

\_\_\_\_\_  
Name of City or Town

**APPLICATION FOR ABATEMENT OF** ☐ **REAL PROPERTY TAX**  
☐ **PERSONAL PROPERTY TAX**

**FISCAL YEAR** \_\_\_\_\_  
**General Laws Chapter 59, § 59**

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION (See General Laws Chapter 59, § 60)

**Return to: Board of Assessors**

Must be filed with assessors not later than due  
date of first actual (**not** preliminary) tax payment  
for fiscal year.

**INSTRUCTIONS:** Complete **BOTH** sides of application. Please print or type.

**A. TAXPAYER INFORMATION.**

|                                                                                           |                                          |                               |
|-------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------|
| Name(s) of assessed owner: _____                                                          |                                          |                               |
| Name(s) and status of applicant (if other than assessed owner) _____                      |                                          |                               |
| <input type="checkbox"/> Subsequent owner (aquired title after January 1) on _____, _____ |                                          |                               |
| <input type="checkbox"/> Administrator/executor.                                          | <input type="checkbox"/> Mortgagee.      |                               |
| <input type="checkbox"/> Lessee.                                                          | <input type="checkbox"/> Other. Specify. |                               |
| Mailing address _____                                                                     |                                          | Telephone No. (       ) _____ |
| No.    Street                                                                             | City/Town                                | Zip Code                      |
| Amounts and dates of tax payments _____                                                   |                                          |                               |

**B. PROPERTY IDENTIFICATION.** Complete using information as it appears on tax bill.

|                                 |                                     |
|---------------------------------|-------------------------------------|
| Tax bill no. _____              | Assessed valuation \$ _____         |
| Location _____<br>No.    Street |                                     |
| Description _____               |                                     |
| Real: _____                     | Parcel ID no. (map-block-lot) _____ |
| Personal: _____                 | Property type(s) _____              |
| Land area _____                 | Class _____                         |

**C. REASON(S) ABATEMENT SOUGHT.** Check reason(s) an abatement is warranted and briefly explain why it applies.  
Continue explanation on attachment if necessary.

|                                                      |                                                         |
|------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Overvaluation               | <input type="checkbox"/> Incorrect usage classification |
| <input type="checkbox"/> Disproportionate assessment | <input type="checkbox"/> Other. Specify.                |
| Applicant's opinion of: Value \$ _____               | Class _____                                             |
| Explanation _____                                    |                                                         |
| _____                                                |                                                         |
| _____                                                |                                                         |
| _____                                                |                                                         |
| _____                                                |                                                         |
| _____                                                |                                                         |

FILING THIS FORM DOES NOT STAY THE COLLECTION OF YOUR TAXES. TO AVOID LOSS OF APPEAL RIGHTS OR  
ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED.

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE

## D. SIGNATURES.

|                                                                                         |               |                             |
|-----------------------------------------------------------------------------------------|---------------|-----------------------------|
| Subscribed this _____ day of _____, _____                                               |               | Under penalties of perjury. |
| Signature of applicant _____                                                            |               |                             |
| If not an individual, signature of authorized officer _____                             |               | Title _____                 |
| ( )                                                                                     |               |                             |
| (print or type) Name _____                                                              | Address _____ | Telephone _____             |
| If signed by agent, attach copy of written authorization to sign on behalf of taxpayer. |               |                             |

### TAXPAYER INFORMATION ABOUT ABATEMENT PROCEDURE

**REASONS FOR AN ABATEMENT.** An abatement is a reduction in the tax assessed on your property for the fiscal year. To dispute your valuation or assessment or to correct any other billing problem or error that caused your tax bill to be higher than it should be, you must apply for an abatement.

You may apply for an abatement if your property is: 1) overvalued (assessed value is more than fair cash value on January 1 for any reason, including clerical and data processing errors or assessment of property that is non-existent or not taxable to you), 2) disproportionately assessed in comparison with other properties, 3) classified incorrectly as residential, open space, commercial or industrial real property, or 4) partially or fully exempt.

