WITHDRAWAL OF APPLICATIONS
FOR CORRECTION OF ASSESSMENT

List all parcels covered by the withdrawn application:

Section	Block	Lot	(☑if grouping)	Nassau County application #	CA#	from unit	to unit
					(this information for condo's only)		
_____	_____	_____	☐	_____	_____	_____	_____
_____	_____	_____	☐	_____	_____	_____	_____
_____	_____	_____	☐	_____	_____	_____	_____
_____	_____	_____	☐	_____	_____	_____	_____

Applicant:

Name _____ Relationship to property _____

Address _____

Telephone _____ Fax _____ E-mail _____

I am the applicant or the representative who filed the applications described above. I withdraw the applications as of the date of their filing and understand that a withdrawn application may not serve as the prerequisite for a Small Claims Assessment Review proceeding or other judicial proceeding, including proceedings that have been commenced prior to the filing of this withdrawal.

_____ _____

Date Signature of applicant

If you have questions about this form call the Assessment Review Commission at 516-571-3214. For information on the Assessment Review Commission visit our website at **www.NassauCountyNY.gov/arc**.