

DATE: MM/DD/YYYY		TAX ID NUMBER
2014 WISE COUNTY REASSESSMENT APPEAL FORM		

Wise County Assessor's Office

<http://www.wisecounty.org/CommRev/reassessment.html>

PO Box 1278 Telephone: 276-328-8228
Wise, VA 24293 Fax: 276-328-6937

In order to review your property, this application must be filled out in its entirety. Please complete the following to the best of your ability:

Name of Legal Property Owner:	
Name of Representative/Agent* <small><i>Letter of Authorization must be attached by the land owner, giving you permission to discuss this appeal with our office</i></small>	
Mailing Address:	
Physical Address of Property Being Appealed <small><i>(if different from above)</i></small>	
Building/Business Name (if any):	
Telephone Number:	
Home: ()	Business: ()

Please note:

- * All real estate assessments are derived by accepted appraisal practices, and are based upon sales data gathered from the real estate market in our area.
- * The assessment is presumed to be correct. By completing this form, you acknowledge that Virginia State Code § 58.1-3379B states "...there shall be a presumption that the valuation determined by the assessor is correct. The burden of proof on appeal to the board shall be on the taxpayer to rebut the presumption and show by a preponderance of the evidence that the property in question is valued at more than its fair market value or that the assessment is not uniform in its application and that it was not arrived at in accordance with generally accepted appraisal practices..."
- * By submitting this application, you acknowledge that a review of the property in question may result in any of the following actions:
 - 1.) No Value Change 2.) Value may Decrease 3.) Value may Increase
- * A separate application must be filled out for each value that is to be appealed.
- * To ensure that you can be scheduled for a hearing, please submit this application no later than **Friday, February 7, at 4:30 PM**. Postmarks will be accepted.

Grounds For Appeal

Please Select the Reason for Your Appeal:

<input type="checkbox"/>	Does Not Represent a Fair Market Value. This property is not assessed at fair market value, as indicated by the comparable properties I have provided.
<input type="checkbox"/>	Lack of Uniformity. This assessment is out of line with similar properties in the same area, as indicated by the comparable properties I have provided.
<input type="checkbox"/>	Mistakes of Fact. The information used to assess the property was inaccurate, as indicated in the <i>facts about structure</i> section below. (Includes computation errors)

Owner's Opinion

Please Briefly Summarize the Reason(s) why you believe the Assessment in question is inaccurate: _____

In your opinion, what should the fair market value of this property actually be?

\$ _____

Facts About Structure

Number of Stories	_____
Square Footage of First Above Ground Floor	_____
Square Footage of Basement (if present)	_____
Approximately what portion of basement is finished?	_____
Approximately what portion of attic is finished?	_____
Number of Baths with a Shower OR Tub	_____
Number of Baths with a Sink & Toilet only	_____
Number of Fireplaces	_____
Central Air Conditioning or Heat Pump	Yes / No
Number of Attached Garages	_____
Number of Attached Carports?	_____
What type of Water supply?	_____
What type of Sewer?	_____
Is this property currently for sale?	Yes / No
If Yes, what is the listing price: \$	_____
Has this property sold in the last 24 months?	Yes / No
If Yes, what was the sale price: \$	_____
Has this property been appraised in the last 12 months?	Yes / No
Have any structures been removed since our site visit?	Yes / No
Is there any serious damage to the structure?	Yes / No
<i>(If yes, please be prepared to describe and offer evidence of this damage)</i>	

COMPARABLE PROPERTIES

*Please provide at least three properties whose location, characteristics, assessed value, or sales prices support your assessment appeal. You may wish to access our online Real Estate records site at:
<http://www.wisecounty.org/EagleWeb.html>*

Tax ID Number:	Owner's Name:	
Property Address:		
Distance from your property:		
Sale Date:	Sale Price:	Year Built:
Assessed Value of Land:	Assessed Value of Improvements:	
Size of Parcel (Total Number of lots/Acres):		
How do you feel that this property supports your appeal?		
Tax ID Number:	Owner's Name:	
Property Address:		
Distance from your property:		
Sale Date:	Sale Price:	Year Built:
Assessed Value of Land:	Assessed Value of Improvements:	
Size of Parcel (Total Number of lots/Acres):		
How do you feel that this property supports your appeal?		
Tax ID Number:	Owner's Name:	
Property Address:		
Distance from your property:		
Sale Date:	Sale Price:	Year Built:
Assessed Value of Land:	Assessed Value of Improvements:	
Size of Parcel (Total Number of lots/Acres):		
How do you feel that this property supports your appeal?		

I certify that all the information contained in this application is true and accurate to the best of my knowledge, and that I have no intent to knowingly mislead any authorized representative of Wise County. I believe that I have a justifiable concern and I will assist the Assessor's Office by providing any and all pertinent information that might have an impact on my assessment. Furthermore, I certify that I am the owner of the property in question, or that I am duly appointed representative of the owner.

Signature of Applicant:

Date:

_____ / ____ / _____