

TOWN OF RUSH
VACANT LAND REVIEW APPLICATION

SECTION I

Please Print

1. PROPERTY CLASS CODE _____
2. NAME OF PROPERTY OWNER _____
3. PROPERTY LOCATION _____
4. TELEPHONE NUMBER (home) _____ (cell) _____
5. SECTION, BLOCK & LOT NUMBER _____
6. MAILING ADDRESS _____

7. NEW PRELIMINARY ASSESSMENT _____
8. REQUESTED ASSESSMENT _____ WHY? _____

SECTION II

1. PROPERTY SIZE (frontage): _____ (depth) _____
(acreage): _____
2. CURRENT ZONING: _____
3. INTENDED USE: _____
4. SALES INFORMATION: Purchase Price: _____ Date: _____
(include this information only if you purchased the property in the last 4 years)
5. RE-ZONING PETITION PENDING (yes) or (no) _____

SECTION III

RECOMMENDED SUPPORTING INFORMATION

1. A SURVEY OF YOUR PROPERTY (if available)
2. A COPY OF YOUR SALES CONTRACT (if purchased in the past 4 years)
3. A COPY OF YOUR CLOSING STATEMENT (if applicable)
4. A COPY OF ANY APPRAISAL DONE ON YOUR PROPERTY IN THE PAST 3 YEARS
5. IF LISTED FOR SALE INCLUDE A COPY OF LISTING AGREEMENT
6. ANY ADDITIONAL DATA TO SUPPORT YOUR CLAIM

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SECTION IV

Please print

LIST FOUR SALES OF COMPARABLE PROPERTIES (please use the most recent sales for they are the best indicators of current market value)

Sale 1. Location _____ S.B.L. _____
Sale Price _____ Sale date _____
Lot size _____ Zoning _____
Topography _____ Utilities _____
Comments on sale comparison:

Sale 2. Location _____ S.B.L. _____
Sale Price _____ Sale date _____
Lot size _____ Zoning _____
Topography _____ Utilities _____
Comments on sale comparison:

Sale 3: Location _____ S.B.L. _____
Sale Price _____ Sale date _____
Lot size _____ Zoning _____
Topography _____ Utilities _____
Comments on sale comparison:

Sale 4: Location _____ S.B.L. _____
Sale Price _____ Sale date _____
Lot size _____ Zoning _____
Topography _____ Utilities _____
Comments on sale comparison:

Based on the sale of the above properties, I believe that the estimated FULL MARKET VALUE for the subject property is _____.

I certify that all statements made on this application are true and correct to the best of my knowledge and belief. _____

Signature of Owner

Date

NOTE: THIS FORM MUST BE SUBMITTED NO LATER THAN MARCH 1ST IN ORDER TO BE CONSIDERED FOR AN INFORMAL REVIEW. INFORMAL HEARINGS ARE HELD, BY APPOINTMENT, IN MARCH.