



Town of Warren TAX ASSESSOR

APPLICATION FOR APPEAL OF PROPERTY TAX

Tax Assessor's Office 514 Main Street, Warren, RI 02885 / p. (401) 245-7342 / f. (401) 245-0595

For appeals to the Tax Assessor, this form must be filed with the local office of tax assessment within (90) days from which the date the tax payment is due. For appeals to the local tax board of review, this form must be filed with the local tax board of review no more than thirty (30) days after the assessor renders a decision, or if the assessor does not render a decision, within forty-five days of the filing of the appeal, not more than ninety (90) days after the expiration of the forty-five (45) days period.

NOTE: Inability to pay is not a valid reason for filing an appeal of assessed valuation.

TAXPAYER INFORMATION:

A. Name(s) of Assessed Owner: _____

B. Name(s) and Status of Applicant (if other than Assessed Owner): _____

_____ Subsequent Owner (Acquired Title after December 31, 2008) as of: _____

_____ Administrator/Executor _____ Lessee _____ Mortgagee _____ Other: _____

C. Mailing Address _____ Telephone No: () _____

D. Email Address _____

E. Previous Assessed Value: _____ New Assessed Value: _____

PROPERTY IDENTIFICATION: Complete using information as it appears on your tax bill.

A. Tax Bill Account No.: _____

B. Assessed Valuation Annual Tax: _____ Annual Tax: _____

C. Property Location: _____

Description (Single Family, 2-Family, Commercial, etc.) _____

Real Estate Parcel Identification: Plat(s): _____ Lot(s): _____

Tangible Personal Property Description: _____

D. Date Property Acquired: _____ Purchase Price: \$ _____ Total Cost of Improvements: _____

Have you filed a true and exact account this year with the Town Assessor as required by law? Circle one: Yes No

What is the amount of Fire Insurance on Building? _____

REASON FOR ABATEMENT SOUGHT: Check reason(s) abatement is warranted and briefly explain why it applies.

Continue explanation on attachment if necessary.

Overvaluation. Incorrect Usage Classification Disproportionate Assessment. Other.

Specify:

Applicant's Opinion of Value \$ _____

Fair Market Value

Class

Assessed Value

Describe any improvements made during the last five years and cost: _____

Comparable Properties that support your claim:

Address	Sale Price	Sales Date	Property Type	Assessed Value
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SIGNATURES _____ DATE: _____

Preparer Name: _____ Address: _____ Phone: _____

**LATE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX.
TO AVOID THE ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED.**

Taxpayer Information about Appeal Procedure

A. Who may file an application?

You may file an application if you are:

1. the assessed or subsequent owner of the property (acquiring title after December 31st)
2. the owner's administrator or executor
3. A tenant paying rent who is obligated to pay more than one-half of the tax
4. a person owning or having an interest in or possession of the property; or
5. a mortgagee if the assessed owner has not applied.

In some cases, you must pay all or a portion of the tax before you can file. The owner, or a member of his/her family with written authority, in the event the owner cannot attend, or an attorney representing the owner, may be present at the hearing. If signed by an agent, attach a copy of written authorization to sign on behalf of the taxpayer.

B. When and where application must be filed?

Your application must be filed with the Assessor's Office on or before 90 days beginning with the first installment payment on the actual tax bill mailed for the fiscal year is due. The actual tax bills are those issued after the tax rate is set. Applications filed for omitted, revised or reassessed taxes must be filed within 90 days of the date, or the revised tax bill, for those taxes mailed.

C. Payment of tax.

To avoid any loss of rights or additional charges, you should pay the tax assessed. If an abatement is granted and you have already paid the entire year's tax as abated, you will receive a refund of any overpayment.

These deadlines cannot be extended or waived by the assessor for ANY REASON. If your application is not filed on time, you lose ALL rights to an abatement and the Assessor cannot BY LAW grant you one. **AN APPLICATION IS FILED WHEN RECEIVED BY THE ASSESSOR.**

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

DATE RECEIVED:		
REQUEST FOR HEARING BEFORE BOARD OF ASSESSMENT REVIEW:	YES	NO
HEARING DATE:		
DISPOSITION:		
CHAIRMAN OF THE BOARD:		

Member: _____

Member: _____

Date: _____