

AIRCRAFT APPEAL FORM

Office of the Henderson County Assessor
200 North Grove Street Suite 102
Hendersonville, NC 28792
Phone (828)697 - 4870 Fax (828)697 - 4578
www.hendersoncountync.org/ca

Tax Administrator
Darlene Burgess

Administrative Assistant II
Lisa Obermiller

Owner's Name _____

Mailing Address _____

City _____ State _____ Zip _____

Physical Location of Aircraft _____

Serial Number _____ N Number _____

Year _____ Make _____ Model _____

Condition of Aircraft Poor Fair Good New

Hours on Engine as of January 1, 2016 _____

Purchase Date _____ Purchase Price _____

Was Aircraft Purchased New Used

Henderson County's Appraised Value as of January 1, 2016 _____

Owner's Opinion of Market Value as of January 1, 2016 _____

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 _____