



# TOWN OF RANDOLPH, VERMONT

LISTERS OFFICE

## APPLICATION FOR GRIEVANCE

The Listers have developed this application to assist you in preparing for your grievance hearing. We will contact you to schedule your hearing upon receipt. **Please return completed forms to our office by mail or email by Saturday, June 29<sup>th</sup> at 3:00pm. Postmarks are not accepted.**

*Please Note: Applicant must be owner of record on April 1<sup>st</sup> but may assign new owner or other agent as their representative below.*

### Applicant Information

Owner(s) Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

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

Phone Number: \_\_\_\_\_

Property Location: \_\_\_\_\_ Parcel ID: \_\_\_\_\_

Current Assessment: \_\_\_\_\_ Your Opinion of Fair Market Value: \_\_\_\_\_  
*(What would you list the property for if placing on the market today)*

### Basis for Appeal

*Please provide a brief statement explaining 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. It is the responsibility of the taxpayer to prove a different fair market value other than what is listed. If you need additional space and/or are submitting supporting documents, please attached those sheets to this form and **initial each page**. More space provided on the following page if needed.*

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### Signature

\_\_\_\_\_  
*Signature of Owner as of April 1 (Required)*

