

Residential Form (6-10)

Representative: \_\_\_\_\_

Name: \_\_\_\_\_

Parcel I.D. \_\_\_\_\_

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

Account No. \_\_\_\_\_

**Property owner must personally complete and sign this form in the presence of a notary. All required documents\* must be submitted with this form.**

Dear Property Owner:

This will confirm that the Board of Assessment Review of the Village of Haverstraw, Rockland County has received your application for review.

Please take notice that the Board of Assessment Review will hold hearings on February 22, 2022 at the Village Hall, Haverstraw, New York.

This form and all supporting documents\* must be submitted no later than 2/22/2022. Failure to supply this information within such time shall be deemed willful failure. Neglect to produce the requested documentation *may result in a dismissal* and preclude further review.

Please Complete in Full:

Is the property your primary residence YES \_\_\_\_\_ NO \_\_\_\_\_

1. Owner's estimate of the Market Value of Property: \_\_\_\_\_
2. Home Type (circle one): *Cape Cod*   *Colonial*   *Contemporary*   *Mansion*   *Mediterranean*  
*Ranch*   *Raised Ranch*   *Split Level*   *Tudor*   *Town House*
3. Total number of rooms: \_\_\_\_\_
4. Total number of bedrooms: \_\_\_\_\_
5. Total number of bathrooms: \_\_\_\_\_ Full \_\_\_\_\_ Half
6. Basement type: \_\_\_\_\_ Finished \_\_\_\_\_ Unfinished \_\_\_\_\_ Crawl Space
7. Was this property purchased within the last year? YES \_\_\_\_\_ NO \_\_\_\_\_  
If YES:  
Purchase Price of Property: \_\_\_\_\_ Date Purchased \_\_\_\_\_  
\*COPY OF CLOSING STATEMENT MUST BE ATTACHED

Please indicate the circumstances affecting the sale/purchase: (circle one)  
*Parties Related*   *Forced Sale*   *Relocation*   *Estate Sale*   *Gift Involved*

8. **\*An interior sketch and interior photographs of your property are required.**
9. What is the insured value of your home as stated in your Homeowner's Insurance Policy? \_\_\_\_\_  
\*PLEASE ATTACH A COPY OF THE FIRST PAGE OF YOUR INSURANCE FORM THAT INDICATES THIS AMOUNT
10. Is the property currently for sale? YES \_\_\_\_\_ NO \_\_\_\_\_  
If YES, \*A COPY OF THE LISTING AGREEMENT MUST BE ATTACHED  
What is the asking price? \_\_\_\_\_  
Is it listed with a broker? YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_

Is it listed on a Multiple Listing Service? YES\_\_\_\_\_ NO\_\_\_\_\_

Please list the amount of all offers to date: \_\_\_\_\_

- 11.** Do you have a recent appraisal of the property? YES\_\_\_\_\_ NO\_\_\_\_\_  
**IF NOT PREVIOUSLY SUBMITTED, \*A COPY OF THE APPRAISAL MUST BE ATTACHED**

Purpose of the appraisal (circle one):     *Refinancing*                        *For filing Grievance Petition*  
                                                   *For selling purposes*                        *For estate purposes*  
                                                   *For divorce proceedings*                        *Other: \_\_\_\_\_*

- 12.** Have you or a previous owner made any physical or cosmetic improvements within the past 3 years and/or alterations to this property such as the following:

1. New or remodeled kitchen: _____	Cost of improvement: _____
2. New Lavatory or bathroom: _____	Cost of improvement: _____
3. Finished Basement living area: _____	Cost of improvement: _____
4. Finished rooms in expansion attic: _____	Cost of improvement: _____
5. New deck or porch: _____	Cost of improvement: _____
6. Other: _____	Cost of improvement: _____

- 13.** Please list any unusual or outstanding feature(s)? e.g. water views, adjoining parkland etc.  
\_\_\_\_\_

- 14.** Please note or attach any additional information supporting your complaint, including comparable sales in your neighborhood, or any evidence that indicates an incorrect assessment of your property.

- 16.** I consent to an interior inspection of my property if requested: YES \_\_\_\_ NO\_\_\_\_\_

**\* Documentation must be attached for the following:**

If the property was sold within the past year: Attach closing statement If property is for sale: Attach listing agreement(s) If an appraisal has been completed: Attach a copy of the appraisal Copy of the first page of home insurance policy that states amount property is insured

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Signed:\_\_\_\_\_ Date:\_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Please Print Name Here

STATE OF: NEW YORK

COUNTY OF: ROCKLAND

Sworn to me before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

We urge you *to timely supply* this information and avoid the probability of having your complaint dismissed

\_\_\_\_\_  
Chairperson of the Board of Assessment Review,  
Village of Haverstraw, Rockland County, New York

**Please return this form to:**

Assessor's Office, Village of Haverstraw, Municipal Building, 40 New Main Street, Haverstraw, NY 10927