

**ASSESSMENT REVIEW FORM**

**Town of Newton**  
(must use 1 form per property)

Owner's Name: \_\_\_\_\_ Block: \_\_\_\_\_  
Property Address: \_\_\_\_\_ Lot: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Qual: \_\_\_\_\_  
Cell / Alt. Phone: \_\_\_\_\_ Date: \_\_\_\_\_

*In order to have your assessment reviewed by the Tax Assessor, please supply the following data concerning your property. Assessment reviews are conducted from Oct 15<sup>th</sup> to Dec 15<sup>th</sup>, with any changes being made prior to the filing of the Tax Book at the end of the year. You will be notified of the results by mail via the annual postcard, or you can contact the office after Jan 1<sup>st</sup>. If you are not satisfied, you should pursue the appropriate venue for appeal by April 1<sup>st</sup> of the tax year in question (must file with County Tax Board if the assessment is under \$1,000,000, or State Tax Court for anything else). A copy of your PROPERTY RECORD CARD can be obtained to assist in your review.*

**(note: use additional sheets to supplement any of your answers to these questions, or provide attachments as necessary)**

1. **If needed, can we call to schedule an appt. for an interior inspection?** Yes  No

**SUBJECT SALE / LISTING: Please attach Closing Statement / Contract or Listing Agreement**

2. **Deed (or List) Date:** \_\_\_\_\_ 3. **Contract Date (if sold):** \_\_\_\_\_

4. **Last List Price:** \_\_\_\_\_ 5. **Purchase Price:** \_\_\_\_\_

6. **Mortgage Amt:** \_\_\_\_\_ 7. **Was this a Short Sale:** \_\_\_\_\_

8. **Length of time this property was listed on the open market (if known):** \_\_\_\_\_

9. **Any relationship between buyer & seller:** \_\_\_\_\_

10. **Any unusual "conditions of sale" (describe):** \_\_\_\_\_

**Nature of perceived assessment inequity > Based on errors on the PRC and local comparisons**

11. **Did you review your property record card** Yes  No

12. **Are there known or suspected errors on Property Record Card:** Yes  No

**PLEASE EXPLAIN:** \_\_\_\_\_  
\_\_\_\_\_

13. **Comparison of Assmt > out of line with similar properties in the area:** Yes  No

**PLEASE EXPLAIN:** \_\_\_\_\_  
\_\_\_\_\_

**Market Value out of line > Supplemental data suggests need for assmt change**

14. **Appraisal done for financing:** Yes  No  **Value:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Appraisal for tax appeal:** Yes  No  **Value:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Appraisal done by Realtor:** Yes  No  **Value:** \_\_\_\_\_ **Date:** \_\_\_\_\_

15. **Review conducted of recent sales transactions for similar property:** Yes  No

**Market Data:** Please provide as much information as possible for the comparable sales you rely upon

	Block	Lot	Qual	Property Address	Sale Date	Sale Price	Bldg SF	Style
a)								
b)								
c)								
d)								
e)								

16. Provide any other information you deem relevant and want considered in the valuation of your property. Include copies of appraisals, property surveys (especially if they depict any easements), sales contracts, closing statements, home inspections reports, photos, etc. It is in your best interest to provide as much factual "Property Specific" information as possible.

**Are you attaching any info:** Yes  No  **Describe:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_