

# ASSESSOR REVIEW APPLICATION

Judy Ballard, Assessor  
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DATE: \_\_\_\_\_ TAX YEAR: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

TOWNSHIP: \_\_\_\_\_

I request a review of the following parcel number(s): \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_

REASON FOR REQUEST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any appellants who file an assessor's review understand that any findings and/or information gathered by the assessor's office may increase, decrease, or have no effect on the current value of the appealed property.

SIGNATURE: \_\_\_\_\_