

APPLICATION FOR FULL REASSESSMENT PROGRAM
(NOT FOR ANNUAL REASSESSMENTS)
(TO BE FILED WITH COUNTY TAX BOARD)

Municipality _____ County _____

SECTION I - GENERAL INFORMATION

1. Reassessment is to be completed as of _____ and filed in the tax year _____.
2. Year of last revaluation _____ and year 100% reassessment was implemented _____.
3. No. of line items - Class 1 _____, 2 _____, 3 _____, 4 _____, 15 _____.
4. Last date tax map approved by Division _____.
5. More than 50% of the line items must be changed to be recognized as a reassessment.

SECTION II - REASSESSMENT STANDARDS AND PROCEDURES

Please read each statement carefully. The statements below are the standards and procedures that must be met or performed during a reassessment program. If you agree with the statement, check the box to indicate agreement. If you disagree entirely or partially with the statement, check the box to indicate disagreement. Disagreement requires that a separate sheet be attached to this application to explain your reason(s) the statement is not appropriate or applicable to the proposed reassessment.

REASSESSMENT PROCEDURE STATEMENTS

- | | |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 1. A thorough inspection of the exterior of all improvements noting pertinent physical property characteristics and accurately obtaining or verifying outside building dimensions will be made. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 2. A thorough inspection of the interior of <u>all</u> improvements noting pertinent construction components and other physical data respecting condition and layout will be attempted.
<i>*If unable to gain entry, a card must be left after the first attempt to inspect with the appropriate contact information. You must gain entry into at least 50% of the interior of those improvements being inspected.</i> |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 3. A scaled sketch with dimensions of each significant building will be prepared, noting building sections, accessories, and story levels or heights. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 4. The Real Property Appraisal Manual for New Jersey Assessors will be used to develop appropriate depreciated replacement costs for all residential improvements as of the October 1 pretax year assessment date. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 5. All exempt property assessments will be updated to current values as of the October 1 pretax year assessment date. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 6. All land assessments will be updated to current values as of the October 1 pretax year assessment date using generally accepted land valuation procedures. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 7. A land value map will be developed using appropriate land unit values such as front foot, effective front foot, excess front foot, square foot, acreage value and base or minimum site value. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 8. All property sales occurring within the past three years will be analyzed: and significant data extracted from appropriate sales will be used to develop pertinent factors, adjustments, tables, and/or schedules for determining current market values as of the October 1 pretax year assessment date. |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 9. All owners of income-producing property will be requested to submit income and expense information as provided under <u>N.J.S.A. 54:4-34</u> . |
| <input type="checkbox"/> Agree
<input type="checkbox"/> Disagree | 10. All applicable approaches to value will be employed in the property valuation process and will be reconciled to determine a final assessed value for each property as of October 1 of the pretax year. |

- Agree 11. A taxpayer orientation program will be conducted to generally describe the reassessment program and its purpose. Information on this program will also appear on the municipality's website with assessor contact information.
- Disagree

- Agree 12. A notice will be sent to all taxpayers to inform them of their proposed assessed value and how an appointment may be made to arrange for an informal review
- Disagree

SECTION III - HYBRID REASSESSMENT

Check this box if any portion of the valuation updating process will be performed by individual(s) other than the assessor and his or her municipal staff.

If you checked the above box, a copy of the contract for the performance of services must be attached to this application. Any contract for valuation of all or a portion of the real property in a municipality is subject to the approval of the Director of the Division of Taxation (or his designee). Contract **MUST** include: names/addresses of outside individual(s)/contractor(s), cost of contract, and date of completion.

SECTION IV - CERTIFICATION AND ACKNOWLEDGMENT

I hereby declare as assessor that the reassessment will be performed as agreed to and stated in this application, and any revision or addendum sheet I have attached. If I am granted approval to proceed with the reassessment, I will submit monthly reports of the progress and status of the reassessment to the county tax administrator as prescribed in N.J.A.C. 18:12A-1.14(c-i). I understand more than 50% of the line items must be changed to be recognized as a reassessment and utilize the Page 8 Formula.

Check if revision or addendum sheet is attached.

_____ Date

_____ Assessor's Signature

The _____ County Board of Taxation at a meeting held on _____, 20____ has thoroughly reviewed the foregoing application and attached any revision or addendum sheet and recommends _____ of the proposed reassessment program.

(Approved or Disapproved)

I will perform a line item comparison report to validate that more than 50% of the line items have been changed.

_____ Date

_____ County Tax Administrator

Total number of pages submitted (Including AFR, Contracts, Addendums, Cover Letters) _____

The foregoing proposal for reassessment is hereby approved / disapproved on _____, 20____, in accordance with N.J.A.C. 18:12A-1.14(c-i).

<p>FOR DIVISION USE ONLY</p> <p>Reviewed by: _____</p> <p>Date: _____</p>

_____ Assistant Director, Division of Taxation