COUNTY of UNION

PENNSYLVANIA

BOARD OF ASSESSMENT

Assessment Appeal Application for Ag/Commercial Combo

Under the provision of law any person* aggrieved by any assessment desiring to appeal shall file a statement, in writing, with the Board of Assessment Appeals on or before September 1st. 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. NO APPEAL SHALL BE HEARD BY THE BOARD UNLESS APPELLANT SHALL FIRST HAVE FILED THE APPEAL AND REQUIRED DOCUMENTS ON OR BEFORE SEPTEMBER 1^{ST,} AS SET FORTH BY LAW along with cash, check or money order for \$100.00 per parcel. (*) includes taxing district

Make checks payable to "Union County Treasurer".

ALL QUESTIONS MUST BE ANSWERED TO QUALIFY FOR HEARING

RECORD OWNER (S) NAME:
MAILING ADDRESS:
PROPERTY SUBJECT OF APPEAL:
ASSESSORS TAX MAP IDENTIFICATION #:
ASSESSORS TAX MAP IDENTIFICATION #:
DATE PURCHASED / / PURCHASE PRICEAMOUNT OF FIRE INSURANCE
STATE REASONS FOR FILING THIS APPEAL:
CURRRENT USE OF THE PROPERTY:
TOTAL ACREAGE:
TOTAL ACRES OF WOODLAND:TOTAL ACRES OF WASTELAND:
1 RESIDENCE: NUMBER OF STORIESTOTAL ROOMSBEDROOMSFAMILY ROOM FULL BATHSHALF BATHSGARAGE (CARS)CARPORTFIREPLACE_CENTRAL AIR
2 RESIDENCE: NUMBER OF STORIESTOTAL ROOMSBEDROOMSFAMILY ROOM FULL BATHSHALF BATHSGARAGE (CARS)CARPORTFIREPLACE_CENTRAL AIR
OUTBUILDINGS:
SPECIAL CONDITIONS OF SALE:
HOW WAS PROPERTY ACQUIRED: PRIVATE SALEAUCTIONOPEN MARKETFAMILY INHERITEDOTHER
COMMERCIAL USE BUILDING: Year(s) Built_Use
Gross Sq. FtOwner OccupiedTenant Occupied
If Leased: 100% Gross Annual RentAttach Last 3 Years' Income & Expense Statements
CERTIFICATE OF APPEAL I / WE, AS OWNER(S) OF RECORD, HEREBY DECLARE MY/OUR INTENTION TO APPEAL FROM THE ASSESSED VALUATION OF THE PROPER DESCRIBED ABOVE AND DO HEREBY VERIFY THAT THE STATEMENTS MADE IN THIS APPEAL ARE TRUE AND CORRECT. I / WE UNDERSTAND TH FALSE STATEMENTS HEREIN ARE MADE SUBJECT TO THE PENALTIES OF 18 PA CS SECTION 4904, RELATING TO UNSWORN FALSIFICATION AUTHORITIES.
SIGNED: DATE:
PHONE #: (HOME)
OWNER (S) OF RECORD (DAY/OFFICE)
ALL NOTICE OF PROCEEDINGS WILL BE MAILED TO THE OWNER (S) OF RECORD AND SUCH OTHER AS IDENTIFIED BELOW:
NAME:
ADDRESS: