

LEHIGH COUNTY APARTMENT ASSESSMENT APPEAL

Under the provisions 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 **AUGUST 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 AUGUST 1ST AS SET FORTH BY LAW.** (*) includes taxing districts.

RECORD OWNER(S) NAME: _____

MAILING ADDRESS: _____

PROPERTY SUBJECT OF APPEAL: _____

PIN: _____ Number Street City/Boro/Township
PAR: _____ TILE: _____

ASSESSMENT APPEALED _____ OPINION OF VALUE OF THIS PROPERTY _____

DATE PURCHASED _____ PURCHASE PRICE _____ AMOUNT OF FIRE INSURANCE _____

STATE REASONS FOR FILING THIS APPEAL: _____

UNIT INFORMATION

PLEASE INDICATE CURRENT RANGES OF RENT FOR ALL UNIT TYPES- (EFFICIENCY, 1-BEDROOM, 2-BEDROOM, ETC.)

TYPE OF UNIT	NUMBER	UNFURNISHED MONTHLY RENT	
		FROM \$	TO \$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GARAGE/CARPORT/OPEN PARKING SPACES \$ **EACH PER MONTH**

If similar units have varying rents depending on floor level, directional exposure or furnished, list the dollar amount or rent variation: _____

MORTGAGE INFORMATION

Total Amount Financed 1st Loan 2nd Loan 3rd Loan

Rate of Financing _____

Term of the Loan _____

ATTACH LAST 3 YEARS INCOME & EXPENSE STATEMENTS OR COMPLETE THE ATTACHED INCOME & EXPENSE FORM.

CERTIFICATE OF APPEAL

I/we hereby declare my/our intention to appeal from the assessed valuation of the property described above and do hereby verify that the statements made in this appeal are true and correct. I/we understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities.

SIGNED: _____ DATE: _____

_____ PHONE NO.:(HOME) _____

OWNER(S) OF RECORD (DAY/OFFICE) _____

ALL NOTICES OF PROCEEDINGS WILL BE MAILED TO OWNER(S) OF RECORD AND SUCH OTHER AS IDENTIFIED BELOW: NAME: _____

ADDRESS: _____

GROSS ANNUAL INCOMES FOR 3 PRIOR YEARS

		<u>20</u>	<u>20</u>	<u>20</u>	
Projected income 100% occupied, include value of rent-free units		\$ _____	\$ _____	\$ _____	
Actual income received	\$ _____	\$ _____	\$ _____	\$ _____	
Vacancy	\$ _____	\$ _____	\$ _____	\$ _____	
Actual other income,	\$ _____	\$ _____	\$ _____	\$ _____	
List by type:	\$ _____	\$ _____	\$ _____	\$ _____	
	\$ _____	\$ _____	\$ _____	\$ _____	
	\$ _____	\$ _____	\$ _____	\$ _____	
<u>TOTAL ACTUAL INCOME RCVD.</u>	\$ _____	\$ _____	\$ _____	\$ _____	

GROSS ANNUAL EXPENSES FOR 3 PRIOR YEARS

GROSS ANNUAL EXPENSES		<u>20</u>	<u>20</u>	<u>20</u>	ITEMS INCLUDED IN RENT
	Real Estate Taxes	\$ _____	\$ _____	\$ _____	() Heating
FIXED	Insurance	_____	_____	_____	() Air Cond.
EXPENSES	Land Rent	_____	_____	_____	() Electricity
	Other	_____	_____	_____	() TV Cable
		_____	_____	_____	() Water
		_____	_____	_____	() Carpet
O	Electricity	\$ _____	\$ _____	\$ _____	() Drapes
P	Telephone	_____	_____	_____	() Range
E	Gas	_____	_____	_____	() Refrigerator
R	Water & Sewer	_____	_____	_____	() Dishwasher
A	Trash Removal	_____	_____	_____	() Garbage
T	Heating	_____	_____	_____	() Disposal
I	Manager's Salary	_____	_____	_____	() Parking
O	Fees	_____	_____	_____	() Pool
N	Legal/Acctg.	_____	_____	_____	() Recreational
	Payroll Taxes	_____	_____	_____	() Facility
E	Group Insurance	_____	_____	_____	() OTHER:
X	Advertising	_____	_____	_____	() _____
P	Wages/Salary	_____	_____	_____	() _____
E	Supplies	_____	_____	_____	() _____
N	Maint./Repair	_____	_____	_____	() _____
S	Replacement Reserve	_____	_____	_____	() Furniture
E	Other	_____	_____	_____	# of Furnished
S		_____	_____	_____	Units: _____
		_____	_____	_____	Furniture in Units
		_____	_____	_____	Owned By:
TOTAL EXPENSES	\$ _____	\$ _____	\$ _____	\$ _____	() Bldg. Owner
					() Rental Co.
					() Other

PLEASE USE REVERSE SIDE FOR ANY OTHER REMARKS RELATIVE TO THE PROPERTY