THIS FORM IS NOW AVAILABLE FOR ONLINE SUBMISSION AT OUR WEBSITE: alexandriava.gov/realestate.
WE ENCOURAGE YOU TO FILE ONLINE.

Department of Real Estate Assessments

Contact Information:

phone: 703.746.4646 or 703.746.4180
email: realestate@alexandriava.gov

Office Location:
City Hall, 301 King Street
Room 2600
Alexandria, Virginia 22314

2013

Request for Review of Real Estate Assessment

Real estate assessments, property information, sales information, and forms are available on the Department of Real Estate Assessments website at **alexandriava.gov/realestate.**

All Requests Must Be Submitted By March 15.

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

City of Alexandria, Virginia
Department of Real Estate Assessments

2013 Request for Review of Real Estate Assessment

INSTRUCTIONS FOR FILING

The purpose of this form is to request a review of your assessment by the staff of the Department of Real Estate Assessments. If you feel your property is appraised above or below the fair market value, or that your assessment is not equitable with surrounding properties, or is otherwise erroneous, you may file this form.

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 requesting a review of your classification, please provide an explanation on the form. If you are aware of specific sales, which are comparable to your property, or any unusual conditions that affect the fair market value, please include these with your review so that we may consider them in the review process. Sales for your assessment neighborhood may be viewed on our website: alexandriava.gov/realestate. **Only sales occurring prior to January 1, 2013 may be considered in arriving at the assessed value; hence, you may only rely on sales occurring prior to January 1, 2013 when preparing your 2013 Request for Review of Real Estate Assessment.**

When filling out this form, please include a telephone number where you can be reached between 8 a.m. and 5p.m., Monday – Friday; and your email address. It is necessary for our office to have this information in order to set up an appointment for a physical inspection or for discussing the appraised value. All requests for Review of Assessment must be typed or printed legibly on an original form obtained from our office or downloaded from the website. **In addition, this form is now available for ONLINE SUBMISSION on our website.** We encourage you to submit online. Submit a separate Request for Review form for each parcel. **Property owners, agents and/or representatives are required to submit all data that supports their reason for a request for review when this form is filed.** Completed Request for Review of Real Estate Assessment forms must be submitted to the Department of Real Estate Assessments no later than **March 15**. Only those forms received by the Department of Real Estate Assessments or postmarked by the United States Postal Service no later than **March 15** will be accepted.

If you are an agent for the property owner, you must provide proper authorization from the property owner **(not the tenant)** to act on their behalf for the current assessment year. You may request instructions from the Department of Real Estate Assessments to ensure your submission of an acceptable authorization. Instructions are also available on our web page at http://alexandriava.gov/1662. **The letter of authorization must accompany your completed form.** Make it clear on the form where you want the review results mailed. **We will only mail / email results to ONE address.**

If the property to be reviewed is an **income-producing property** (e.g., apartment building, office building, shopping center, retail, warehouse, etc.), and you did not submit a statement of income and expense for calendar year 2011 to the Department of Real Estate Assessments when requested, we urge you to do so prior to your review. This information is extremely helpful in determining the fair market value of your property. **The Income and Expense form will also be available for online submission this year**. Check our website for details: alexandriava.gov/realestate.

This form is not for a hearing by the Board of Equalization. A separate form is available for that purpose. The Board of Equalization filing deadline is June 1. **A pending review by the Department or appeal to the Board of Equalization does not change the due date for real estate tax payments.**

MAILING ADDRESS:
Department of Real Estate Assessments
P.O. Box 178
Alexandria, Virginia 22313-1501

OFFICE LOCATION:
City Hall, 301 King Street
Room 2600
Alexandria, Virginia 22314

Real estate assessments, property information, sales information, and forms are available online at: alexandriava.gov/realestate

CONTACT INFORMATION:
Phone: 703.746.4646 or 703.746.4180
email: realestate@alexandriava.gov

2013 REQUEST FOR REVIEW OF REAL ESTATE ASSESSMENT

(For ONE parcel ONLY.)

Map No.	Block	Lot

Account No.	Date

2012 ASSESSED VALUE		
Land	Building	Total

2013 ASSESSED VALUE		
Land	Building	Total

For Office Use Only

Abstract Code: _____

Neighborhood: _____

Account Manager: _____

Appeal #: _____

Authorization Required? Yes ❑ No ❑

2013 Written authorization submitted? Yes ❑ No ❑

Revised Assessment:

Land: _____

Building 1: _____

Building 2: _____

Total Building: _____

Total Assessment: _____

Name of Owner _____

Property Address _____

Mailing Address *(if different than property address)* _____

_____

I, (we), hereby apply for a review of assessment for the following reasons:

Please explain (use additional sheets if necessary): _____

_____

_____

and/or, the classification is inaccurate: _____

State your opinion of the Fair Market Value as of January 1, 2013. $ _____ ☐ Entered

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

_____ _____

Signature Owner / Agent *Signature Owner / Agent*

_____ _____

Print Name Owner / Agent *Print Name Owner / Agent*

Date: _____ E-mail address: _____

Telephone: (work) (____)_____ (home) (____)_____

Do you wish to have an appraiser:

Make a physical inspection of the property? □ yes □ no; OR

Contact you to discuss the current appraised value? □ yes □ no

I, (we), wish to have all correspondence related to this Review sent to: **(check only one box)**

☐ Property address ☐ Mailing address ☐ Other mailing address (provide below) ☐ E-mail address (provide below)

_____

_____

Appraiser's Notes:

Owner Contacted: Yes ☐ No ☐ Date: _____

Telephone Notes: _____

Field Inspection: Date: _____ Time: _____

Inspection Notes: _____

Appraiser Changes:

Property Characteristic Changes to RealWare: _____

Notification Instructions:

Letter Type: _____

Special Notification Instructions (send appeal form, neighborhood sales, etc.) _____

Special Letter Filepath: _____

Appraiser: _____ Date: _____

Sr. Appraiser / Division Chief: _____ Date: _____

Property Characteristic changes checked: Land _____ Bldg: _____

Director / Deputy Director (letter): _____ Date: _____

Administrative Use Only:

(1) RealWare Changes

☐ Land Abstract Override entered

☐ Improvement Market Override entered

☐ Correction type entered

Initials: _____ Date: _____

(2) REAVCS Data Entry

Tax Adjustment Number _____

Reason Code Entered _____

Initials: _____ Date: _____

(3) Notification

☐ Letter sent ☐ Study Group Sales enclosed

☐ Board of Equalization Appeal form enclosed

☐ Other – specify: _____

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

☐ Verified tax adjustment sent to Treasury

Initials: _____ Date: _____