

**APPLICATION FOR APPEAL OF PROPERTY TAXES
ROCKPORT BOARD OF ASSESSMENT REVIEW
PO BOX 10
101 Main St
Rockport ME 04856
(207)236-6758 ph – (207)230-0112 fax**

Name of Applicant _____

Mailing Address _____

Phone #(s)_____

Property Location (Street Address) _____

Map_____ Lot_____

Tax year for which abatement is requested _____

Assessed valuation of real estate or personal property _____

Abatement requested in real estate or personal property valuation _____

Reasons for requesting the abatement:

PROVIDE SUPPORTING DOCUMENTATION AS APPLICABLE

Note: provide the original and 8 copies – **9** packets total

I hereby make written application for appeal of the property taxes as noted above. The above statements are correct to the best of my knowledge and belief.

Date _____

Applicant Signature _____