



2024 Granville County Appeal Form

Owner: _____

Mailing Address:

Phone # _____ E-mail _____

NON -OWNER APPELLANT:

If the appellant is not the owner of the property, please fill in the following:

Representative/Property Tax Company: _____

Street/P.O. Box: _____

City/State/Zip: _____

Telephone: () _____

Parcel #: _____

Property Description of Address:

Acres: _____ Real Property Assessed Value: \$ _____

Owner's Opinion of Value: \$ _____

Has this property been recently appraised? Yes _____ No _____

If yes, please submit a copy of the appraisal

Has the property been listed for sale recently? Yes _____ No _____

If yes, complete the following: Listed Price _____

Date Listed: _____

Was the property recently purchased? Yes _____ No _____

If yes, complete the following: Purchase Price: _____

Purchase Date: _____

Has the property changed since the sale? Yes _____ No _____

If yes, description of changes: _____

Is this a residential property? Yes _____ No _____

If yes, complete the following:

Construction Type: _____ Stick-built Home _____ Manufactured Home Total Finished

Area: _____ square feet # Baths: Full _____ Half _____

Fireplaces: _____ Central Air: Yes _____ No _____

Basement: Yes _____ No _____ If yes, finished? Yes _____ No _____

Attic: Yes _____ No _____ If yes, finished? Yes _____ No _____

Is this an income producing property? Yes _____ No _____

Please provide a copy of the operating statements for three consecutive years for any commercial property being placed under appeal.

If this lot/acreage is vacant, is there any reason it could not be improved? Yes _____ No _____

If yes, please explain:

Reason for this appeal:

Comparative values offered by appellant: (According to Reval year – 2024)

Parcel #: Address: Appraised Value: Sales Price: Date of Sale: _____

Under penalties prescribed by law, I hereby affirm that to the best of my knowledge and belief that the information submitted on this appeal form, including any accompanying statements and other information, is true and complete.

Signed: _____ **Date:** _____

Please submit all substantiating information to:

Granville County Tax Administration

Attn: Appeal PO Box 219

Oxford, NC 27565
