

**APPLICATION FOR REQUEST FOR REVIEW
OF THE APPRAISED VALUE OF REAL ESTATE—2016 TAX YEAR
NONREASSESSMENT YEAR APPEAL PERIOD IS JANUARY 1, 2016 THRU JANUARY 15, 2017**

APPEAL NUMBER: _____

PLEASE REFER TO THE TAX MAP NUMBER WHEN REQUESTING INFORMATION.

PROPERTY OWNERS NAME _____

MAILING ADDRESS _____

PHYSICAL ADDRESS _____

TAX MAP NUMBER _____--_____._____ DISTRICT _____

DAYTIME PHONE NUMBER _____

I AM REQUESTING A REVIEW OF MY CLASSIFICATION _____

I AM REQUESTING A REVIEW OF MY VALUE _____

IF REQUESTING A REVIEW OF VALUE, PLEASE TELL US WHAT YOU THINK THE PROPERTY SHOULD BE WORTH, YOUR REASONS FOR THE VALUE AND ANY STRUCTURAL DAMAGE YOU MAY HAVE.

I UNDERSTAND THAT A REVIEW CAN HAVE ONE OF THE FOLLOWING RESULTS, THE VALUE CAN STAY THE SAME, THE VALUE CAN BE REDUCED, OR THE VALUE CAN BE INCREASED.

DATE _____ TAXPAYERS SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

REVIEW ASSIGNED TO _____

APPRAISER'S COMMENTS AND CONCLUSIONS _____

DATE _____ APPRAISER'S SIGNATURE _____

*****PLEASE BE ADVISED IT MAY TAKE SEVERAL WEEKS TO PROCESS YOUR APPEAL FROM THE DATE IT WAS FILED. YOU WILL BE NOTIFIED IN WRITING BY MAIL ONCE YOUR APPEAL HAS BEEN COMPLETED.*****