

PROPERTY APPRAISAL - NOTICE OF PROTEST - 2020

<i>Appraisal District Name</i> BRAZORIA COUNTY APPRAISAL DISTRICT 500 N CHENANGO ANGLETON, TX 77515-4650	<i>Phone / Fax / Website</i> 979-849-7792 www.brazoriacad.org						
<p>GENERAL INSTRUCTIONS: This form is for use by a property owner or an owner's designated agent to file a protest with the appraisal review board (ARB) pursuant to Tax Code Section 41.41. Lessees contractually obligated to reimburse a property owner for property taxes may be entitled to protest as a lessee if all Tax Code requirements are met, including those in Tax Code Section 41.413.</p> <p>FILING INSTRUCTIONS: This form and all supporting documentation must be filed with the appraisal district office in each county in which the property is located. Do not file this document with the Texas Comptroller of Public Accounts. Contact information for appraisal district offices may be found on the Comptroller's website.</p> <p>DEADLINES: With exceptions, the typical deadline for filing a notice of protest is midnight, May 15. (Tax Code Section 41.44) Contact the ARB for the county in which the property is located for the specific protest filing deadline.</p> <p>NOTICE: The Comptroller's office may not advise a property owner, a property owner's agent, the chief appraiser or any appraisal district employee on a matter that the Comptroller's office knows is the subject of a protest to the ARB. Consult Tax Code Chapter 41 or the ARB hearing procedures for more information.</p>							
SECTION 1: Property Owner or Lessee Information	<input type="checkbox"/> Person Age 65 or Older <input type="checkbox"/> Disabled Person <input type="checkbox"/> Military Service Member <input type="checkbox"/> Military Veteran <input type="checkbox"/> Spouse of a Military Service Member or Veteran						
	Primary Phone Number (<i>area code and number</i>) _____ Email Address* _____						
SECTION 2: Property Description	Give street address and city if different from above, or legal description if no street address _____ Appraisal district account number (<i>optional</i>) _____ Mobile homes: (<i>Give make, model and identification number</i>) _____						
<p>To preserve your right to present each reason for your protest to the ARB according to law, be sure to select all boxes that apply. Failure to select the box that corresponds to each reason for your protest may result in your inability to protest an issue that you want to pursue.</p>							
SECTION 3: Reason for Protest	<table style="width:100%; border:none;"> <tr> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> Incorrect appraised (market) value. <input type="checkbox"/> Value is unequal compared with other properties. <input type="checkbox"/> Property should not be taxed in _____ <i>(name of taxing unit)</i> <input type="checkbox"/> Failure to send required notice. _____ <i>(type)</i> <input type="checkbox"/> Other: _____ <input type="checkbox"/> Incorrect appraised or market value of land under special appraisal for ag-use, open-space or other special appraisal. <input type="checkbox"/> Temporary disaster damage exemption was denied or modified. </td> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> Exemption was denied, modified or cancelled. <input type="checkbox"/> Change in use of land appraised as ag-use, open-space, or timber land. <input type="checkbox"/> Ag-use, open-space or other special appraisal was denied, modified or cancelled. <input type="checkbox"/> Owner's name is incorrect. <input type="checkbox"/> Property description is incorrect. <input type="checkbox"/> Property is not located in this appraisal district or otherwise should not be included on the appraisal district's record. <input type="checkbox"/> Incorrect damage assessment rating for a property qualified for a temporary disaster exemption. </td> </tr> </table>	<input type="checkbox"/> Incorrect appraised (market) value. <input type="checkbox"/> Value is unequal compared with other properties. <input type="checkbox"/> Property should not be taxed in _____ <i>(name of taxing unit)</i> <input type="checkbox"/> Failure to send required notice. _____ <i>(type)</i> <input type="checkbox"/> Other: _____ <input type="checkbox"/> Incorrect appraised or market value of land under special appraisal for ag-use, open-space or other special appraisal. <input type="checkbox"/> Temporary disaster damage exemption was denied or modified.	<input type="checkbox"/> Exemption was denied, modified or cancelled. <input type="checkbox"/> Change in use of land appraised as ag-use, open-space, or timber land. <input type="checkbox"/> Ag-use, open-space or other special appraisal was denied, modified or cancelled. <input type="checkbox"/> Owner's name is incorrect. <input type="checkbox"/> Property description is incorrect. <input type="checkbox"/> Property is not located in this appraisal district or otherwise should not be included on the appraisal district's record. <input type="checkbox"/> Incorrect damage assessment rating for a property qualified for a temporary disaster exemption.				
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SECTION 4: Additional facts	Provide facts that may help resolve this protest: _____ _____ _____ What do you think your property's value is? (<i>Optional</i>) _____						
SECTION 5: Hearing Type	A property owner does not waive the right to appear in person at a protest hearing by submitting an affidavit to the ARB or by electing to appear by telephone conference call. I intend to appear in the ARB hearing scheduled for my protest in the following manner (Check only one box): <input type="checkbox"/> By telephone conference call and will submit evidence with a written affidavit delivered to the ARB before the hearing begins**. (May use Comptroller Form 50-283, Property Owner Affidavit of Evidence) <input type="checkbox"/> On written affidavit submitted with evidence and delivered to the ARB before the hearing begins						
SECTION 6: Check to receive ARB hearing procedures	I request my notice of hearing to be delivered by (check one box only): <input type="checkbox"/> First Class US Mail (default) <input type="checkbox"/> Certified mail and agree to pay the cost (if applicable) <input type="checkbox"/> Email to the electronic address I provided in Section 1 of this form If a protest goes to a hearing, the ARB automatically sends each party a copy of the ARB's hearing procedures. I want the ARB to send me a copy of its hearing procedures [] Yes [] No						
SECTION 7: Name and Signature	<table style="width:100%; border:none;"> <tr> <td style="width: 70%;"> <input type="checkbox"/> Property Owner <input type="checkbox"/> Property Owner's Agent <input type="checkbox"/> Other _____ </td> <td style="width: 30%; vertical-align: top;">Date</td> </tr> <tr> <td>→ Print Name _____</td> <td></td> </tr> <tr> <td>→ Signature _____</td> <td></td> </tr> </table>	<input type="checkbox"/> Property Owner <input type="checkbox"/> Property Owner's Agent <input type="checkbox"/> Other _____	Date	→ Print Name _____		→ Signature _____	
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→ Signature _____							



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*An email address of a member of the public could be confidential under Government Code Section 552.137; however, by including the email address on this form, you are affirmatively consenting to its release under the Public Information Act.
 **If you decide later to appear by telephone conference call, you must provide written notice to the ARB at least 10 days before the hearing date. You are responsible for providing access to the call to any person(s) you wish to invite to participate in the hearing.