



OFFICE USE ONLY:	Tax Year _____
REID/Parcel	_____
Description	_____
Physical Address	_____

Informal Appeal Form

OWNER'S NAME _____

MAILING ADDRESS _____

CITY, STATE ZIP _____

APPEALED BY (if different from above) _____

In your opinion, what is the fair market value of this property as of January 1, 2019?

Bldg _____ Land _____ Total _____

Date property was purchased? _____ Purchase Price? _____

Year Built _____ Amount of Fire Insurance (replacement value) \$ _____

Was property inherited? Yes ___ or No ___ Was the property purchased from a family member? Yes ___ or No ___

Has an independent appraisal been made on this property? Yes ___ or No ___ If yes please attach a copy to this application.

If this property is for sale, what is the asking price? \$ _____. How long has it been for sale? _____

If a real estate broker is involved, attach a copy of the listing contract to this application.

What improvements have been made to this property since the last reappraisal? Actual cost? _____

State the reason why you think the fair market value determined by the Assessor's Office is incorrect as of the last county-wide reappraisal. _____

- If income producing property, you must include the three most current years income and expense information.
- Appellants, who do not hold an ownership interest in the subject property must file with this office a completed Assessor-approved, notarized Power-of-Attorney form signed by the property owner(s).

North Carolina General Statute 105-283, states the following basis for assessment:

All property, real and personal, shall as far as practicable be appraised or value at it true value in money. "True Value" shall be interpreted as meaning market value, that is, the price estimated in terms of money at which the property would exchange hands between a willing and financially able buyer and a willing seller, neither being under any compulsion to buy or sell and both having reasonable knowledge of all the uses to which the property is adapted and for which it is capable of being used.

Signature of owner _____

Date: _____ Daytime Phone Number: _____

Mail completed form to: Rutherford County Assessor's Office
125 W 3rd Street
Rutherfordton, NC 28139-2425

(Other side for Office use only)

This side Assessor's Office use only

INFORMAL HEARING

PARCEL ID# _____

PROPERTY OWNER:

PROPERTY LOCATION:

PHONE #: _____

PROPERTY CLASS _____

INTERVIEWED BY: _____

DATE: _____

NATURE OF COMPLAINT:

RECOMMENDED ACTION: (Circle One)

FC Field Check
FI Field Check/Interior Inspection
CL Office Change

CC Office Check
NC No Change W/Notice
NN Not Changed N/Notice

Notes:

ACTION TAKEN: (Circle One)

NC No Change
NN No Change/No Notice

VI Value Increased
VD Value Decreased

VALUE ADJUSTMENTS

Changed from: \$ _____

Changed to: \$ _____

Data Entry Completed by: _____

Date: _____