



# ASSESSMENT REVIEW CONSULTANTS, LLC

Property Tax Specialists With 25 Years Experience

**Residential & Commercial Properties**

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«ID»

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## AUTHORIZATION TO FILE A PROPERTY TAX APPEAL

Please fill out below and return to ARC via mail, fax or e-mail.

I authorize **Assessment Review Consultants, LLC (ARC)** to process my assessment reduction in any application, petition for filing in the **2017** calendar year (if filed in a Village/City/Town) as my sole agent in any property tax proceedings before any applicable:

- City/ Village/Town/County Representative, Board of Assessment Review or Assessment Review Commission and any Small Claims Assessment Review or Article 7 Judicial appeal filed in New York State Supreme Court,
- Municipality to negotiate as my agent any reductions/refunds, pursuant to my rights guaranteed by New York State Real Property Tax Law.

Furthermore, by signing below, I certify the following:

**Eligibility:** That I am: 1) a person named in the **County Clerk** records as a homeowner, or that person's authorized agent; or 2) a person who has contracted to buy the home; 3) the estate of a deceased homeowner and eligible under law to apply for a tax assessment reduction. If you are not in any of these categories, you are not eligible and should not sign this agreement.

**Affiliations:** I understand that Assessment Review Consultants, LLC is not affiliated with any governmental agency.

**Prior Assessment Reduction:** I understand that I may not sign this agreement, if my 2016 assessment was reduced and has remained unchanged.

**Services:** I understand that I am not required by law to use a tax reduction service in order to file for and/or receive a reduction. I also understand that I may cancel this agreement, in writing, without harm or obligation within 5 days. By signing, I agree to have **ARC** to prepare and file a Grievance or Complaint to the Administrative agency, file a Small Claims Assessment Review Petition or Article 7 Judicial appeal in Supreme Court and if necessary to appear on my behalf at a Court proceeding or negotiate a settlement for me. **ARC** is authorized to negotiate as my agent any municipality refund check, minus any fees due and forward the balance to me. **ARC** will make reasonable efforts to communicate the terms of any offer of settlement made by the municipality during the course of the assessment review proceeding as required by law.

**Fee:** I agree to pay **ARC** a **reduced fee of 40 %** of the reduction and tax savings /refund obtained from the appeal, exclusive of any tax exemptions, within 30 days of the notification of the assessment reduction. I understand I will be responsible for this fee even if I move or sell the property. **Upon request, I also agree to pay a \$30 state law filing fee** for each Small Claims Assessment Review (SCAR) appeal filed. The tax savings and reduction are calculated by multiplying the assessment reduction by the applicable tax rate prior to exemptions. If I default on said payment, I agree to pay 1% interest per month and if necessary reasonable attorney fees and court costs for any collection action.

Signature of any Owner
Print Owner's Name
Address
City, State & Zip

Date
Phone Number
E-mail Address - <b>PRINT CLEARLY</b>
Section / Block / Lot