Under the provisions of the law, any person (includes taxing districts) aggrieved by any assessment and desiring to appeal, shall file a statement, in writing, to the Board of Assessment Appeals. Such statement shall designate the assessment appealed from and the address to which the Board shall mail notice of when and where to appear for a hearing. Please refer to the Appeal Procedures, Rules, and Regulations booklet for filing deadlines and information.

Please submit this appeal form to: Perry County Board of Assessment Appeals, County Veterans Memorial Building, 25 West Main Street, P. O. Box 37, New Bloomfield, PA 17068.

OWNER(S) NAME (as listed by deed) ______________________________________________________________

MAILING ADDRESS _____________________________________________________________________________

PROPERTY SUBJECT TO APPEAL ________________________________________________________________

Number Street

City/Borough/Township

TAX PARCEL NUMBER  _______________________________________ CONTROL NO. ___________________

Are you appealing Fair Market Value? __Yes  __No    Clean and Green Value? __Yes  __No     Other? _________

BUILDING AND/OR LAND USE _______________________________________________________________

DESCRIBE PROPERTY TYPE (Check one): ____ Residential     ____ Agricultural   ____ Vacant Land

_____ Commercial   ____ Industrial       ____ Minerals

LOT SIZE/ACREAGE __________________________

DATE PURCHASED ___________________________     PURCHASE PRICE __________________________

FAIR MARKET VALUE APPEALED _______________________________________

OWNER’S OPINION OF FAIR MARKET VALUE _________________________________________________

CERTIFIED APPRAISER’S OPINION OF FAIR MARKET VALUE _______________________________________

AMOUNT OF FIRE INSURANCE _____________________________

IF PROPERTY IS RENTED, STATE ANNUAL RENT _________________________________

MOBILE HOME INFORMATION:

YEAR _______   SIZE _____ x ______   MAKE _______________   PURCHASE PRICE _____________________

BASIS FOR APPEAL (State specific reasons and basis for appeal, including all factors which you believe will be helpful in determining Fair Market Value.):

____________________________________________________________________________________________

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LIST RECENT COMPARABLE SALES (Note: Please list only local comparable properties which have been sold recently; comparisons to your neighbor’s property, for example, which have not changed ownership recently, will not be considered.):

<table>
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<tr>
<th>SELLER(S)</th>
<th>ADDRESS</th>
<th>PARCEL NUMBER</th>
<th>SALE Price</th>
<th>Date</th>
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All notices of proceedings will be mailed to owner(s) of record and such other as identified below:

NAME ______________________________________________________________________________________________
ADDRESS ______________________________________________________________________________________________
____________________________________________________________________________________________

CERTIFICATE OF APPEAL

I/we hereby declare my/our intention to appeal from the assessed valuation of the property described above and do hereby verify that the statements made in this appeal are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pennsylvania C.S. Section 4904, relating to unsworn falsification to authorities.

SIGNED _______________________________________________________ DATE  ________________________________

_______________________________________________________ TELEPHONE (home) ____________________

_______________________________________________________ TELEPHONE (work) _____________________

Owner(s) of Record

ADDITIONAL INFORMATION:
____________________________________________________________________________________________
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Form PER210 (v.1.1)