DEPARTMENTAL USE					
Interim/Annual:					
Eff. Date C/M:					
Eff. Date SCH:					
Lii. Date Seii.					

Continued on Reverse Side

## APPEAL FORM BOARD OF ASSESSMENT APPEALS ADAMS COUNTY, PENNSYLVANIA

REVISED 9/3/2014

## **INSTRUCTIONS:**

Every question must be answered. If the question does not apply to your appeal, answer "N/A" (not applicable). Incomplete or illegible applications will be returned. A separate appeal form MUST be filed for EACH parcel involved in the appeal. Your appeal must be received by the Board of Assessment Appeals by **AUGUST 1st**, or within forty (40) days from the mailing date of your Change of Assessment Notice. You must state on the appeal if your Fair Market Value opinion is a current or base year value. Any evidence provided by you should support the fair market value for the year you have stated. You shall forward any appraisals or other forms of evidence at least 10 days prior to your scheduled appeal hearing. After the board receives your appeal form, you will be notified of the date, time and place of your appeal hearing at least twenty (20) days in advance.

NOTE: By appealing, you open your property to the revaluation process, in which your property's assessment may be lowered, raised or remain the same. RETURN to: Board of Assessment Appeals, c/o Adams County Tax Services, 117 Baltimore Street, Room 202, Gettysburg, PA 17325; Fax to (717) 334-2091; or email to taxoffice@adamscounty.us.

A complete list of appeal rules can be	found at www.adam	nscounty.us/D	ept/TaxServices/Pages/	default.aspx	
Parcel Identification: Appealed Assessed Valuation:			Municipality: Appealed Market Value:		
Owner's(s') Mailing Address:					
Property Address:					
Size of Lot:	Acres	OR		Square Feet	
Property Type: Check and Complete F		:			
Residential: Year(s) Built No. of Stories  Vacant Land: Well or Public Wa	s Total Squar	e Feet	Outbuildings/Other		
Commercial: Use	Year(s	) Built	Gross SqFtLe	ased SqFt	
Owner Occupied SqFt A	Annual Gross Rent	Other	Income/Expense Info		
*Attach Last Three (3) Years' Inc	come & Expense Sta	tements from	Federal Income Tax Re	turn	
Apartments: Year(s) Built	No. of Units	Rent/Unit	Avg Vacancy	Gross Rent	
*Attach Last Three (3) Years' Inc	come & Expense Sta	tements from	Federal Income Tax Re	turn	
Agricultural: (10 or more acres)	Are you appealing F				

Are you appealing Clean and Green Status? \_\_\_\_\_

CURRENT year or BASE ye	ar appeal? Owner's Opinion of	Fair Market Value	:\$		
Basis for Appeal (include a	all factors you believe will be helpful in dete	rmining the true Fa	ir Market Value	):	
Check and attach a copy of	f applicable property conditions:				
Deed Restrictions	Easements	Flood Pl	ain	Wetlands	
Right-of-Way	Perc Approval/Denial	Other (e	Other (explain)		
Please list any Demolition	s, New Construction, Additions, Remodeling	g, Repairs, etc. since	e your purchase:		
		Year	Cost \$	<u> </u>	
				<u> </u>	
				5	
List recently sold compara	ible sales in the area of your property:				
Seller:	Property Address:	Parcel ID:	Price:	Date:	
1.					
2.					
3.					
, , ,	resented by legal counsel, please complete l				
Attorney & Address:		Pho	ne Number: _		
The undersigned represen	its (please print; if this is a corporation, list	name and title)			
is the property owner, att	orney for the property owner, corporate of	ficer, or power of a	ttorney of the a	bove	
described property and af	firms that all statements herein are true an	d correct to the be	st of his/her kno	wledge,	
information and belief.					
Owner Signature			Date:		
Owner Signature			Date:		
Telephone: Home:	Business:				