WATERCRAFT APPEAL FORM

Office of the Henderson County Assessor
200 North Grove Street Suite 102
Hendersonville, NC 28792
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www.hendersoncountync.org/ca

County Assessor
Stan C. Duncan

Administrative Assistant II
Lisa Obermiller

Owner’s Name

Mailing Address

City ___________________________ State ____________ Zip ________________

Physical Location of Watercraft ____________________________________________

Year____ Make____________ Model____________ Hull ID # ________________

Condition of Watercraft     [ ] Poor     [ ] Fair     [ ] Good     [ ] New

Purchase Date________________ Purchase Price________________ Did Purchase Include Trailer ______

Was Watercraft Purchased     [ ] New     [ ] Used

Type of Watercraft:     [ ] Out-Board   [ ] In-Board     [ ] Pontoon     [ ] Sail Boat     [ ] Canoe     [ ] Jon Boat
[ ] Personal Watercraft     [ ] Other (Explain) _______________________________________________________________________

Motor 1 Make____ Year_____ HP ______ Serial # ______ Model______ Purchased with Boat ______
Motor 2 Make____ Year_____ HP ______ Serial # ______ Model______ Purchased with Boat ______
Motor 3 Make____ Year_____ HP ______ Serial # ______ Model______ Purchased with Boat ______

Henderson County’s Appraised Value as of January 1, 2015__________________________

Owner's Opinion of Market Value as of January 1, 2015__________________________

Owners' Opinion of Value Is Based On The Following Facts:

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

Owner’s Signature __________________________ Date __________ Day Phone __________

Information to support your opinion of value is essential. Please attach copies of any appraisals or other pertinent information.

FOR OFFICE USE ONLY

Tax Year_________ Year For_________ Abstract Number__________________________

Date of Tax Bill _____________ Date Appeal Received _____________ Timely Appeal ______

Application Processed By__________________ Physically Inspected By__________________ Date________