Please email or fax back, or mail
listers@fairpoint.net
fax: 796-3939

TOWN OF ALBURGH, VERMONT

BOARD OF LISTERS, 1 North Main Street, Alburgh, Vt. 05440

802-796-4061

APPLICATION FOR GRIEVANCE

The Listers have developed this application to assist you in your preparation for grievance day hearings.

Please use one application for EACH property you are appealing.

APPLICATION MUST BE RECEIVED PRIOR TO THE FIRST DAY OF GRIEVANCE HEARINGS.

Name_____

Mailing Address_____

City/State/Zip_____

Phone [Daytime] and /or email_____

Property
Location_____

Current Assessment
$_____

Your Opinion of Fair Market Value $_____

BASIS FOR APPEAL: Please provide a brief statement of why you feel your assessment is incorrect. If you are relying on sales data, please list the sales, which support you proposed value for the property. If you feel you are disproportionately assessed, please list those neighboring properties, which you are using for comparison.
If the concern is Homestead or Housesite please include any applicable data [such as VT #HS-131, Homestead Declaration]- ie. Proportion of property used for commercial or business purposes.

_____
_____
_____
_____
_____
_____
_____
_____Over__

Signature of Taxpayer: (REQUIRED) _____

Taxpayer's representative (If applicable): _____

Thank you for assisting the Listers in the appeal process. Please submit this document and any other required information to the address the top of this form.

If you need assistance, or have questions, please call the Listers Office between 9:00AM and 2:00 PM, Monday through Friday at (802) 796-4061