Town of Cavendish

Board of Listers

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.

Name _____

Mailing Address _____

City/State/Zip _____

Phone [Daytime] and/or email _____

Property Location _____

Map ID _____

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 your proposed value for the property. If you feel you are disproportionately assessed, please list those neighboring properties, which you are using for comparison. If your property is a commercial property, you will receive an income and expense form to complete and fill out with your application. If you need additional space, please attach sheets to this form.

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