Prov: MA Cntry: _____ Own Occ: Y
 Postal: 01773 Type: _____

PREVIOUS OWNER

Owner 1: _____
 Owner 2: _____
 Street 1: _____
 Twn/City: _____
 St/Prov: _____ Cntry: _____
 Postal: _____ Type: _____

NARRATIVE DESCRIPTION

This Parcel contains 6.248 ACRES of land mainly classified as ONE FAM with a(n) BARN Building Built about 1860, Having Primarily CLAPBOARD Exterior and ASPHALT Roof Cover, with 0 Units, 2 Baths, 0 HalfBaths, 0 3/4 Baths, 0 Rooms, and 0 Bdrms.

OTHER ASSESSMENTS

Code	Descrip/No	Amount	Com. Int

PROPERTY FACTORS

Item	Code	Descip	%	Item	Code	Descip
Z	LC	Historic Dst		U	A	SEPTIC
o	R1	Residential	100	t		
n				I		
Census:				Exmpt		
Flood Haz:						
D				Topo		
s				Street	1	PAVED
t				Traffic	4	MEDIUM

LAND SECTION (First 7 lines only)

Use Code	Description	LUC Fact	No of Units	Depth / PriceUnits	Unit Type	Land Type	LT Factor	Base Value	Unit Price	Adj	Neigh	Neigh Infl	Neigh Mod	Infl 1	%	Infl 2	%	Infl 3	%	Appraised Value	Alt Class	%	Spec Land	J Code	Fact	Use Value	Notes
101	ONE FAM		0		SQUARE FE	PRIME SITE		0	0.	0.000	R6																

IN PROCESS APPRAISAL SUMMARY

Use Code	Building Value	Yard Items	Land Size	Land Value	Total Value	Legal Description
101	206,300		0.000		206,300	See Conservation Restriction Bk 44028/Pg 19
Total Card		206,300	0.000		206,300	Entered Lot Size
Total Parcel		1,825,600	18,300	6,248	1,043,100	2,887,000
Source: Market Adj Cost		Total Value per SQ unit /Card: 101.99		/Parcel: 254.29		Land Unit Type:

PREVIOUS ASSESSMENT

Parcel ID 134 28 0

Tax Yr	Use	Cat	Bldg Value	Yrd Items	Land Size	Land Value	Total Value	Asses'd Value	Notes	Date

SALES INFORMATION

TAX DISTRICT _____ PAT ACCT. _____

Grantor	Legal Ref	Type	Date	Sale Code	Sale Price	V	Tst	Verif	Assoc PCL Value	Notes

BUILDING PERMITS

Date	Number	Descip	Amount	C/O	Last Visit	Fed Code	F. Descip	Comment

ACTIVITY INFORMATION

Date	Result	By	Name

Sign: VERIFICATION OF VISIT NOT DATA ____/____/____

Total AC/HA: 0.00000	Total SF/SM: 0.00	Parcel LUC: 101 ONE FAM	Prime NB Desc RES CAT 6	Total:	Spl Credit	Total:
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