

Town of Marlboro, Vermont  
**Board of Listers PO Box E Marlboro, VT 05344**

APPLICATION FOR GRIEVANCE

**The Listers have developed this application to assist you in your preparation for a grievance of your valuation. Please use one application for EACH property you are appealing.**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone [Daytime] and/or email \_\_\_\_\_

Property Location \_\_\_\_\_

Tax Map ID \_\_\_\_\_

Current Assessment \$ \_\_\_\_\_

Your Opinion of Fair Market Value \$ \_\_\_\_\_

**BASIS FOR APPEAL:** Please provide a brief statement of why you feel your assessment is incorrect. **Please list the comparable sales which support your proposed value for the property.** If you feel you are disproportionately assessed, please list those neighboring properties which you are using for comparison. If you need additional space, please attach sheets to this form.

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