



Telephone Number: 757-890-3720
 Email: boe@yorkcounty.gov

York County
 Real Estate Assessment Division
 120 Alexander Hamilton Blvd
 P O Box 532
 Yorktown, VA 23690

Office Use Only
Appeal number: _____
Date received: _____

2026 BOARD OF EQUALIZATION APPLICATION

APPEAL DEADLINE IS FRIDAY, 5:00 PM, FEBRUARY 27, 2026

Property owners or their authorized agent must submit the original application and (5) copies, all supporting documentation must be included, application must be signed by all owner(s) or authorized agent. Authorized agents must submit a notarized letter of authorization (LOA) to appeal an assessment.

- If applicant is submitting an appraisal for consideration, the effective valuation date must be between January 1, 2025 and December 31, 2025.
- If the property is income producing, the owner/agent must submit rent roll, leases and income and expense statements for years 2024 and 2025.

If appealing more than one parcel, a separate application is required for each property.

Please place an (X) to the left of the property type:

<input type="checkbox"/>	Residential	<input type="checkbox"/>	Office	<input type="checkbox"/>	Big Box Retail
<input type="checkbox"/>	Apartment/Multifamily	<input type="checkbox"/>	Self-Storage	<input type="checkbox"/>	Hotel/Motel/Resort
<input type="checkbox"/>	Shopping Center	<input type="checkbox"/>	Bank	<input type="checkbox"/>	Timeshares
<input type="checkbox"/>	Restaurant	<input type="checkbox"/>	Drug Store	<input type="checkbox"/>	Other: please list below
<input type="checkbox"/>	Convenience Store	<input type="checkbox"/>	Mobile Home Park	<input type="checkbox"/>	

GPIN Geographical Parcel Identifier Number:	
Address of property subject to appeal:	
Property owners deeded name:	
Property owner's mailing address: (street address, city, state, and zip code)	
Owner's telephone number and email	

Please Check One Option Regarding Your Filing:

___ Owner/agent requests a staff review of the subject property. This review may result in any of the following actions: a decrease in assessed value, no change in assessed value, or an increase in assessed value.

___ Owner/agent wishes to appear before the Board of Equalization.

___ Owner/agent wishes to submit an appeal but will not appear before the Board of Equalization and wishes the Board to hear the complaint in my absence.

Using the grid below, please indicate the County’s proposed assessment and the owner’s requested assessment:

	Land Value	Structure(s) Value	Total Value
County’s Proposed Assessment			
Owner’s Requested Value			

Basis of Review or Request: Fair Market Value, Equalization, Accuracy of Data

Please check the applicable complaint:

I ___ The subject property is assessed (circle one) for **more** than or **less** than the fair market value as of January 1, 2026. List below the *sales of comparable properties* that support your claim.

GPIN _____ Property Address _____ Sale Price \$ _____

GPIN _____ Property Address _____ Sale Price \$ _____

GPIN _____ Property Address _____ Sale Price \$ _____

II ___ The subject property is not equitably assessed with comparable properties. List below the *assessments of comparable properties* that support your claim.

GPIN _____ Property Address _____ Assessed Value \$ _____

GPIN _____ Property Address _____ Assessed Value \$ _____

GPIN _____ Property Address _____ Assessed Value \$ _____

III ____ The subject property assessment was based on inaccurate property information, such as an error in acreage, incorrect gross building area or other information omitted that would impact the value of the property. Please use the space below or attach supporting documentation, such as a recorded survey, building plans or request an appointment for a staff appraiser to conduct a site inspection to verify data.

CERTIFICATION:

I certify that the descriptions and statements contained in this application are to the best of my knowledge both true and accurate.

Given under my hand this _____ day of _____, 2026.

Printed Name of Owner/Agent

Signature of Owner/Agent

Printed Name of Owner/Agent

Signature of Owner/Agent