

ERVINTON DISTRICT

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|                                                          |  |                                                                                                   |
|----------------------------------------------------------|--|---------------------------------------------------------------------------------------------------|
| HONAKER DANNY WAYNE<br>RT 1 BOX 735<br>CLINCHCO VA 24226 |  | DATE RECORDED 7-27-98<br>DEED OR WILL BOOK 5-1-87<br>267-232<br>243-771<br>CONSID-ERATION 5000.00 |
|                                                          |  | DATE RECORDED<br>DEED OR WILL BOOK<br>CONSID-ERATION                                              |
|                                                          |  | DATE RECORDED<br>DEED OR WILL BOOK<br>CONSID-ERATION                                              |
|                                                          |  | DATE RECORDED<br>DEED OR WILL BOOK<br>CONSID-ERATION                                              |

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|          |               |                                           |             |  |
|----------|---------------|-------------------------------------------|-------------|--|
| CLASS    | 2             | LEGAL DESCRIPTION<br>NEELY RIDGE<br>2. AC |             |  |
| ZONING   |               |                                           |             |  |
| DISTRICT |               |                                           |             |  |
|          | 02            |                                           |             |  |
| YEAR     | VALUE OF LAND | VALUE OF IMPROV.                          | TOTAL VALUE |  |
| 1992     | 800           | -                                         | 800         |  |
| 1993     | 800           |                                           | 800         |  |
| 1994     |               |                                           |             |  |
| 1995     |               |                                           |             |  |
| 1996     |               |                                           |             |  |
| 1997     |               |                                           |             |  |
| 1998     |               |                                           |             |  |
| 1999     |               |                                           |             |  |
| 2000     |               |                                           |             |  |
| 2001     |               |                                           |             |  |
| 2002     |               |                                           |             |  |
| 2003     |               |                                           |             |  |

| BUILDING PERMITS |      |      |         |            |          |          |
|------------------|------|------|---------|------------|----------|----------|
| NO.              | TYPE | DATE | % COMP. | DATE FINAL | APPROVAL | APPROVED |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
| NOTES:           |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |
|                  |      |      |         |            |          |          |

|             |             |                                                                                                                      |                                                                     |        |                                                                                                                        |                                                                                                                      |                                                                                 |
|-------------|-------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Dwelling    | Comp. Sh.   | Wood Siding                                                                                                          | Yr. Built                                                           | Remod. | Bsmt. [ ] 2nd [ ]                                                                                                      | Plaster                                                                                                              | BATH(S) Full ½ Bath(s)                                                          |
|             | Slate       | Brick                                                                                                                | No. Stories                                                         |        | 1st [ ] 3rd [ ]                                                                                                        | Sheet rock                                                                                                           | Modern Bath <input type="checkbox"/> Modern Kitchen <input type="checkbox"/>    |
|             | Asbestos    | Asb. Wood Shg.                                                                                                       | S. Level <input type="checkbox"/> S. Foyer <input type="checkbox"/> |        | Total No. Bedrooms                                                                                                     | Ceciled                                                                                                              | Cent. Heat <input type="checkbox"/> A/C <input type="checkbox"/>                |
|             | Metal       | Cin. Block <input type="checkbox"/> Stone <input type="checkbox"/>                                                   |                                                                     |        |                                                                                                                        | Panel                                                                                                                | Fir. or Wall Furnace <input type="checkbox"/> Stove(s) <input type="checkbox"/> |
| Wood Frame  | Tar & Grav. | Stucco <input type="checkbox"/> Con. Block <input type="checkbox"/>                                                  | Crawl <input type="checkbox"/> Conc. <input type="checkbox"/>       |        | HW <input type="checkbox"/> Pine <input type="checkbox"/> Carp. <input type="checkbox"/> Tile <input type="checkbox"/> | Unfinished                                                                                                           |                                                                                 |
| Cin. Block  | Tile        | Aluminum <input type="checkbox"/> Masonite <input type="checkbox"/>                                                  | Riers <input type="checkbox"/> Cin. Blk. <input type="checkbox"/>   |        |                                                                                                                        |                                                                                                                      | Number                                                                          |
| Steel Frame | Shakes      | Storm Doors <input type="checkbox"/> Storm Win. <input type="checkbox"/>                                             | Slab <input type="checkbox"/> Brick <input type="checkbox"/>        |        | Disappearing Stairs                                                                                                    | Gd. <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> VP <input type="checkbox"/> | Number Chimneys                                                                 |
|             |             |                                                                                                                      | Basement Size                                                       |        | Attic Floor & Stairs                                                                                                   |                                                                                                                      | Brick [ ] C. Block [ ]                                                          |
|             |             | Gd. <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> VP <input type="checkbox"/> | Bsmt. Finish                                                        |        | ¼ <input type="checkbox"/> ½ <input type="checkbox"/> ¾ <input type="checkbox"/> Full <input type="checkbox"/>         | Attic <input type="checkbox"/> Walls <input type="checkbox"/> Fl. <input type="checkbox"/>                           | Stone [ ] Metal [ ]                                                             |

[illegible][illegible]

|                                  |                                      |                                                             |
|----------------------------------|--------------------------------------|-------------------------------------------------------------|
|                                  |                                      | General Remarks:                                            |
| OPES UP <input type="checkbox"/> | SLOPES DOWN <input type="checkbox"/> | Could not get out of vehicle because of dog.<br>No one home |
| DEEP UP <input type="checkbox"/> | STEEP DOWN <input type="checkbox"/>  |                                                             |