

**NORTHAMPTON COUNTY APPLICATION FOR EXEMPT
TO ACTIVE OF REAL ESTATE**

Under the provisions of law any persons aggrieved by any assessment desiring to appeal shall file a statement, in writing, with the Board of Assessment Appeals ON OR BEFORE SEPTEMBER 1ST. Such statement shall designate the assessment appealed from and the address to which the Board shall mail notice of when and where to appear for a hearing. **THE BOARD SHALL HEAR NO APPEAL UNLESS APPELLANT SHALL FIRST HAVE FILED THE APPEAL AND REQUIRED DOCUMENTS ON OR BEFORE SEPTEMBER 1ST, AS SET FORTH BY LAW.** Please return form to Northampton County Courthouse, Revenue Appeals Board, 669 Washington St, Easton PA 18042-7475

MUNICIPALITY/SCHOOL DISTRICT: _____

MAILING ADDRESS: _____

PROPERTY LOCATION: _____

Number Street

TAX MAP IDENTIFICATION #: _____
District Map/Block/Lot

THERE IS ERECTED ON SAID PROPERTY:

SIZE OF BUILDING(S) IMPROVEMENT(S):

SIZE OF LOT(S): _____

PART OF THE GROUND NOT COVERED BY THE PRESENT BUILDING(S)/ IMPROVEMENT(S):
IS/ARE USED FOR _____

DATE PROPERTY ACQUIRED _____

CURRENT USE OF PROPERTY _____

LEGAL BASIS AND STATUTORY CITATION FOR EXEMPTION:

RENT, REVENUE, OR INCOME DERIVED FROM EXEMPT PROPERTY.

CERTIFICATE OF APPEAL

I/We hereby declare my/our intention to appeal from the assessed valuation of the property described above and do hereby verify that the statements made in this appeal are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. CS Section 4904, relating to unsworn falsification to authorities.

SIGNED: _____ **DATE:** _____

OWNER(S) OF RECORD **PHONE: (HOME)** _____
(DAY/OFFICE) _____

**ALL NOTICE OF PROCEEDINGS WILL BE MAILED TO THE OWNER(S) OF RECORD AND THE
PERSON(S) IDENTIFIED BELOW:**

NAME: _____

ADDRESS: _____

TELEPHONE: _____