**WHO MAY FILE AN APPLICATION.** You may file an application if you are:

- the assessed or subsequent (acquiring title after January 1) owner of the property,
- the personal representative of the assessed owner's estate or personal representative or trustee under the assessed owner's will,
- a tenant paying rent who is obligated to pay more than one-half of the tax,
- a person owning or having an interest or possession of the property, or
- a mortgagee if the assessed owner has not applied.

In some cases, you must pay all or a portion of the tax before you can file.

**WHEN AND WHERE APPLICATION MUST BE FILED.** Your application must be filed with the assessors on or before the date the first installment payment of the actual tax bill mailed for the fiscal year is due, unless you are a mortgagee. If so, your application must be filed during the last 10 days of the abatement application period. Actual tax bills are those issued after the tax rate is set. Applications filed for omitted, revised or reassessed taxes must be filed within 3 months of the date the bill for those taxes was mailed. THESE DEADLINES CANNOT BE EXTENDED OR WAIVED BY THE ASSESSORS FOR ANY REASON. IF YOUR APPLICATION IS NOT TIMELY FILED, YOU LOSE ALL RIGHTS TO AN ABATEMENT AND THE ASSESSORS CANNOT BY LAW GRANT YOU ONE. TO BE TIMELY FILED, YOUR APPLICATION MUST BE (1) RECEIVED BY THE ASSESSORS ON OR BEFORE THE FILING DEADLINE OR (2) MAILED BY UNITED STATES MAIL, FIRST CLASS POSTAGE PREPAID, TO THE PROPER ADDRESS OF THE ASSESSORS ON OR BEFORE THE FILING DEADLINE AS SHOWN BY A POSTMARK MADE BY THE UNITED STATES POSTAL SERVICE.

**PAYMENT OF TAX.** Filing an application does not stay the collection of your taxes. In some cases, you must pay all preliminary and actual installments of the tax when due to appeal the assessors' disposition of your application. Failure to pay the tax assessed when due may also subject you to interest charges and collection action. To avoid any loss of rights or additional charges, you should pay the tax as assessed. If an abatement is granted and you have already paid the entire year's tax as abated, you will receive a refund of any overpayment.

**ASSESSORS DISPOSITION.** Upon applying for an abatement, you may be asked to provide the assessors with written information about the property and permit them to inspect it. Failure to provide the information or permit an inspection within 30 days of the request may result in the loss of your appeal rights.

The assessors have 3 months from the date your application is filed to act on it unless you agree in writing before that period expires to extend it for a specific time. If the assessors do not act on your application within the original or extended period, it is deemed denied. You will be notified in writing whether an abatement has been granted or denied.

**APPEAL.** You may appeal the disposition of your application to the Appellate Tax Board, or if applicable, the County Commissioners. The appeal must be filed within 3 months of the date the assessors acted on your application, or the date your application was deemed denied, whichever is applicable. The disposition notice will provide you with further information about the appeal procedure and deadline.

### DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

|                      |                                        |                |                    |
|----------------------|----------------------------------------|----------------|--------------------|
| Ch. 59, § 61A return | GRANTED <input type="checkbox"/>       | Assessed value | _____              |
| Date sent _____      | DENIED <input type="checkbox"/>        | Abated value   | _____              |
| Date returned _____  | DEEMED DENIED <input type="checkbox"/> | Adjusted value | _____              |
| On-site inspection   |                                        | Assessed tax   | _____              |
| Date _____           |                                        | Abated tax     | _____              |
| By _____             | Date voted/Deemed denied _____         | Adjusted tax   | _____              |
|                      | Certificate No. _____                  |                |                    |
|                      | Date Cert./Notice sent _____           |                | Board of Assessors |
| Data changed _____   | Appeal _____                           |                | _____              |
|                      | Date filed _____                       |                | _____              |
| Valuation _____      | Decision _____                         |                | _____              |
|                      | Settlement _____                       | Date: _____    |                    |