

COMMERCIAL / INDUSTRIAL

Form DVR-06200

PETITION OF APPEAL
City of Dover Board of Assessment Appeals

Appeal Number

Empty box for Appeal Number

Property Class: [] Commercial [] Land

[] Other

Filed
Checked
Notified
Heard

Four horizontal lines for tracking status

NAME OF PETITIONER

MAILING ADDRESS

DAYTIME TELEPHONE #

PARCEL ID NUMBER (from Property Tax Bill) PROPERTY LOCATION

Name, telephone #, fax # and address of person or attorney to be notified of hearing and judgement if different than above:

Three horizontal lines for contact information

SECTION I CHANGE OF ASSESSMENT

ASSESSMENT YEAR 2020

CURRENT ASSESSMENT BREAKDOWN (if known)

REQUESTED ASSESSMENT

Land \$
Improvement \$
Total \$

\$
\$
\$

REASON FOR APPEAL:

Two horizontal lines for reason for appeal

SECTION II COMPARABLE SALES (See Instruction 6B)

Table with 3 columns: Parcel ID, Property Location, Sale Price / Sale Date. Includes 5 rows of empty lines for data entry.

WHEREFORE, Petitioner seeks judgement reducing/increasing (circle one) the said assessment to the correct assessable value of the said property.

Date

Petitioner or Attorney for Petitioner