

## 2025 Board of Equalization & Review Appeal Form

BEFORE YOU FILL OUT THIS FORM... Did you know that you can file an appeal online? Go to: www.alamance-nc.com/reval.

If you still wish to submit a paper form, please mail it to:

Tax Appraisal 124 W. Elm St. Graham, NC 27253

All information requested on this form must be completed. **Each property requires a separate form.** Forms which do not identify the property appealed (by address or parcel ID), or are not signed and dated, will not be accepted.

Persons who do not hold an ownership interest in the subject property, unless a relative of the owner as defined in NCGS 105-277.2(5a), must file written power-of-attorney signed by the owner.

We cannot take independent appraisals into consideration unless the **full** appraisal report is submitted.

Note to commercial property owners: If this is income producing property you must provide the three most current years of income and expense information before this request will be processed.

Parcel ID Number (shown on tax notice)	Reason for appealing (please select <u>one</u> ):
	<ul><li>O Market Value (as of Jan 1, 2023)</li><li>O Present Use Value (if enrolled in farm program)</li></ul>
Appellant Name	O Exemption/Exclusion
	If you would like to appeal more than one type of value you will need to submit multiple appeals.
Appellant relation to the property owner	
O "I am the property owner."	Noticed Value
O "I am an authorized agent."	\$
Documentation of Power of Attorney will be required at the end of this form.	
Owner or representative phone number	What is your opinion of the property's fair market value as of January 1, 2023?
	\$
Owner or representative email address	The appeal is based on (select one or more):
	O Comparable sale
Is the property you are appealing a residence or a	O Appraisal
business?	O Incorrect square footage or property data
	O Recent construction
O Business (Industrial and Commercial) O Residence (House or Vacant Land)	O Recent purchase of property
O Farm	O Other

Please list the address of any comparable properties.	Basement
	O Yes Total heated square footage
	O No
	Main structure year built
	Wall Structure year built
Number of Bedrooms	Year of last renovation (if applicable)
	, ,
Number of Bathrooms	Structure Occupant
	Rent/year
	O Owner
Number of Half-Bathrooms	O Tenant Expenses/year
	Additional comments to support the appeal
Central Air	
O Yes	
O No	
Fireplace Type	
O None	
O Wood-burning	Do you intend to appeal an additional parcel or
O Other	parcels?
Total heated square footage of building	O "No, I'm appealing just this one parcel."
Total heated square footage of building	O "Yes, I will be submitting multiple appeals and
	agree to submit each appeal separately."
Please attach any documentation or evidence that we sho	uld consider.
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If you are not the owner of this property, please attach doc	cumentation of your power of attorney.
"Under penalty prescribed by law, I hereby affirm to the bes	st of my knowledge and belief all information submitted on
this form, including any accompanying statements and other	er information is true and complete. <b>I understand that</b>
review of this property will result in the value: (1) going $oldsymbol{u}_l$	
that review of my property may affect the valuation of neig	
paid by January 5th, 2026 to avoid penalties and interes	t. An open or existing appeal does not extend the
deadline to which payments become due."	
SIGNATURE	DATE