

Appeal Number: RES-

RESIDENTIAL PETITION FOR TAX APPEAL  
CITY OF DOVER BOARD OF ASSESSMENT APPEALS

Property Class: ☐ Residential  
☐ Land

Filed \_\_\_\_\_  
Checked \_\_\_\_\_  
Notified \_\_\_\_\_  
Heard \_\_\_\_\_  
Scanned \_\_\_\_\_

NAME OF PETITIONER \_\_\_\_\_

PROPERTY LOCATION \_\_\_\_\_

PARCEL ID NUMBER \_\_\_\_\_

MAILINGADDRESS  
\_\_\_\_\_  
\_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

SECTION I ASSESSMENT INFORMATION

ASSESSMENT YEAR: 2015

CURRENT ASSESSMENT BREAKDOWN (if known)

REQUESTED ASSESSMENT

Land \$ \_\_\_\_\_

\$ \_\_\_\_\_

Improvement\$ \_\_\_\_\_

\$ \_\_\_\_\_

Total \$ \_\_\_\_\_

\$ \_\_\_\_\_

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BASIS FOR APPEAL:

- A. Over valuation of property as associated with other properties in neighborhood:
- B. Inaccurate property description:
- C. Condition and other amenities:
- D. Other:

Information prepared by:

Residential Assessment Technician \_\_\_\_\_ Date \_\_\_\_\_

CERTIFICATION OF SERVICE

On \_\_\_\_\_, 20\_\_\_\_ I, the undersigned, served upon the City Assessor and the City of Dover or upon the taxpayer, personally or by regular mail or certified mail, a copy this appeal. I certify that the foregoing statement made by me is true, I am aware that if the foregoing statement is willfully false, I am subject to punishment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Recommendation to Board of Assessment Appeals

Recommendation to approve/deny appeal request. Reason: \_\_\_\_\_

City Assessor, Cheryl A. Bundeck AAS \_\_\_\_\_ Date \_\_\_\_\_