

NOTE: Please read “INSTRUCTIONS FOR FILING”.
The instructions must be adhered to when filing form.



Board of Equalization and Assessment Review

Contact Information:

703-746-4646 (Voice)
703-746-4180 (Appeal form request)
realestate@alexandriava.gov (e-mail)

alexandriava.gov/realestate
(website / download forms)

Office Location:

301 King Street
City Hall, Room 2600
Alexandria, Virginia 22314

2011

Appeal of Real Estate Assessment

STATUTORY DEADLINE

POSTMARKED: JULY 1, 2011

HAND DELIVERED: ROOM 2600 BY 5:00 P.M. ON JULY 1, 2011

NO ADDITIONAL MATERIAL ACCEPTED AFTER DEADLINE.

NO EXCEPTIONS

NO FAX SUBMISSIONS

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

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 web site at alexandriava.gov/realestate . **Only sales occurring prior to January 1, 2011 may be considered in arriving at the assessed value; hence, you may only rely on sales occurring prior to January 1, 2011 when preparing your 2011 Appeal of Real Estate Assessment.**

Your Appeal of Real Estate Assessment must be typed or printed legibly on an original 2011 form obtained from our office or downloaded from our web site. 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. A photograph of the property is requested by the Board of Equalization and Assessment Review (Board) and 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 owner's behalf for the current assessment year. You may review instructions on our web page or request instructions from Department staff to ensure your submission of an acceptable authorization. **The letter of authorization must accompany this completed form.**

If the property to be reviewed is an **income-producing property** (e.g., apartment building, office building, shopping center, retail, warehouse, etc.), and you have not previously submitted to the Department of Real Estate Assessments a statement of income and expense for calendar year **2009** when requested by the Department, pursuant to Section 58.1-3294 of the Code of Virginia, the Board of Equalization and Assessment Review may not consider this information as a basis for your appeal.

An original and seven copies of the appeal 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 WRITTEN DOCUMENTATION 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. The records are available for inspection and copying in the Department 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 Department regarding the 2011 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 Department 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?**

2011 APPEAL OF ASSESSMENT

Original or downloaded forms only.

Attach photo to form.

(For ONE parcel only)

Hearing Scheduled:

Date: _____

Time: _____

Time allowed: _____

Do not staple any documents. Use paperclips.

Case Number: _____

Map No.	Block	Lot
Account No.		Date
2010 ASSESSED VALUE		
Land	Building	Total
2011 ASSESSED VALUE		
Land	Building	Total

For Office Use Only:

Abstract Code: _____

Neighborhood: _____

Appraiser: _____

Appeal # _____

2011 Authorization: Enclosed On file

Appeal Filed? ___2010 ___2009 ___2008

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) _____

Was a 2011 Request for Review of Assessment filed with the Dept. of Real Estate Assessments? Yes No

State your opinion of the Fair Market Value as of January 1, 2011. \$ _____

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)

Property address Mailing address Other (please provide address) E-mail (please provide address)

Applicant Numbered pages

Applicant Case Page #1 of _____

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

