

RESIDENTIAL PROPERTY REVIEW REQUEST FORM

If requesting review of more than one property, please submit on individual forms. All fields must be completed. If unknown, put "unknown". If not applicable: "N/A". Please keep a copy for your records. Please note that forms must meet statutory requirements to be considered for review.

PROPERTY OWNER _____ DATE _____ PHONE _____

PROPERTY LOCATION _____ Have you contacted our office previously? _____
 If so, date _____

PIDN _____
 (may be found on your tax bill)

E-mail _____

Year Built _____

Garage (1) Type _____

Baths _____

Garage (1) Size _____

Bedrooms _____

Garage (2) Type _____

Air _____

Garage (2) Size _____



Heat Type/
 Source _____

PER STATUTE, ALL FORMS MUST BE RECEIVED ON OR BEFORE MAY 21 TO BE CONSIDERED FOR 2018 ASSESSMENT YEAR
FAX: 859-392-1770 **EMAIL:** info.kentonpva@kentoncounty.org
HAND DELIVERY: 303 Court Street
 Room 210
 Covington, KY 41011

Structure _____

Foundation _____

Basement type _____

Basement finish _____

OWNER OPINION OF VALUE \$ _____ **REQUIRED**

Basement exit _____

Living Sq. Ft. _____ (approx.)

PVA Value \$ _____

INFORMATION TO SUPPORT OWNER OPINION OF VALUE:

Additional documents may be submitted in support of your value, such as a recent appraisal or MLS listing. Please include the PIDN or property address on any documents being submitted with this Request.

I hereby affirm that the information included herein or attached hereto is true and correct.

Signature of Property Owner or Designated Representative _____

FOR OFFICE USE ONLY

REV 1-10-2018

Received by _____

Date received _____

Assessor _____

City _____

Avis _____

New Value _____

Assessment year _____

Basis for adjustment _____

Data Entry _____

Notice Sent _____

Deletion _____

Bldg Cond _____