

**APPLICATION FOR HEARING  
BEFORE THE 2013  
BOARD OF EQUALIZATION AND REVIEW**

Property Owners Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Cell Number \_\_\_\_\_

(PLEASE COMPLETE A FORM FOR EACH PARCEL)

PARCEL NUMBER \_\_\_\_\_

Property Address: \_\_\_\_\_

PLEASE EXPLAIN WHY THE APPRAISAL SHOULD BE ADJUSTED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

	<u>LAND</u>	<u>BUILDINGS</u>	<u>TOTAL</u>
County's Appraisal	_____	_____	_____
Taxpayer's Suggested Value	_____	_____	_____

The taxpayer shall present appeal by:

1. Personal appearance \_\_\_\_\_
2. Providing by representation by \_\_\_\_\_; or,
3. Correspondence \_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_

Date Submitted \_\_\_\_\_

\_\_\_\_\_

# IMPORTANT: READ CAREFULLY

**APPLICATION FORM:** A form must be completed for each parcel to be reviewed by the Board.

**APPEAL DEADLINE:** All applications for appeals must be filed prior to the official adjournment date. The Board will not accept appeals filed after the deadline

**APPOINTMENT NOTIFICATION:** Upon receipt of a timely application, the applicant will be notified of the date and time of the appointment.

**REPRESENTATION BEFORE THE BOARD:** All appeals heard by the Board must be made by personal appearance by the property owner, by and authorized representative, or by correspondence.

**PRESENTATION OF THE APPEAL:** Each appeal should be presented with evidence to support the owner's proposed value. All written appeals should include any documentation to be entered into records.

## ALL FORMS MUST BE RETURNED TO:

THE BOARD OF EQUALIZATION AND REVIEW  
C/O AVERY COUNTY TAX ASSESSOR'S OFFICE  
PO BOX 305  
NEWLAND NC 28657

FOR ASSISTANCE COMPLETING THIS FORM OR ANY QUESTIONS,  
YOU MAY CONTACT OUR OFFICE AT: 828-733-8214

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### For Office Use Only:

Appointment Date: \_\_\_\_\_ Time: \_\_\_\_\_

Form Received: \_\_\_\_\_

Parcel Review Date: \_\_\_\_\_ By: \_\_\_\_\_

**BER Vote:**

\_\_\_\_\_ In favor  
\_\_\_\_\_ Against  
\_\_\_\_\_ Abstained

**BER Decision**

No Change  
 Reduced Value to: \_\_\_\_\_  
 Increased Value to: \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_