

**2023**  
**WATAUGA COUNTY BOARD OF EQUALIZATION AND REVIEW**  
**APPLICATION FOR EQUALIZATION HEARING**

Parcel Number: \_\_\_\_\_ Acreage: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: \_\_\_\_\_ Email: \_\_\_\_\_

Assessed Value: Land \$ \_\_\_\_\_ Building: \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Applicant's complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Opinion of Market Value: Land \$ \_\_\_\_\_ Building \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Has the property been appraised, listed for sale, or purchased within the last two years? **If yes,**

Purpose for appraisal: \_\_\_\_\_ List Price: \_\_\_\_\_ Purchase Price \_\_\_\_\_

Date of appraisal: \_\_\_\_\_ Listing Period: \_\_\_\_\_ Date of Purchase \_\_\_\_\_

Appraised value: \_\_\_\_\_ Name of Broker/Agent: \_\_\_\_\_

Please attach copies of Appraisal.

Please Check One:

\_\_\_\_\_ The applicant (or one representing) will be attending a scheduled hearing.

\_\_\_\_\_ The applicant will not be attending a scheduled hearing, but wishes his appeal to be heard with Watauga County representing him.

The information I have supplied above is true to the best of my knowledge and belief.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address \_\_\_\_\_

**Fair Market Value:** The price which a property will bring when it is offered for sale by one who desires, but is not obliged, to sell it, and is bought by one who is under no necessity of having it.

**Please fill out a separate application for each property appealed. Attach any supporting documentation such as photos, independent appraisals, etc.** This will assist the property owner in representing their case, and the Board of Equalization and Review in making a decision.

**All forms must be in the Tax Office no later than April, 15.**