The Commonwealth of Massachusetts

Appellate Tax Board

# Petition Under Formal Procedure

**APPEAL FROM ASSESSORS’ DENIAL OF ABATEMENT APPLICATION**

Docket No. F-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Appellant (Print full name of each appellant)

vs.

Board of Assessors of the City(Town) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appellee

1. This is an appeal from the refusal of the appellee to abate a tax assessed (or grant an exemption under Clause ) for the fiscal year on property owned or occupied by the appellant on January 1, \_\_\_\_\_.
2. The address or location of the property is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. Property type:  ***single-family residence;*  *condominium;*  *multi-family;*  *apartment building;*  *hotel;*  *office building;*  *retail building; industrial building;*  *other real estate (describe)*  *personal property (describe):***
4. The appellee valued the property at $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and assessed a tax thereon at the rate of $\_\_\_\_\_\_\_\_\_\_\_ per $1000 in the total amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
5. Dates on which taxes were paid: ; Amount of interest, if any:
6. Date the appellant applied for an abatement in writing to the appellee:
7. Date the appellee denied the abatement: ; if a partial abatement was granted, date and amount of assessment after the partial abatement: (date): ; amount (attach copy of abatement certificate)
8. The appellant is aggrieved by the decision of the appellee and contends that the property was overvalued and/or the following claim(s):
9. The appellant requests that a hearing be held upon this petition and that the Board grant an abatement.
10. Mailing address of appellant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Service of papers in connection with this appeal may be made on appellant or his/her attorney at:

(Print Name) (Print Address)

(Attorney’s BBO Number) (Tel. No.)(\_\_\_\_\_\_)

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

Signature