

**APPLICATION FOR APPEAL OF PROPERTY TAX**

For appeals to the Town Assessor, this form must be filed with the local office of tax assessment within ninety (90) days from the date the first tax payment is due. For appeals to the local tax board of review, this form must be filed with the local tax board not more than thirty (30) days after the Assessor renders a decision, or if the Assessor does not render a decision within forty-five (45) days of the filing of the appeal, not more than ninety (90) days after the expiration of the forty-five (45) day period.

**1. 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 on \_\_\_\_\_ 2016.  
\_\_\_\_ Administrator/Executor \_\_\_\_ Lessee \_\_\_\_ Mortgagee \_\_\_\_ Other (specify) \_\_\_\_\_
- C. Mailing Address and Telephone Number:  
\_\_\_\_\_  
(Complete Mailing Address with City, State, Zip Code) Tel. No. \_\_\_\_\_
- D. Previous Assessed Value \_\_\_\_\_ E. New Assessed Value \_\_\_\_\_

**2. PROPERTY IDENTIFICATION:** Complete using information as it appears on the bill.

- A. Tax Bill Account No.: \_\_\_\_\_ Assessed Valuation \_\_\_\_\_ Annual Tax \_\_\_\_\_
- B. Location: \_\_\_\_\_ Description: \_\_\_\_\_  
No. Street Zip  
\_\_\_\_ Real Estate Parcel Identification: Map \_\_\_\_\_ Block \_\_\_\_\_ Parcel \_\_\_\_\_ Type \_\_\_\_\_  
\_\_\_\_ Tangible Personal Identification \_\_\_\_\_
- C. Date Prop. Acquired: \_\_\_\_\_ Purchase Price \_\_\_\_\_ Total Cost of Improvements \_\_\_\_\_  
What is the amount of the fire insurance on the building(s) \_\_\_\_\_  
How was the property acquired? Foreclosure \_\_\_\_ Private Sale \_\_\_\_ Other (specify) \_\_\_\_\_

**3. REASON(S) FOR REDUCTION SOUGHT:** Check reason(s) reduction 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

(As of December 31 in the year of the last update or revaluation for real estate (December 31, 2013) and as of December 31 of the tax year for personal estate)

Explanation: \_\_\_\_\_

Have you filed a true and exact account this year with the Town Assessor as Required by law? \_\_\_\_

Comparable properties that support your claim: \_\_\_\_\_ Y/N

Address Sales Price Sale Date Property Type Assessed Value

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

All pertinent documents, appraisals, surveys, etc. must accompany this application.

**YOU CANNOT ADD TO YOUR APPEAL ONCE YOU HAVE SUBMITTED YOUR APPLICATION TO THE ASSESSOR'S OFFICE.**

A. If it is rental property, does the owner pay for:

Exterior repairs \_\_\_\_ Interior repairs \_\_\_\_ Fuel for heat \_\_\_\_ Hot water \_\_\_\_ Electricity \_\_\_\_ Gas \_\_\_\_  
Water \_\_\_\_ Any other expenses \_\_\_\_\_

B. Gross Annual Rental Per Unit

Unit #1 \$ \_\_\_\_\_ Unit #4 \$ \_\_\_\_\_

Unit #2 \$ \_\_\_\_\_ Unit #5 \$ \_\_\_\_\_

Unit # 3 \$ \_\_\_\_\_ Unit #6 \$ \_\_\_\_\_

C. **Merchants:** Furniture Assessed \$ \_\_\_\_\_ Equipment Assessed \$ \_\_\_\_\_

D. **Manufacturers:** Furniture & Fixtures Assessed \$ \_\_\_\_\_

E. Other Personal Property Assessed \$ \_\_\_\_\_

F. Owner's APPEAL estimate of value \$ \_\_\_\_\_

G. Reason for Appeal \_\_\_\_\_

H. Did you file a "Declaration to Tax Assessor" prior to January 31<sup>st</sup>? Yes \_\_\_\_\_ No \_\_\_\_\_

Owner's Oath

I do solemnly swear that I am the owner, or duly authorized agent of the owner of the above described property, and that all answers and all statements contained in this application to the Tax Assessment Board of Review for a review of the assessed valuation of my property on this year's Grand List, are true to the best of my knowledge and belief.

4. SIGNATURES:

\_\_\_\_\_  
Signature of Applicant                      Date                      Signature of Authorized Agent                      Date

\_\_\_\_\_  
Name of Preparer                      Address                      Tel. No.

**NOTARY PUBLIC**

State of Rhode Island

County of \_\_\_\_\_

Subscribed and sworn to before me at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

**REASONS FOR AN APPEAL:** It is the intent of the general assembly to ensure that all taxpayers in Rhode Island are treated equitably. Ensuring that taxpayers are treated fairly begins where cities and towns meet defined standards related to performing property values. All properties should be assessed in a uniform manner, and properties of equal value should be assessed the same.

