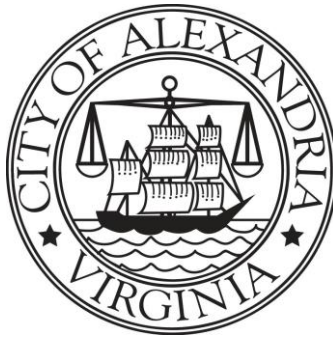


**NOTE: Please read "INSTRUCTIONS FOR FILING"**

**Failure to complete application properly may result  
in denial of the application for hearing.**



## **Board of Equalization and Assessment Review**

**Contact Information:**

phone: 703.746.4646 or

703.746.4180

email: [realestate@alexandriava.gov](mailto:realestate@alexandriava.gov)

**Office Location:**

City Hall, 301 King Street

Room 2600

Alexandria, Virginia 22314

# **2022**

## **Appeal of Real Estate Assessment**

### **STATUTORY DEADLINE**

**POSTMARKED: JUNE 1, 2022**

**OR**

**HAND DELIVERED: CITY HALL, ROOM 2600 BY 5:00 P.M. ON JUNE 1, 2022**

**DUE TO THE COVID-19 PANDEMIC, CITY HALL MAY BE OPEN BY  
APPOINTMENT ONLY. PLEASE CONTACT 703.746.4646 OR  
[REALESTATE@ALEXANDRIAVA.GOV](mailto:REALESTATE@ALEXANDRIAVA.GOV) TO MAKE AN APPOINTMENT.**

**NO ADDITIONAL MATERIAL WILL BE ACCEPTED AFTER THE DEADLINE**

The following notification is required by law and only applies to residential properties with less than four units:

**Per §58.01-3331(E) of the Code of Virginia as amended and enacted by the General Assembly, effective January 1, 2012, in any appeal of assessment filed by the owner of residential real property containing less than four units to the Board of Equalization pursuant to §58.01-3379 of the Code, the assessor shall: (a) provide the property owner written notice of the hearing date at least 45 days prior to the Board hearing; (b) inform the property owner of the right to review and obtain copies of all information used in the determination of fair market value; and (c) advise the property owner of the right to request a physical inspection of the subject property.**

# APPEAL OF REAL ESTATE ASSESSMENT

## INSTRUCTIONS FOR FILING

Be as specific as possible as to why you feel that your assessment is: **1) above or below fair market value**, and/or **2) inequitable when compared to like surrounding properties**. If you are aware of specific sales which you contend are comparable to your property, or any unusual conditions that affect the fair market value, please include these with your appeal so that we may consider them in the appeal process. Sales for your assessment neighborhood may be viewed on our website at [alexandriava.gov/realestate](http://alexandriava.gov/realestate). **Only sales occurring prior to January 1, 2022 may be considered in arriving at the assessed value**; hence, you may only rely on sales occurring prior to January 1, 2022 when preparing your 2022 Appeal of Real Estate Assessment.

Your Appeal of Real Estate Assessment **must be typed or printed legibly on an original 2022 form** obtained from our office or downloaded from our website. Use a **separate** appeal form **for each parcel** being appealed. All pages of your submission must be numbered consecutively. Property owners, agents and/or representatives are required to submit all data that supports their reason for appeal when this form is filed. Photographs of the property should be paper clipped to the original appeal.

If you are an agent for the property owner, you must provide a proper Letter of Authorization from the property owner (not the tenant), to act on the owner's behalf for the current assessment year. You may review instructions on our web page or request instructions from Office staff to ensure your submission of an acceptable authorization. The letter of authorization must accompany this completed form.

**For commercial or income-producing properties**, it is **very** important that an income and expense survey form has been filed with our office. Calendar year **2021** data may be submitted with your appeal, but please make sure that the information is also submitted during the yearly request for the information. More information regarding income and expense submissions can be found at <https://www.alexandriava.gov/realestate/info/default.aspx?id=1664>

**AN ORIGINAL AND SEVEN COPIES OF THE COMPLETED APPEAL FORM and all supporting documentation must be submitted at the time the appeal is filed.**

Board of Equalization and Assessment Review  
P.O. Box 178  
Alexandria, VA 22313-1501

Please be advised that all data supporting this appeal must be submitted when this form is filed. **NO ADDITIONAL DOCUMENTATION OF ANY KIND WILL BE ACCEPTED AT THE HEARING.** You will be advised of your **hearing date and time in writing** and you may only **reschedule one time**. If you wish to withdraw your appeal from the Board, you must do this in writing at least forty-eight hours prior to your scheduled hearing. The Board has the authority to waive the forty-eight hour requirement, or it may hear the appeal.

All information pursuant to Virginia Code Section 58.1-3331 shall be made available to the taxpayer/appellant upon his/her request. Records are available for inspection and copying in the Office of Real Estate Assessments on Monday through Friday from noon until 4:00 p.m., except on such days when the office is otherwise closed. Additionally, any written information that will be given to the Board or relied upon by the Office regarding the 2022 assessment of your property will be available to you seven (7) days prior to your hearing date. It will be sent to you via e-mail or United States Postal Service as you have indicated on page 1 of your appeal form.

Please refer to the Rules and Procedures for Hearings of the Board of Equalization and Assessment Review included with this form and also included on our web site.

