



County of Gloucester
 Real Estate Assessment Dept.
 6489 Main Street
 Gloucester, Virginia 23061

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 Fax: 804-824-2446

Email: assessment@gloucesterva.info
 Website: <http://gloucesterva.info/Assessment>

ASSESSMENT REVIEW APPLICATION

(This is not a Board of Equalization (BOE) Application)

Submitted by:	E-Mail	Fax	Mail	In-Person
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All assessments are based on a January 1, 2020 effective valuation date.

**One of the following actions will result from this filing:
 No Change, Decreased Assessment, Increased Assessment, Neighboring Property Equalization**

INSTRUCTIONS: This form must be filled out completely and filed with the Assessment Dept.

- (1) An application form is required for each separate tax parcel.
- (2) Applicant must be legal owner or duly authorized agent with an attached letter of authorization.
- (3) Documentation supporting the applicant's opinion must be submitted with application.
- (4) Appeal of income producing properties must include a detailed income and expense report including rent roll for the current and one prior year.
- (5) The Real Estate Assessment staff are required to correct errors in property data, as well as document any unreported structures/improvements. This may cause an **increase or decrease** in the assessed value of the parcel.

Property Owner: _____

Subject Property Address: (House Number, Street, City, State, Zip)

Contact Information: (Phone and Email) _____

RPC Number (Parcel Number): _____

Owner's Opinion of the Property's Fair Market Value (Required): \$ _____

PROPERTY TYPE: (PLEASE CHECK ONE)

<input type="checkbox"/> Single Family	<input type="checkbox"/> 2-3 Family	<input type="checkbox"/> Multi-Family Conv
<input type="checkbox"/> Vacant Land	<input type="checkbox"/> Commercial/Industrial	<input type="checkbox"/> Rental

REASON FOR APPEAL: (PLEASE CHECK ANY THAT APPLY)

<input type="checkbox"/> Fair Market Value	<input type="checkbox"/> Factual Error	<input type="checkbox"/> Other
<input type="checkbox"/> Lack of Uniformity	<input type="checkbox"/> Clerical Error	<input type="checkbox"/>

REVIEW REQUESTED: (PLEASE CHECK ANY THAT APPLY)

<input type="checkbox"/> Desktop	<input type="checkbox"/> Drive By	<input type="checkbox"/> Exterior Inspection
<input type="checkbox"/> Interior Inspection	<input type="checkbox"/> Interior/Exterior Inspection	<input type="checkbox"/>

STATEMENT AND SUPPORTING DOCUMENTATION

INCOME-PRODUCING PROPERTY:

On a separate attachment, please provide a detailed rent roll and a detailed Income and Expense Statement for the current year and one prior year.

IF THE BASIS FOR THE REVIEW IS UNIFORMITY AND EQUITY: PLEASE COMPLETE

Property Address	Parcel Number	Use Code	Total Value
Property Address	Parcel Number	Use Code	Total Value
Property Address	Parcel Number	Use Code	Total Value

IF THE BASIS FOR THE REVIEW IS FAIR MARKET VALUE: PLEASE COMPLETE

Property Address	Parcel Number	Sale Price	Total Value
Property Address	Parcel Number	Sale Price	Total Value
Property Address	Parcel Number	Sale Price	Total Value

I REQUEST THAT THE ASSESSMENT BE ADJUSTED AS FOLLOWS: PLEASE COMPLETE

Property Address or RPC Number	Land	Improvement	Total Value

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

Owner/Agent Signature: _____ **Date:** _____