



## HENDERSON COUNTY BOARD OF EQUALIZATION & REVIEW

C/O Henderson County Assessor  
200 North Grove Street, Suite 102  
Hendersonville, NC 28792-5027  
Phone: (828) 697-4870  
[www.hendersoncountync.gov/tax](http://www.hendersoncountync.gov/tax)  
[taxdept@hendersoncountync.gov](mailto:taxdept@hendersoncountync.gov)

### APPEAL TO THE BOARD OF EQUALIZATION & REVIEW

#### INSTRUCTIONS:

- It's important that you fully complete all sections of this form.
- Information to support your opinion of value is essential. At the time you file your Appeal, please attach copies of invoices, appraisals or other information you believe to be pertinent in supporting your opinion of value.
- Once this Appeal is received, the Assessor's Appraisal staff will evaluate the value of your property and determine if an adjustment is warranted. As part of this evaluation, we may request physical inspection of the property.
- The clerk to the Board of Equalization & Review will contact you to arrange your hearing date with the board.

Please check all that apply regarding your appeal:

**Real Property:** Single Family Residence Vacant Land Commercial/Industrial Present Use Value

**Personal Property:** Utility Trailer Mobile Home Watercraft Aircraft Unregistered Motor Vehicle RV/Travel Trailer

Business Personal Property Tax Relief/Exemption

Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address City State Zip

Abstract/Bill Number: \_\_\_\_\_ Tax Year: \_\_\_\_\_ Property Description (VIN/TAG/HULL/TAIL): \_\_\_\_\_

County's Appraised Value: \_\_\_\_\_ **Owner's Opinion of Value:** \_\_\_\_\_

Owner's Opinion of Value is based on the following Facts:

- **Information to support your opinion of value is essential. At the time you file your Appeal, please attach copies of invoices, appraisals or other information you believe to be pertinent in supporting your opinion of value.**

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### CLERK'S USE ONLY

Abstract Number: \_\_\_\_\_ Tax Year: \_\_\_\_\_ Year For: \_\_\_\_\_

Date of Value/Decision Notice: \_\_\_\_\_ Date Appeal Received: \_\_\_\_\_ Timely Appeal:  Yes  No