

TAX MAP# \_\_\_\_\_

**TOWN OF HURLEY  
ASSESSOR'S OFFICE**

INFORMAL REVIEW REQUEST OF ASSESSMENT

DATE \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

2024 ASSESSMENT \$ \_\_\_\_\_ ASSESSMENT REQUEST \$ \_\_\_\_\_

**NATURE OF COMPLAINT...EXPLAIN BELOW (IF SPACE PROVIDED ISN'T ENOUGH  
PLEASE USE 2<sup>ND</sup> PAGE OF THIS FORM) - YOU \*MUST\* PROVIDE EVIDENCE OF  
OVERASSESSMENT TO BE REVIEWED:**

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NOTICE

**IF A REDUCTION IS WARRANTED BY EVIDENCE, RESULTS OF THIS INFORMAL  
REVIEW WILL BE SENT TO YOU ON OR BEFORE THE TENTATIVE ASSESSMENT ROLL  
- MAY 1, 2024**

THIS FORM MUST BE RETURNED BY 4/7/2024

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
ACTION TAKEN/RECOMMENDATION BY ASSESSOR:

\_\_\_ APPRAISAL \_\_\_ SALE CONTRACT \_\_\_ CONSTRUCTION EST. \_\_\_ OTHER: \_\_\_\_\_

\_\_\_\_\_  
Action Recommendation +/- Change Land \_\_\_\_\_ Total \_\_\_\_\_

DECISION: NC/+/- \_\_\_\_\_ FINAL VALUE LAND \_\_\_\_\_ TOTAL \_\_\_\_\_

REVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

**NOTES :**

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