

# Review of Supplement or Abatement Application

## Office of the Assessor of Real Estate

Every property owner or lessee has a right to appeal any real estate assessment thereof to the Assessor. In order to request the review of a change in assessment due to a supplement or an abatement, this form must be completed and filed with all necessary attachments and documentation you wish to be considered to the Office of the Assessor of Real Estate: 1 Franklin St., Suite 602, Hampton, VA 23669. **The deadline to file this review application is 30 days from the date of the notice.** Applications filed after 30 days from the notice date **will not** be accepted. **Faxed or electronic applications are not accepted. Additional materials may not be added to a previously submitted application without resubmission of the entire application (to include previously filed and additional materials) by the stated deadline. A separate application and necessary attachments must be filed for each assessed parcel.**

This form must be completed by or on behalf of the Owner of Record. For this purpose the "Owner of Record" is the current legal title holder of the Property, as identified in the records of the Office of the Assessor of Real Estate for the City of Hampton and/or the Office of the Clerk of the Circuit Court of the City of Hampton, Virginia. When an agent is representing the owner of record, the Owner of record must submit a current power of attorney form (available from the Office of the Assessor) or a current letter of authorization, in substantially the same form, with the appeal application authorizing the agent to represent the owner. The power of attorney form or letter of authorization must apply for the current calendar year. Signatures must be original and notarized.

**Faxed or electronic powers of attorney and letters of authorization are not accepted.**

**In order for a complete review to be conducted, please provide...**

- "Property and Owner Information – Recorded Ownership" is filled out, including the requested assessment.
- Supporting evidence is provided for A, B or C under the "Basis of Review," including documentation of any applicable assessment methodologies.
- The form signed by the owner of record or authorized agent (pursuant to a current power of attorney or letter of authorization)
- All information for the appropriate property type as specified below:

**RESIDENTIAL PROPERTY CHECKLIST**

- Application form complete
- If not owner – Power of Attorney form
- Copy of any appraisal with an effective valuation date after January 1, 2019
- Copy of any real estate listing of the subject property after January 1, 2019

**COMMERCIAL PROPERTY CHECKLIST**

- Application form complete
- If not owner – Power of Attorney form
- Copy of any appraisal with an effective valuation date after January 1, 2016
- Copy of any real estate listing of the subject property after January 1, 2016
- 2016 Audited or Certified Income and Expenses Statements \*
- 2017 Audited or Certified Income and Expenses Statements \*
- 2018 Audited or Certified Income and Expenses Statements \*
- Rent Roll as of December 31, 2018\*
- Restaurants and convenience stores are requested to submit gross sales for 2016, 2017 and 2018\*

\* Reported income & expense data is kept confidential.  
(Code of Virginia §58.1-3294)

**PROPERTY AND OWNER INFORMATION – RECORDED OWNERSHIP**

Subject Property Address: \_\_\_\_\_

**Current Assessment:** Land \_\_\_\_\_ Improvement \_\_\_\_\_ Total \_\_\_\_\_

**Requested Assessment:** Land \_\_\_\_\_ Improvement \_\_\_\_\_ Total \_\_\_\_\_

Owner of Record: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Telephone Number(s) & E-mail: \_\_\_\_\_

**BASIS OF REVIEW REQUEST- FAIR MARKET VALUE, EQUALIZATION, ACCURACY OF DATA**

Please check A, B or C and provide supporting evidence: You must select at least one and you may select more than one. Additional sheets may be attached. **DOCUMENTATION OF APPLICABLE ASSESSMENT METHODOLOGIES MUST BE SUBMITTED WITH THE APPLICATION.** Assessments and sales information are available at [www.hampton.gov/assessor](http://www.hampton.gov/assessor) and at the Office of the Assessor of Real Estate.

**A \_\_\_ Fair Market Value: The subject property is assessed at more, or at less than the fair market value.**

List the sale(s) of comparable properties that support your assertion.

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Sale Price \_\_\_\_\_

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Sale Price \_\_\_\_\_

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Sale Price \_\_\_\_\_

**B \_\_\_ Equalization: The subject property is not equitably assessed with comparable properties.**

List the assessment(s) of comparable properties that support your assertion.

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Assessment \_\_\_\_\_

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Assessment \_\_\_\_\_

PIN \_\_\_\_\_ Property Address \_\_\_\_\_ Assessment \_\_\_\_\_

**C \_\_\_ Accuracy: The subject property was assessed on the basis of inaccurate property information.**

Describe the inaccuracy of the property information. (example: incorrect square footage)

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**CERTIFICATIONS**

**Review Outcome:** I voluntarily request a review of the subject property identified herein. I understand that this review may result in a no change, a decrease, or an increase to the Assessor's valuation.

**Authorized Agent:** I understand that in order for another to act on behalf of the Owner of Record for the purposes of this review (including the signing of this application), this application must include a current power of attorney or letter of authorization to designate that other party. A current power of attorney or letter of authorization \_\_\_\_\_ is (or) \_\_\_\_\_ is not attached for this purpose.

**Accuracy of Information:** I certify that the descriptions and statements contained in this application are true and correct to the best of my knowledge and belief.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Name of Owner of Record/Authorized Agent (printed)

\_\_\_\_\_  
Signature of Owner of Record/Authorized Agent