**TO DISPUTE YOUR VALUATION OR ASSESSMENT OR CORRECT ANY OTHER BILLING PROBLEM OR ERROR THAT CAUSED YOUR TAX BILL TO BE HIGHER THAN IT SHOULD BE, YOU MUST APPEAL WITHIN NINETY (90) DAYS FROM THE DATE THE FIRST TAX PAYMENT IS DUE.**

You may appeal your assessment if your property is: (1) OVERVALUED (assessed value is more than the fair market value as of December 31 in the year of the last update or revaluation for real estate and as of December 31, 2013 of the tax year for personal estate for any reason, including clerical and data processing errors; (2) disproportionately assessed in comparison with other properties; (3) classified incorrectly as residential, commercial, industrial or open space, farm or forest; (4) illegal tax partially or fully exempt; (5) modified from its condition from the time of the last update or revaluation.

**WHO MAY FILE AN APPLICATION:** You may file an application if you are (1) the assessed or subsequent (acquiring title after December 31) owner of the property; (2) the owner's administrator or executor; (3) a tenant or group of tenants of real estate paying rent therefrom, and under obligations to pay more than one-half ( 1/2) of the taxes thereon; (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.

**WHEN AND WHERE APPLICATION MUST BE FILED:** Your application must be filed with the local office of tax assessment within NINETY (90) days from the date the first tax payment is due. **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'S OFFICE.**

**PAYMENT OF TAX:** Filing an application does not stay the collection of your taxes. You must pay the tax when due to appeal the assessor's disposition of your application. Failure to pay the tax assessed when due may also subject you to interest charges and collection action. To avoid any loss of rights or additional charges, you should pay the tax as 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.

**FILING AN ACCOUNT:** Rhode Island General Laws Section 44-5-15 requires the annual filing of a true and exact account of all ratable estate owned or possessed by every person and corporate body. The time to file is between December 31, and January 31, of intention to submit declaration by March 15. Failure to file a true and full account, within the prescribed time, eliminates the right to appeal to the superior court, subject to the exceptions provided in Rhode Island General Laws Section 44-5-26(b). No amended returns will be accepted after March 15th. Such notice of your intention must be sent by certified mail, postage prepaid, postmark no later than 12 o'clock midnight of the last day, January 31. No extensions beyond March 15th can be granted. The form for filing such account may be obtained from the city or town assessor.

**ASSESSOR'S DISPOSITION:** Upon applying for a reduction in assessment, you may be asked to provide the assessor with further written information about the property and to permit them to inspect it. Failure to provide the information or permit an inspection within thirty (30) days of the request may result in the loss of your appeal rights.

**APPEAL:** The assessor shall have forty-five (45) days to review the appeal, render a decision and notify the taxpayer of the decision. The taxpayer, if still aggrieved, may appeal the decision of the tax assessor to the local tax board of review, or in the event that the assessor does not render a decision, the taxpayer may appeal to the local tax board of review at the expiration of the forty-five (45) day period. Appeals to the local tax board of review shall be filed not more than thirty (30) days after the assessor renders a decision and notifies the taxpayer, or if the assessor does not render a decision within forty-five (45) days of the filing of the appeal, not more than ninety (90) days after the expiration of the forty-five (45) day period.

**DISPOSITION OF APPLICATION (ASSESSOR'S USE ONLY)**

GRANTED \_\_\_\_\_ Assessed Value \_\_\_\_\_

Date Sent \_\_\_\_\_ Abated Value \_\_\_\_\_

Date Returned \_\_\_\_\_ DENIED \_\_\_\_\_ Adjusted Value \_\_\_\_\_

Assessed Tax \_\_\_\_\_

On-Site Inspection DEEMED \_\_\_\_\_ DENIED \_\_\_\_\_ Abated Tax \_\_\_\_\_

Date Adjusted Tax \_\_\_\_\_ By \_\_\_\_\_

Date Voted/Deemed Denied Tax Board of Review \_\_\_\_\_

Date Change Certificate No. \_\_\_\_\_

Any person still aggrieved on any ground whatsoever by an assessment of taxes against him or her in any city or town may, within thirty (30) days of the tax board of review decision notice, file a petition in the superior court for the county in which the city or town lies for relief from the assessment, to which petition the assessors of taxes of the city or town in office at the time the petition is filed shall be made parties respondent, and the clerk shall thereupon issue a citation substantially in the following form:

**THE STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS.**

To the sheriffs of several counties, or to their deputies, Greetings: We command you to summon the assessor of taxes of the town of Hopkinton : to wit, \_\_\_\_\_ of \_\_\_\_\_ (if to be found in your precinct) to answer the complaint of \_\_\_\_\_ of \_\_\_\_\_ on the return day hereof (said return day being the \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_) in the superior court to be holden at the county courthouse in \_\_\_\_\_ as by petition filed in court is fully set forth; and to show cause why said petition should not be granted. Hereof fail not, and make true return of this writ with your doings thereon. Witness, the seal of our superior court, at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_,  
\_\_\_\_\_  
Clerk.

(c) Provided, that in case the person has not filed an account, or filed an appeal first within the local tax board of review, that person shall not have the benefit of the remedy provided in this section and in §§ 44-5-27 – 44-5-31, unless: (1) that person's real estate has been assessed at a value in excess of the value at which it was assessed on the last preceding assessment day, whether then owned by that person or not, and has been assessed, if assessment has been made at full and fair cash value, at a value in excess of its full and fair cash value, or, if assessment has purportedly been made at a uniform percentage of full and fair cash value, at a percentage in excess of the uniform percentage; or (2) the tax assessed is illegal in whole or in part; and that person's remedy is limited to a review of the assessment on the real estate or to relief with respect to the illegal tax, as the case may be.