

# HOLDEN

Fiscal Year 20\_\_

Application No. \_\_\_\_\_

## APPLICATION FOR ABATEMENT OF REAL PROPERTY TAX

Mass. General Laws Chapter 59, Section 59

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

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

**1. TAXPAYER INFORMATION:**

A. Name(s) of Assessed Owner: \_\_\_\_\_

B. Name(s) and Status of Applicant (if other than Assessed Owner): \_\_\_\_\_

Subsequent Owner (Acquired Title After January 1 on \_\_\_\_\_ 20\_\_).

Administrator/Executor       Mortgagee       Lessee       Other Specify: \_\_\_\_\_

C. Mailing Address and Telephone No.:

Address \_\_\_\_\_ Tel No. \_\_\_\_\_

D. Soc. Sec./Taxpayer ID No. (optional): \_\_\_\_\_ E. Amounts and Dates of Tax Payments: \_\_\_\_\_

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

A. Tax Bill No.: \_\_\_\_\_ B. Assessed Valuation: \$ \_\_\_\_\_

C. Location:

\_\_\_\_\_ No. \_\_\_\_\_ Street \_\_\_\_\_

D. Description:

Parcel Identification No. (Map-Parcel) \_\_\_\_\_ Land Area \_\_\_\_\_ Class \_\_\_\_\_

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

Overvaluation       Incorrect Usage Classification  
 Disproportionate Assessment       Other Specify: \_\_\_\_\_

Applicant's Opinion of: \$ \_\_\_\_\_ Value \_\_\_\_\_ Class \_\_\_\_\_

Explanation: \_\_\_\_\_

**4. SIGNATURES:**

SUBSCRIBED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_, UNDER THE PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT \_\_\_\_\_

IF NOT AN INDIVIDUAL, SIGNATURE OF AUTHORIZED OFFICER \_\_\_\_\_

(Print or Type) Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. No. \_\_\_\_\_

IF SIGNED BY AN AGENT ATTACH COPY OF WRITTEN AUTHORIZATION TO SIGN ON BEHALF OF TAXPAYER.  
THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX. TO AVOID LOSS OF APPEAL RIGHTS OR  
ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED.

See Reverse Side for Important Information

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE

(over)

# HOLDEN

Application No. \_\_\_\_\_

Fiscal Year 20\_\_

## APPLICATION FOR ABATEMENT OF PERSONAL PROPERTY TAX

Mass. General Laws Chapter 59, Section 59

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

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

**1. TAXPAYER INFORMATION:**

A. Name(s) of Assessed Owner: \_\_\_\_\_

B. Name(s) and Status of Applicant (if other than Assessed Owner): \_\_\_\_\_

Subsequent Owner (Acquired Title After January 1 on \_\_\_\_\_ 20\_\_).

Administrator/Executor       Mortgagee       Lessee       Other Specify: \_\_\_\_\_

C. Mailing Address and Telephone No.:

Address \_\_\_\_\_ Tel No. \_\_\_\_\_

D. Soc. Sec./Taxpayer ID No. (optional): \_\_\_\_\_ E. Amounts and Dates of Tax Payments: \_\_\_\_\_

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

A. Tax Bill No.: \_\_\_\_\_ B. Assessed Valuation: \$ \_\_\_\_\_

C. Location:

\_\_\_\_\_ No. Street

D. Description:

Property Type(s) \_\_\_\_\_

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

Overvaluation       Incorrect Usage Classification  
 Disproportionate Assessment       Other Specify: \_\_\_\_\_

Applicant's Opinion of: \$ \_\_\_\_\_ Value \_\_\_\_\_ Class \_\_\_\_\_

Explanation: \_\_\_\_\_

**4. SIGNATURES:**

SUBSCRIBED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_, UNDER THE PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT \_\_\_\_\_

IF NOT AN INDIVIDUAL, SIGNATURE OF AUTHORIZED OFFICER \_\_\_\_\_

(Print or Type) Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. No. \_\_\_\_\_

IF SIGNED BY AN AGENT ATTACH COPY OF WRITTEN AUTHORIZATION TO SIGN ON BEHALF OF TAXPAYER.  
THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX. TO AVOID LOSS OF APPEAL RIGHTS OR  
ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED.

See Reverse Side for Important Information

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE

(over)

A. 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.

B. WHO MAY FILE AN APPLICATION. You may file an application if you are: 1) the assessed or subsequent (acquiring title after January 1) owner of the property, 2) the owner's administrator or executor, 3) a tenant paying rent who is obligated to pay more than one-half of the tax, 4) a person owning or having an interest in or possession of the property, or 5) 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.

C. WHEN AND WHERE APPLICATION MUST BE FILED. Your application must be filed with the Board of Assessors on or before the date of 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 between September 20 and October 1. 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. 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.

D. PAYMENT OF TAX. Filing an application does not stay the collection of your taxes. In some cases, you must pay 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 to collection action. To avoid any loss of rights or additional charges, you should pay the tax 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.

E. ASSESSORS' DISPOSITION. Upon applying for an abatement, you may be asked to provide the assessors with written information about the property and to 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.

F. APPEAL. You may appeal the disposition of your application. The disposition notice will provide you with further information about the appeal procedure and deadline.

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

Ch. 59 §61A Return	<input type="checkbox"/> GRANTED	Assessed Value: _____
Date Sent _____	<input type="checkbox"/> DENIED	Abated Value: _____
Date Returned _____	<input type="checkbox"/> DEEMED DENIED	Adjusted Value: _____
On Site Inspection	Date Voted/Deemed Denied _____	Assessed Tax: _____
Date _____	Certificate No. _____	Abated Tax: _____
By _____	Date Cert./Notice Sent _____	Adjusted Tax: _____
	Appeal _____	BOARD OF ASSESSORS
Data Change _____	Date Filed _____	_____
Valuation _____	Decision _____	_____
	Settlement _____	_____
		Date _____