

2011 ROWAN COUNTY INFORMAL APPEAL FORM – COMPLETE IN ITS ENTIRETY

Date of Notice	Acreage	Location Address	Parcel ID

A - Market Value	B - Present-Use Value Deferment	C - Assessed (Taxable) Value

**Calculation of Assessed Value: A-Market Value minus B-Deferment equals C-Assessed (Taxable) Value
A value shown in the 'B' box is the amount of deferred value due to property qualifying for present-use program.**

If you wish to appeal the value of this property, please complete this informal appeal form in its entirety and return it to our office within fifteen (15) days from the date of this Notice. ***All appeals must be in writing – no verbal appeals will be accepted.*** This form and a complete copy of any appraisal report or document(s) supporting your opinion of value may be mailed to our office at 402 North Main Street, Ste. 201, Salisbury, NC 28144-4391 (see enclosed envelope) or faxed to: 704.642.2050. Additional forms may be obtained by visiting our website at www.rowancountync.gov - click on 'Informal Appeal Form.' ***Submit 1 appeal form per parcel.***

Residential Property

- If this is a residential dwelling (owner-occupied or rented) give the estimated year built _____.
- Your estimate of total heated living area of dwelling (1st floor & upper level only) _____sf.
- Is dwelling a:
 - ____ one-story ____ one-story & basement ____ 1.5 story ____ 1.5 story & basement ____ two-story
 - ____ two-story & basement ____ condominium ____ patio Home ____ tri Level ____ split Foyer ____ townhome
 - ____ modular ____ doublewide manufactured home ____ singlewide manufactured home ____ other _____
- Does the dwelling have a bonus room over garage? ____yes ____no Accessible from inside the house? ____yes ____no
- What is the exterior wall covering of the dwelling?
 - ____ Brick Veneer ____ Solid Brick ____ Vinyl Siding ____ Aluminum ____ Asbestos ____ Masonite
 - ____ Frame/Wood ____ Log ____ Stucco ____ Other _____
- What are the number of bathrooms in the dwelling?
 - First Floor : ____# full bathrooms ____ # half bathrooms (no tub or shower)
 - Upper Floor: ____# full bathrooms ____# half bathrooms
- Does dwelling have a basement? ____yes ____no If yes, please describe:
 - Total Square Feet in Basement - Choose: ____ Same as 1st Floor OR _____ Total Square Feet
 - Of basement total square feet how much is: finished _____sf and unfinished _____sf
- Heat/Air System:
 - ____ Forced Air Fueled by: ____ oil ____ gas ____ Heat pump ____ Other
 - ____ Floor furnace ____ Wall Heater ____ Space Heater ____ Baseboard Heat ____ No Heat
 - ____ Central Air Only ____ Window Unit
- Describe the car storage by stating the number of cars it holds and whether or not it is attached or detached:
 - I have a ____-Car Garage ____ Attached ____ Detached (Ex: I have a 2-Car garage)
 - I have a ____-Car Carport ____ Attached ____ Detached

Commercial Property – For Properties Rented or Leased to Others or Income-Producing:

- If this is a residential dwelling, monthly rent is \$ _____. Utilities paid by ____ tenant ____ owner
- If this is a commercial building that you lease/rent, please provide documentation to support the following:
 - A. Monthly Rent B. Annual Expenses C. Term of Lease
- For income-producing properties, submit copies of data to show income/expenses for prior three (3) years.

Opinion of Value and Basis for Appeal:

Value Under Appeal: \$ _____ Property Owner's Opinion of Value \$ _____
 What is the basis of your opinion? (Check appropriate statement)
 _____ Recent appraisal report (attach complete copy)
 _____ Recent asking price (attach complete copy of listing form)
 _____ Recent purchase (attach complete copy of offer to purchase and closing statement)
 _____ Comparison of similar properties – give property address and/or parcel number on back of form
 _____ Personal judgment – explain on back of form.
 _____ Other – explain on back of form.

A REVIEW OF YOUR VALUE WILL RESULT IN ONE OF THE FOLLOWING: VALUE LEFT UNCHANGED, REDUCED OR INCREASED

Owner's Signature: _____ Date: _____

