

instructions)

NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE OFFICE OF REAL PROPERTY TAX SERVICES

COMPLAINT ON REAL PROPERTY ASSESSMENT FOR 20

BEFORE THE BOARD OF	ASSESSMENT REVI	EW FOR							
		(city, tow	n village or county)						
PART ONE: GENERAL INFORMATION									
(General information and instructions for completing this form are contained in form RP-524-Ins)									
1. Name and telephone no.		2. Mailing Address of owner(s)							
Traine and telephone no.			2. Maining radiess of owner(s)						
									
Day no. ()									
т.		Email (optional)	Email (optional)						
3. Name, address and telep (if applicable, complete		ive of owner, if representative	is filing application.						
4. Property location									
Street Add	ress	Villag	Village (if any)						
City/Tov	/n	Co	County						
	Schoo	ol District							
5. Property identification (see tax bill or assessme	ent roll)							
Tax map number or se	ection/block/lot								
Type of property:	Residence	Farm	Vacant land						
	Commercial	Industrial	Other						
Description:									
6. Assessed value appearing	on the accessment rol	Ⅱ-							
Land \$									
-Διπα ψ	Ψ								

7. Property owner's estimate of market value of property as of valuation date (see

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PART TWO: INFORMATION NECESSARY TO DETERMINE VALUE OF PROPERTY

(If additional explanation or documentation is necessary, please attach)

Information to supp	ort the value of property claimed	i in Part One, it	em / (complete one or more):
1 Purchase price of	property:		\$
a. Date of purchase:			
b. Terms	Cash	Contract _	Other (explain)
c. Relationship between	seller and purchaser (parent-child,	in-laws, siblings	s, etc.):
d. Personal property, if	any, included in purchase price (fu	rniture, livestock	, etc.; attach list and
sales tax receipt):			
 Property has been 	recently offered for sale (attach co	ny of listing agre	ement if any):
	ong:		•
			\$
3. Property has been	recently appraised (attach copy):	When:	By Whom:
Purpose of appraisal:		_ Appraised v	value: \$
4 Description of any	y buildings or improvements locate	d on the property	including year of
construction and present co	-	a on the property	, merading year or
construction and present co			
5 Buildings have be	en recently remodeled, constructed	or additional im	provements made:
Cost \$			
Date Started:	Da	ite Completed:	
Complainant should submit	t construction cost details where av	ailable.	
6 Duomonty is in som	o muodusing (o.g. looged on mented)	aammanaial an i	ndustrial property and the
	e producing (e.g., leased or rented)		
	present detailed information about	tne property inch	ading rental income,
operating expenses, sales v	olume and income statements.		
7 Additional suppor	ting documentation (check if attack	ned)	

PART THREE: GROUNDS FOR COMPLAINT A. UNEQUAL ASSESSMENT (Complete items 1-4)

1.	The assessment is unequal for the following reason: (check a or b)								
The assessed value is at a higher percentage of value than the assessed value of other real property on the									
	а.	 a. assessment roll. The assessed value of real property improved by a one, two or three family residence is at a higher percentage of 							
		full (market) value than the assessed value of other residential property on the assessment roll or at a higher							
	b.	b. percentage of full (market) value than the assessed value of all real property on the assessment roll.							
_		he complainant believes this property should be assessed at % of full value based on one or more of the following							
2.	(che	check one or more):							
	a.								
		The latest residential assessment ratio established for the city, town or village in which the residential property is located. Enter latest residential assessment ratio only if property is improved by a one, two or three family							
	b.								
	c.	Statement of the assessor or other local official that property has been assessed at %.							
	d.								
3.	Valu	e of property from F	Part one #7			\$			
4.									
		1			Γ (Check one or more)				
The	assess	ment is excessive fo	or the following reaso		(Check one of more)	'			
1.			e exceeds the full val						
•	a.	_		1 1 7		\$			
	b.		1 1 7		o full value of (Part one #7				
	c.	•			ejection, if applicable.				
2.		•			ial of all or portion of a par	rtial exemption.			
	a.								
	b.					\$			
	c.					·			
	d.	•	•		ication to this complaint.	<u> </u>			
	u.				only in approved assessing	g unit which has adopted			
3.		transition assessments.)							
	a.	Transition assessn	nent			\$			
	b.	Transition assessn	nent claimed			\$			
TD1		. 1 616			(Check one or more)				
			r the following reason	` /					
1.			empt. (Specify exemp		organization)) llage, school district or spe	cial district in which it is			
2.		signated as being lo		of the city, town, vii	nage, school district of spec	cial district in which it is			
-		_		he assessment roll	by a person or body withou	it the authority to make the			
3.									
4.	Property cannot be identified from description or tax map number on the assessment roll.								
5.	Property is special franchise property, the assessment of which exceeds the final assessment thereof as determined by the Office of Real Property Tax Services. (Attach copy of certificate.)								
	tne	e Office of Real Proj	perty Tax Services. (A	Attach copy of certi	ncate.)				
			D. MISC	LASSIFICATIO	N (Check one)				
The	prope	rty is misclassified f				hich establish homestead and			
non		stead tax rates):		•					
	C1	ass designation on tl	he assessment roll:						
1.									
2.				between homestead	and non-homestead real p	roperty.			
Allocation of assessed value on assessment roll Claimed allocation									
Homestead \$ \$ Non –Homestead \$ \$									
INOI	ı –Hon	nesteau	Φ		Φ				

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PART FOUR: DESIGNATION OF REPRESENTATIVE TO MAKE COMPLAINT , as complainant (or officer thereof) hereby I, designate to act as my representative in any and all proceedings before the board of assessment review of the city/town/village/county of fo purposes of reviewing the assessment of my real property as it appears on the (year) tentative assessment roll of such assessing unit. Date Signature of owner (or officer thereof) PART FIVE: CERTIFICATION I certify that all statements made on this application are true and correct to be best of my knowledge and belief, and I understand that the making of any willful false statement of material fact herein will subject me to the provisions of the Penal Law relevant to the making and filing of false instruments. Signature of owner (or representative) Date PART SIX: STIPULATION The complainant (or complainant's representative) and assessor (or assessor designated by a majority of the board of assessors) whose signatures appear below stipulate that the following assessed value is to be applied to the above described property on the (year) assessment roll: Land \$ Total \$ (Check box if stipulation approves exemption indicated in Part Three, section B.2. or C.1.) Complainant or representative Assessor Date SPACE BELOW FOR USE OF BOARD OF ASSESSMENT REVIEW Disposition ☐ Excessive assessment ☐ Unequal assessment ☐ Unlawful assessment ☐ Misclassification ☐ Ratification of stipulated assessment ☐ No change in assessment **Vote on Complaint** ☐ All concur ☐ All concur except: _ □ against □ abstain \square absent Name □ against □ abstain \square absent Name **Decision by Board of Assessment Review Tentative assessment Claimed assessment** Total assessment Transition assessment (if any) ... \$_____ Exempt amount\$ Taxable assessment.....\$_____ Class designation and allocation of assessed value (if any): Homestead\$_____\$__\$_ Non-homestead\$ Date notification mailed to complainant _____