

# #3

## REAL ESTATE MARKET VALUE APPEAL FOR TAX YEAR 2014

**FILING DEADLINE:** No later than the first Monday of October or 30 days from the date of the assessment notice.

DO NOT FAX THIS APPLICATION TO OUR OFFICE.  
USE A SEPARATE FORM FOR EACH ACCOUNT APPEALED

Property Address Appealed:

OPA Account Number:

Owner(s) Name: \_\_\_\_\_ Telephone (daytime): \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

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

### SELECT ONE OPTION

I request an oral hearing. I will attend a public hearing before the Board. If I do not appear, my appeal will be dismissed.

I request a non-oral hearing. I will not attend a public hearing before the Board (attach documentation to support your appeal).

I believe that the market value of this property is \$\_\_\_\_\_. I base my opinion on the following reason(s).

Overvaluation     Non-Uniformity     Common Level Ratio     Other

Through my signature below, I affirm that I am the owner or the appointed representative of the owner and that all of the information supplied is true and accurate to the best of my knowledge.

\_\_\_\_\_  
*Signature of Owner or Representative*

\_\_\_\_\_  
*Date*

As appointed representative for the owner of the property described above, I affirm that:

(1) a signed power of attorney is attached to this form; and (2) I possess a current, valid business privilege tax number issued by the City of Philadelphia.

\_\_\_\_\_  
*Representative's Name (Please Print)*

\_\_\_\_\_  
*Daytime Telephone Number*

\_\_\_\_\_  
*Company/Firm*

\_\_\_\_\_  
*E-mail Address*

\_\_\_\_\_  
*Mailing Address*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

\_\_\_\_\_  
*Business Privilege Tax Number*

**NOTE:** YOU WILL BE NOTIFIED IN WRITING OF THE HEARING DATE AT WHICH TIME YOU MAY APPEAR TO PRESENT EVIDENCE TO SUPPORT YOUR OPINION OF VALUE. YOU MAY SUBMIT WITH THIS APPLICATION ANY ADDITIONAL MATERIAL TO SUPPORT YOUR APPEAL.

PLEASE RETURN THIS APPLICATION TO OUR NEW OFFICE:

**BOARD OF REVISION OF TAXES  
CURTIS CENTER, 3<sup>RD</sup> FLOOR  
601 WALNUT STREET / SUITE 325 EAST  
PHILADELPHIA, PA 19106**

**INCOME PRODUCING PROPERTIES:** Complete the income and expense statement on the reverse side of this form. You may also attach your own statements.

### FOR OFFICE USE ONLY

Date Received

## PROPERTY CHARACTERISTICS

### For Income Producing Properties ONLY

**Property Use:**

Single Family (one dwelling unit)

Number of Bedrooms \_\_\_\_\_

Number of Bathrooms \_\_\_\_\_

Full \_\_\_\_\_ Half \_\_\_\_\_

Multi-Family (two or more apartments)

Number of 1 Bedrooms \_\_\_\_\_

Number of 2 Bedrooms \_\_\_\_\_

Number of 3 Bedrooms \_\_\_\_\_

Number of 4 Bedrooms \_\_\_\_\_

Office Space or Store

Square feet of Office \_\_\_\_\_

Square feet of Store \_\_\_\_\_

Wireless Communication Site or Billboard(s)

Other \_\_\_\_\_

**Vacancies:**

Are any of the units vacant?  Yes  No

If yes, how many units? \_\_\_\_\_

If Office or Store, how many square feet? \_\_\_\_\_

Approximate Building Size in Square Feet \_\_\_\_\_  
(Based on outside perimeter measurement multiplied by number of stories)

Land Area in Square Feet \_\_\_\_\_

Number of Stories \_\_\_\_\_  
(Use .5 for half stories)

Is this a Split Level Dwelling?

Yes  No

Approximate Age of Building: \_\_\_\_\_ Years

Central Air Conditioning?

Yes  No

Exterior Condition (check one)

New Construction (built in last 5 years)

New Rehabilitated

Above Average

Average

Below Average

Vacant (habitable but empty)

Sealed

Structurally Compromised (unsafe to enter premises)

Garage and Off-Street Parking:

Attached Garage (shares part of any side of the house)

Detached Garage (entirely separate from house)

Surface Parking \_\_\_\_\_ Number of spaces

## PROPERTY CHARACTERISTICS

**Note: Real Estate Taxes, Income Taxes, Depreciation, Mortgage payments, Officer's salaries and business expense should not be included below.**

INCOME	2011	2012	2013																					
Annual Rentals (Number of Units: _____)				<b>MORTGAGE: AMOUNT \$</b> <b>DATE</b> <b>RATE</b> % <b>APPRAISAL VALUE \$</b>																				
Parking & Reimbursements																								
<b>EXPENSES</b>				<b>CAPITALIZATION RATE:</b> %																				
Water & Sewer Rents				<b>ADDITIONAL EXPENSES:</b>  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">TYPE EXPENSE</th> <th style="width: 20%;">AMOUNT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	TYPE EXPENSE	AMOUNT																		
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Utilities & Heating Cost																								
Insurance - Yearly Premium																								
Trash/Snow Removal/Cleaning																								
Management Fees																								
Professional Fees																								
Repairs & Maintenance																								
<b>TOTAL EXPENSES</b> (Do not include real estate tax)																								
<b>NET INCOME TO PROPERTY</b>																								