

PETITION OF APPEAL
COUNTY BOARD OF TAXATION

Appeal Number
Filed
Check/Cash
Checked

Tax Year

NAME OF PETITIONER
Last Name, First Name

MAILING ADDRESS

Daytime Telephone No. : E-mail Address

PROPERTY CLASS BLOCK LOT QUALIFIER Lot Size

MUNICIPALITY Property Street Address / Location

Select Appeal Type:

In-Person Hearing

Summary Hearing - I am opting to have my appeal heard as a summary action on the evidence I submit, without my appearance (See Instruction #8)

Name, address and telephone number of person or attorney to be notified of hearing date and judgment:

SECTION I APPEAL OF REAL PROPERTY VALUATION (SEE INSTRUCTION SHEET FOR FILING FEES AND DEADLINE DATE)

CURRENT ASSESSMENT

REQUESTED ASSESSMENT

Land \$
Bldg/Improvement \$
Abatement (If any) \$
Total \$

Land \$
Bldg/Improvement \$
Abatement (If any) \$
Total \$

Purchase Price \$ Date of Purchase

Tax Court Pending: YES NO

REASON FOR APPEAL:

SECTION II COMPARABLE SALES (See Instruction #10A)

Table with 4 columns: Block/Lot/Qualifier, Property Street Address / Location, Sale Price, Sale/Deed Date. Rows 1-5.

SECTION III APPEAL FOR DENIAL OF: (See Instruction #4, "Filing Fees")

Attach Copy of Denial Notice for Section III Deductions, Classifications and Exemptions

- Checkboxes for: Veteran's Property Tax Deduction, 100% Disabled Veteran Exemption, Senior Citizen/Disabled Person Property Tax Deduction, Farmland Assessment Classification, Abatement or Exemption - Religious, Charitable, etc.

WHEREFORE, Petitioner seeks judgment reducing/increasing (circle one) the said assessment(s) to the correct assessable value of the said property and/or granting the requested deduction, credit, Farmland Assessment classification, exemption or abatement. Petitioner certifies that a copy of this appeal (and attachments, if any) has been served upon the Assessor and Clerk of the municipality where this property is located. Petitioner certifies that the foregoing statement is true and is aware that if the foregoing statement is willfully false, he/she is subject to punishment.

Date Original Signature of Petitioner or Attorney for Petitioner