Form TRAR 5327 [rev 08-2018]

TOWN OF RAMAPO

237 Route 59
Suffern, New York 10901
(845) 357-5100 Fax: (845) 369-6945

Notice: This application must be filed in the Assessor's Office on or before - but not later – than March 15th

REQUEST FOR ASSESSMENT REVIEW
(ASSESSMENT YEAR 2026)

Name: _____ Date: _____

a. Are you the homeowner? Yes ☐ No ☐

If No, please state your name and relationship: _____

Parcel ID#: _____ Village: _____

Property Address _____

_____

Contact Phone (Day): _____

Contact Phone (Eve): _____ Contact email: _____ @ _____

This informal request for appraisal review is your opportunity to have your property assessment reviewed prior to the 2026 established assessment roll. Your comparables should be recent sales that exhibit similar amenities as your property. Note that the valuation date, which is the date established for the assessment cycle, is ***July 1st 2025***. The information that is requested by the following check boxes will greatly assist our office.

Check those that apply:

☐	Property has been recently purchased:	**Price:**	_____	**Date**	_____
☐	Property has been listed for sale:	**Price:**	_____	**Date**	_____
☐	Property has been recently appraised:	**Price:**	_____	**Date**	_____
☐	Property has recent Broker price opinion or CMA:	**Price:**	_____	**Date**	_____
☐	Recently sold properties that support your value estimate. ***(The typical appraisal indicates three sales)***				

Address of Comparable Property:

1)	_____	**Price:**	_____	**Date**	_____
2)	_____	**Price:**	_____	**Date**	_____
3)	_____	**Price:**	_____	**Date**	_____

I have attached recently sold properties similar to mine. **I am aware that for the 2026 Assessment Roll, the Grievance Period for this year is May 1st through Tuesday, May 26, 2026.**

_____
SIGNATURE OF APPLICANT

PLEASE NOTE*

IF YOU DO NOT HEAR FROM THIS OFFICE BY MAY 1ST, PLEASE REMEMBER IT IS YOUR RESPONSIBILITY TO FILE A GRIEVANCE COMPLAINT FORM (RP-524) BEGINNING MAY 1 AND ENDING THE 4TH TUESDAY IN MAY OF ANY GIVEN YEAR.