**Town of Sodus Assessor’s Office- Assessment Review: Residential Properties**

|  |  |
| --- | --- |
| **Taxpayer Name:** | **Phone Number:** |
| **Mailing Address (if different):** |  |
| **Property Information** |  |
| **Address:** | **Current Assessed Value:** $ |
| **Parcel ID:** | **Requested Assessed Value: $** |
| **Is the Property Rented? \_\_ Yes \_\_ No (If yes please provide income and expense statements)** |

**SUPPORTING INFORMATION FOR REVIEW (Answer all that apply)**

1. **Comparable Sales**: (recent sales with similar characteristics to my home)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Property Address |  Sale Price | Sale Date |  Year Built | Size/SFLA | Lot Size |
| #1 |  |  |  |  |  |
| #2 |  |  |  |  |  |
| #3 |  |  |  |  |  |

1. **Property has had a recent Appraisal/ Market Analysis** ( Please provide entire Appraisal/Report)

|  |  |
| --- | --- |
| **Appraised Value: $** | Appraisal Date: |
| Reason for Appraisal: |

1. **Specific conditions that affect value:** ( May attach photos or additional documentation)

|  |
| --- |
|  |

1. **Other reason(s):** (may attach additional information if necessary)

|  |
| --- |
|  |

I certify that the above statements are true and not misrepresented, to the best of my knowledge.

**Owner:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**