LINCOLN COUNTY BUSINESS PERSONAL PROPERTY APPEAL FORM

Name: ____________________________ Date: ____________________________
Address: ____________________________ Account #: ____________________________

Tax Year: ____________________________

G.S 105-283 request that all personal property be appraised at the true value in money as of January 1.
Please enter the following data:
Tax Value: ____________________________ Taxpayer’s Opinion of Value: ____________________________

Description of the property being appealed: __________________________________________________________

_______________________________________________________________________________________________

(You may attach an itemized list)

What is being appealed? (Please check one or all)
☐ Property Tax Value ☐ Property Classification ☐ Penalty
☐ Other: _________________________________________________________
(Please Specify)

Please state factors to be considered in the valuation of this business personal property:
_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Supporting information submitted by owner:
☐ Photos ☐ Purchase Bill of Sale ☐ Official Appraisal
☐ Depreciation Schedule ☐ Advertisements for similar property ☐ Other

☐ Other

This form must be returned with 30 days of the billing date shown on your bill to: Lincoln County Tax
Department, 100 East Main Street, Lincolnton, NC 28092 or we will assume that you do not wish to proceed and
your appeal will be automatically dismissed.

A review of your personal property may result in your assessment being: Reduced / Increased / No Change

Taxpayer’s Signature ____________________________ Phone # ____________________________

TAX DEPARTMENT USE ONLY

Recommended Value: ____________________________ No Change: ____________________________

Recommended by: ____________________________ Date: ____________________________