



## Real Estate Appeal Form

### Office Use Only

Appeal Number: \_\_\_\_\_ Assessor \_\_\_\_\_

Record Number: \_\_\_\_\_

### **Return to:**

Commissioner of the Revenue Office  
Frederick County, Virginia  
PO Box 552  
107 N Kent St  
Winchester VA, 22604

### **Telephone:**

(540)-722-8319  
(540)667-6487 (FAX)

### **Email:**

realestate@fcva.us

**IMPORTANT:** Fill out form to completion. Values of appeal must be supported by factual data. Examples include; recent arms-length transaction, recent appraisal, or recent comparable sales. Please contact the office if you have any questions.

### Owner & Tax Record Information

Owner(s) Name(s): \_\_\_\_\_

Account Number: \_\_\_\_\_

Physical Property Address: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Daytime Contact Number: \_\_\_\_\_

### Owner's Opinion Of Value

Reasons for Review: Market \_\_\_\_\_ Equity \_\_\_\_\_ Incorrect Property Data (i.e., square feet) \_\_\_\_\_

Your estimate of the Fair Market Value ("to be determined" is not acceptable– Evidence must support this value):

Land \$ \_\_\_\_\_ Building(s) \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

### 2025 Assessment Information

Land Assessment: \$ \_\_\_\_\_ Improvement Assessment: \$ \_\_\_\_\_

**List below details and information to support your opinion of value. Please include all documentation that has led you to this opinion.**

**Signatures**

I certify that the descriptions and statements contained in this application are true and accurate. If represented by an agent, the owner(s) agree with the opinions put forth in this application. All evidence has been submitted with this application for consideration. All titled owners must sign document.

Date	Owner(s) Name(s) Please Print	Signature
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