



Account No.: _____

Tax Map Number: _____

Board of Equalization Application

Office of the Assessor of Real Estate

This form must be completed and filed with the necessary attachments and submitted to the Office of the Assessor of Real Estate (442 West Washington Street, Suffolk, VA 23434) by May 1, 2019 to be considered for review of the January 1, 2019 valuation. Electronic submissions are welcome, but must include all supporting documentation, and the original signed application must be submitted prior to or at the time of any board hearing. **A separate application and necessary attachments must be filed for each separately assessed parcel.**

An application will be considered complete only when...

- All "Property and Ownership Information—Recorded Ownership" is filled out
- Supporting evidence is provided for A, B or C under the "Basis of Review"
- The form is signed by an owner or authorized agent
(Anyone other than the recorded property owner must file a Suffolk Agent Authorization form)
- All information for the appropriate property type is provided as specified below.

RESIDENTIAL PROPERTY CHECKLIST

- _____ Application form complete
- _____ If not owner—Agent Authorization
- _____ Copy of any appraisal with an effective valuation date between January 1, 2018 and December 31, 2018
- _____ Copy of any real estate listing of the subject property between January 1, 2018 and December 31, 2018

COMMERCIAL PROPERTY CHECKLIST

- _____ Application form complete
- _____ If not owner—Agent Authorization form
- _____ Copy of any appraisal with an effective valuation date between January 1, 2016 and December 31, 2018
- _____ Copy of any real estate listing of the subject property between January 1, 2016 and December 31, 2018
- _____ 2015 Audited or Certified Income and Expense Statements
- _____ 2016 Audited or Certified Income and Expense Statements
- _____ 2017 Audited or Certified Income and Expense Statements
- _____ Rent Roll & Preliminary I&E Statement (Dec 2018)
- _____ Restaurants and convenience stores are required to submit gross sales for 2016, 2017 and 2018.

- **Reported income data is kept confidential in accordance with the Virginia Code 58.1-3294.**

Applicants must provide all information to be considered for review before the Board of Equalization.

APPLICATIONS MUST BE COMPLETE TO BE CONSIDERED

PROPERTY AND OWNER INFORMATION—RECORDED OWNERSHIP

Subject Property Address: _____

Proposed 2019-2020 Assessment: Land _____ Improvement _____ Total _____

Requested Assessment: Land _____ Improvement _____ Total _____

Name: _____

Mailing Address: _____

City, State & Zip: _____

Telephone Number(s) & Email: _____

_____ I hereby request a review of the subject property. This review may result in any of the following actions; a decrease in assessed value, no change in assessed value, or an increase in assessed value.

_____ I wish to appear before the Board of Equalization.

Account No.: _____

Tax Map Number: _____

BASIS OF REVIEW REQUEST FAIR MARKET VALUE, EQUALIZATION, ACCURACY OF DATA

Please check A, B or C and provide supporting evidence: You must select at least one and you may select more than one. Additional sheets may be attached. **SUPPORTING EVIDENCE IS REQUIRED FOR THE APPLICATION TO BE CONSIDERED COMPLETE.** Assessment information is available at <http://www.suffolkva.us/rea> and at the Office of the Assessor.

A _____ **The subject property is assessed at more, or at less than the fair market value for January 1.**

List the sales of comparable properties that support your assertion.

The following information must be provided if you checked A.

Acct# _____ Property Address _____ Sale Price: _____

Acct# _____ Property Address _____ Sale Price: _____

Acct# _____ Property Address _____ Sale Price: _____

B _____ **The subject property is not equitably assessed with comparable properties.**

List the assessments of comparable properties that support your assertion.

The following information must be provided if you checked B.

Acct# _____ Property Address _____ Total Value: _____

Acct# _____ Property Address _____ Total Value: _____

Acct# _____ Property Address _____ Total Value: _____

C _____ **The subject property was assessed on the basis of inaccurate property information.**

Describe the inaccuracy of the property information (example: incorrect square footage)

The following information must be provided if you checked C.

CERTIFICATION

I certify that the descriptions and statements contained in this application are to the best of my knowledge both true and correct.

Given under my hand this _____ day of _____, 20____.

Name of Owner/Agent (printed)

Signature of Owner/Agent