

PASSAIC CTY. BD. OF TAXATION
435 HAMBURG TURNPIKE
WAYNE, NJ 07470

Property Class \_\_\_\_\_

PETITIONER \_\_\_\_\_
(PLEASE Type or Print)

Fee Paid \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

Daytime Telephone # \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_

BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ QUAL. \_\_\_\_\_

Lot Size \_\_\_\_\_

Municipality \_\_\_\_\_ Property Location \_\_\_\_\_

Name, Telephone No. and Address of Attorney-or person to be notified of hearing and judgment.

\_\_\_\_\_
\_\_\_\_\_

SECTION 1 ADDED ASSESSMENT, OMITTED ADDED ASSESSMENT OR OMITTED ASSESSMENT ONLY
(MUST BE FILED ON OR BEFORE DECEMBER 1st)

Added Assessment \_\_\_\_\_ Omitted Assessment \_\_\_\_\_ Omitted Added Assessment \_\_\_\_\_
Year Year Year

Table with 3 columns: CURRENT VALUE OF ADDED OMITTED ASSESSMENT ONLY, NO. OF MONTHS ASSESSED, PRORATED VALUE. Rows for Land, Improvement, Total.

REQUESTED VALUE OF ADDED OMITTED ASSESSMENT Petitioner states that the said assessment should be reduced to:

Table with 3 columns: Land, Improvement, Total. Values in dollars.

COMPLETION DATE \_\_\_\_\_ TYPE OF IMPROVEMENT \_\_\_\_\_

REASON FOR APPEAL \_\_\_\_\_

SECTION 11 COMPARABLE SALES (See instruction 8B)

Table with 4 columns: Block/Lot/Qual., Location, Sale Price, Sale/Deed Date. Rows 1-5.

CERTIFICATIONS

On \_\_\_\_\_, 20 \_\_, I, the undersigned, served upon the Assessor and the Clerk of \_\_\_\_\_ or upon the taxpayer, personally or by regular mail or certified mail, a copy of the within appeal. (municipality)

I certify and affirm that the statements set forth by me in the foregoing petition are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED: \_\_\_\_\_ SIGNED: \_\_\_\_\_

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