Grievance Appeal FormTown of Canaan

All Grievances must be in writing. This form is provided for your convenience. Return the form to the Canaan Listers Office at P.O. Box 159, Canaan, Vermont, 05903. Listers Office phone: 802-266-3370. Email to: canaanlisters@gmail.com

Property Owner(s):		
Owner Address:		
Parcel ID: Pro	perty Location:	
Email Address:	Phone:	
Contact Person (if different):	Phone:	
Type of Property: Residential Commercial	☐ Condo ☐ Apartmen	t 🔲 Other
Assessed Value:	Estimate of Value:	
Reason for Grievance:	,	
Comparable Properties (Properties you believe ar	e similar to your property)	:
Parcel ID Owner 1)	Location	Value
2)		
3)		
		of your proporty is correct
When preparing for your appeal you should ma Next you should consider recent arms length sale		
Date:		
Signature of Owner(s):		<u> </u>

Note: If you are representing the owner you must include a letter of representation signed by the owner.