A pending review by the Office or appeal to the Board of Equalization **does not change the due date for real estate taxes.**  
**Have you...**

- ☐ Completed all lines of the appeal form?
- ☐ Checked off appropriate boxes indicating your reason for applying for an appeal hearing?
- ☐ Clearly printed phone numbers and your e-mail address?
- ☐ Consecutively numbered all pages including attachments beginning with the application as Page #1?
- ☐ Put your Tax Map Reference Number on ALL pages of your submission?
- ☐ Paper clipped all documents to the BACK of the application? (Do not staple any portion of your submission.)
- ☐ Included the **original application and attachments plus seven copies** of the application and its attachments?
- ☐ Kept a copy for your records?

**2022 APPEAL OF ASSESSMENT****(For ONE parcel only)**

Note: If you are downloading your form, please thoroughly read the  
"Instructions for Filing."

**Do not staple any documents. Use paperclips.**

Map No.	Block	Lot
Account No.		Date
<b>2020 ASSESSED VALUE</b>		
Land	Building	Total
<b>2022 ASSESSED VALUE</b>		
Land	Building	Total

**For Office Use Only:**

Abstract Code: \_\_\_\_\_  
 Neighborhood: \_\_\_\_\_  
 Appraiser: \_\_\_\_\_  
 Appeal # \_\_\_\_\_  
 2022 Authorization: Enclosed ☐ On file ☐  
 Appeal Filed? \_\_\_\_2021 \_\_\_\_2020 \_\_\_\_2019  
 2022 Review Filed? ☐ Yes ☐ No

**Revised Assessment:**

Land: \_\_\_\_\_  
 Building 1: \_\_\_\_\_  
 Building 2: \_\_\_\_\_  
 Building Total: \_\_\_\_\_  
 Total: \_\_\_\_\_

Name of Owner \_\_\_\_\_

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

Mailing Address (if different than property address): \_\_\_\_\_

Sale Price (if purchased within the last five years) ..... \$ \_\_\_\_\_

If loan, state full original amount ..... \$ \_\_\_\_\_

Date of loan \_\_\_\_\_ Terms \_\_\_\_\_

Amount of insurance carried on real estate ..... \$ \_\_\_\_\_

I /We, hereby apply for a hearing before the Board of Equalization and Assessment Review for the following reasons **(check any boxes)**

- ☐ 1. The new assessment is in excess of the Market Value of the property.  
☐ 2. The new assessment is inequitable as compared to like surrounding properties.  
☐ 3. Other: EXPLAIN FULLY (use additional sheets if necessary) \_\_\_\_\_

**State your opinion of the Fair Market Value as of January 1, 2022. \$** \_\_\_\_\_

I, (we), the undersigned hereby verify that the information given is correct to the best of my (our) knowledge.

\_\_\_\_\_  
*Signature - owner*\_\_\_\_\_  
*Signature - agent*\_\_\_\_\_  
*Print Name - owner*\_\_\_\_\_  
*Print Name - agent*

Date: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Required - Telephone: (work) \_\_\_\_\_ (home) \_\_\_\_\_

**I, (we), wish to have all correspondence related to this Appeal sent to: (only one box may be checked)**☐ E-mail (please provide address) ☐ Property address ☐ Mailing address ☐ Other (please provide address)

Written staff comments that will be given to the Board will be sent to you by email if you provide an email address above. If no email address is provided, comments will be available for pick up in our office 5 days prior to your hearing date.

Applicant- Please complete.		
Map	Block	Lot

## Block

**Lot**[illegible]

Hearing Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Hearing notification letter sent?

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone Notes: \_\_\_\_\_

Administrative Use Only:	
<b>(1) RealWare Changes</b>	<b>(4) REAVCS entry</b>
<input type="checkbox"/> Land Abstract Override entered	<input type="checkbox"/> Received, assigned and completed dates entered
<input type="checkbox"/> Improvement Market Override entered	Initials: _____ Date: _____
<input type="checkbox"/> Correction type entered	
Initials: _____ Date: _____	
<b>(2) REAVCS Data Entry</b>	<b>(5) Tax Adjustment Signed</b>
Reason Code Entered _____	Reason Code: _____
Tax Adjustment Number _____	Director: _____ Date: _____
Initials: _____ Date: _____	
<b>(3) Notification</b>	<b>(6) Final Check</b>
<input type="checkbox"/> Letter sent _____ <input type="checkbox"/> Study Group Sales enclosed	<input type="checkbox"/> Notification Letter sent
<input type="checkbox"/> Board of Equalization Appeal form enclosed	<input type="checkbox"/> Value Change History checked (RealWare)
<input type="checkbox"/> Other – specify: _____	<input type="checkbox"/> Verified tax adjustment sent to Treasury
Initials: _____ Date: _____	Initials: _____ Date: _____

#### (4) REAVCS entry

- ☐ Received, assigned and completed dates entered

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**(5) Tax Adjustment Signed**

Reason Code: \_\_\_\_\_

Director: \_\_\_\_\_ Date: \_\_\_\_\_

### (6) Final Check

- ☐ Notification Letter sent
- ☐ Value Change History checked (RealWare)
- ☐ Verified tax adjustment sent to Treasury

Initials: \_\_\_\_\_ Date: \_\_\_\_\_