

Application for Appeal of Real Property Assessment

**Dinwiddie Circuit Court
14008 Boydton Plank Road
P. O. Drawer 63
Dinwiddie, Virginia 23841
Phone: 804-469-4540**

FOR CLERK'S OFFICE USE ONLY
CIVIL CASE FILE NUMBER: _____

DATE TO BE SET: _____

INSTRUCTIONS FOR FILING

Note: The Clerk's Office is prohibited by law from giving any legal advice. This appeal is an action before the court and you are strongly encouraged to seek legal advice and counsel before proceeding to ensure your rights are fully represented.

1. Fill out and sign an application for each tax parcel being appealed. One case will include all tax parcels being appealed.
2. Submit application and pay filing fees to the Circuit Court Clerk's Office. Each landowner will pay one filing fee regardless of the number of tax parcels being appealed. (We accept applications in person or by mail)
 - Filing fees are based on the increase from the previous assessment and then total all tax parcels being appealed
 - **Filing Fees:** \$0 – 50,000 = \$84; \$50,001 – 100,000 = \$144; \$100,001+ = \$204.00
3. You will be given a date to show up to set your case for a hearing. You will be given the next docket call day on the calendar. The court's docket call are the third Tuesday on every odd number month (5/19/09, 7/21/09, 9/15/09, 11/17/09)
4. On the hearing date given to you on docket call you will present your case to the Judge for each tax parcel being appealed. Pursuant to Code section 58.1-3984, the burden of proof shall be upon the taxpayer to show that property in question is valued at more than its fair market value or that the assessment is not uniform in its application, or that the assessment is otherwise invalid or illegal.

PROPERTY INFORMATION:

AMOUNT OF INCREASE FROM PREVIOUS ASSESSMENT: \$	TAX MAP REFERENCE NUMBER MAP REFERENCE NUMBER CAN BE FOUND ON UPPER RIGHT CORNER OF 2009 NOTICE OF ASSESSMENT CHANGE
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Property Street Address:		
Property Location:	Property Zip Code:	
Building Name (if any):		
Name of owner (s) on January 1, 2009:		
2009 Assessment Notice Values, Land:	Building:	Total:

BASIS FOR APPEAL (YOU MUST SELECT AT LEAST ONE):

<input type="checkbox"/>	FAIR MARKET VALUE: This property is assessed greater or less than its Fair Market Value.
<input type="checkbox"/>	LACK OF UNIFORMITY: This property assessment is out of line generally with similar properties.

OWNER/APPLICANT INFORMATION:

Please indicate as described below. I believe the proper reassessment of this property on January 1, 2009 should be:		
Land:	Building:	Total:
I hereby certify that the facts contained herein and attached hereto are true, accurate, and correct, to the best of my knowledge and belief.		
Given under my hand this _____ day of _____, 2009		
Signature of Applicant/Owner: _____		
Print name of Applicant/Owner (if different from above): _____		
Phone: Work (_____) _____ Home (_____) _____ E-Mail _____		
Applicant/Owner Mailing Address (if different from property address): _____		
CHECK ONE: <input type="checkbox"/> I AM THE OWNER OF RECORD <input type="checkbox"/> I AM NOT THE OWNER OF RECORD		
Relation to property owner: (Attorney): _____		