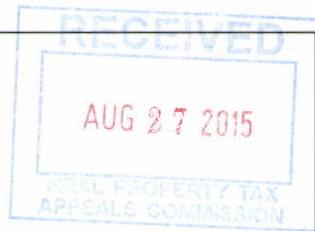


**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: Georgetown Ct Condo LLC *Square: 1218 *Suffix: _____ *Lot: 2049

*Property Address: 3251 Prospect St *Tax Class _____ *Neighborhood Code _____
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9731 E-mail: jeremy.chitlick@altusgroup.com

* Required information

Assessed Value of Tax Years

| Last Year 2015 | Proposed TY 2016 | First Level Assessment Appeal Decision |
|----------------------------|---------------------|--|
| Land \$ <u>257,070</u> | \$ <u>423,230</u> | \$ <u>423,230</u> |
| Building \$ <u>756,980</u> | \$ <u>696,990</u> | \$ <u>696,990</u> |
| Total \$ <u>1,014,050</u> | \$ <u>1,120,220</u> | \$ <u>1,120,220</u> |

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

| | |
|---|---|
| <input checked="" type="checkbox"/> Estimated Market Value | Examples: recent written appraisal; recent settlement statement; property insurance documents |
| <input checked="" type="checkbox"/> Equalization | Example: a listing of properties that you consider to be comparable to your property. |
| <input type="checkbox"/> Classification | Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight |
| <input type="checkbox"/> Property Damage or Condition | Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged. |
| <input type="checkbox"/> Disputed Property Record | Explain: |

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 4,730,346 (Combined)

Please state the justification for your appeal. (Attach additional or supporting documents.)

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

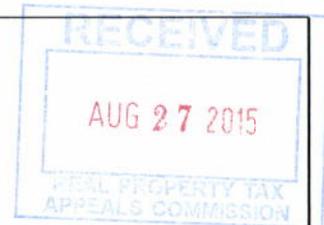
I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief. Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Owner/Agent* Print Name: Altus Group US Inc.
Signature: _____
Date (mm/dd/yyyy): 08/21/2015
Mailing Address: 910 Ridgebrook Rd, Suite 200
City: Sparks State: MD Zip: 21152
Phone: 703-245-9729 Email: jeremy.chitlick@altusgroup.com

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: Georgetown Ct Condo LLC *Square: 1218 *Suffix: _____ *Lot: 2048

*Property Address: 3251 Prospect St *Tax Class _____ *Neighborhood Code _____
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9731 E-mail: jeremy.chitlick@altusgroup.com

* Required information

Assessed Value of Tax Years

| | Last Year 2015 | Proposed TY 2016 | First Level Assessment Appeal Decision |
|----------|---------------------|---------------------|--|
| Land | \$ <u>286,120</u> | \$ <u>455,400</u> | \$ <u>455,400</u> |
| Building | \$ <u>829,230</u> | \$ <u>763,510</u> | \$ <u>763,510</u> |
| Total | \$ <u>1,115,350</u> | \$ <u>1,218,910</u> | \$ <u>1,218,910</u> |

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

| | |
|---|---|
| <input checked="" type="checkbox"/> Estimated Market Value | Examples: recent written appraisal; recent settlement statement; property insurance documents |
| <input checked="" type="checkbox"/> Equalization | Example: a listing of properties that you consider to be comparable to your property. |
| <input type="checkbox"/> Classification | Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight |
| <input type="checkbox"/> Property Damage or Condition | Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged. |
| <input type="checkbox"/> Disputed Property Record | Explain: _____ |

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 4,730,346 (Combine)

Please state the justification for your appeal. (Attach additional or supporting documents.)

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

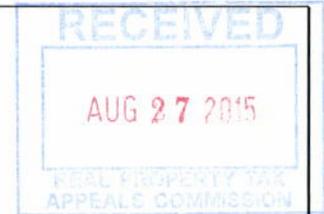
I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief. Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Owner/Agent* Print Name: Altus Group US Inc.
Signature: _____
Date (mm/dd/yyyy): 08/21/2015
Mailing Address: 910 Ridgebrook Rd, Suite 200
City: Sparks State: MD Zip: 21152
Phone: 703-245-9729 Email: jeremy.chitlick@altusgroup.com

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: Georgetown Ct Condo LLC *Square: 1218 *Suffix: _____ *Lot: 2047

*Property Address: 3251 Prospect St *Tax Class _____ *Neighborhood Code _____
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9731 E-mail: jeremy.chitlick@altusgroup.com

* Required information

Assessed Value of Tax Years

| | Last Year 2015 | Proposed TY 2016 | First Level Assessment Appeal Decision |
|----------|---------------------|---------------------|--|
| Land | \$ <u>286,120</u> | \$ <u>455,400</u> | \$ <u>455,400</u> |
| Building | \$ <u>829,230</u> | \$ <u>763,510</u> | \$ <u>763,510</u> |
| Total | \$ <u>1,115,350</u> | \$ <u>1,218,910</u> | \$ <u>1,218,910</u> |

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

| | |
|---|---|
| <input checked="" type="checkbox"/> Estimated Market Value | Examples: recent written appraisal; recent settlement statement; property insurance documents |
| <input checked="" type="checkbox"/> Equalization | Example: a listing of properties that you consider to be comparable to your property. |
| <input type="checkbox"/> Classification | Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight |
| <input type="checkbox"/> Property Damage or Condition | Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged. |
| <input type="checkbox"/> Disputed Property Record | Explain: _____ |

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 4,730,346 (Combined)

Please state the justification for your appeal. (Attach additional or supporting documents.)

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

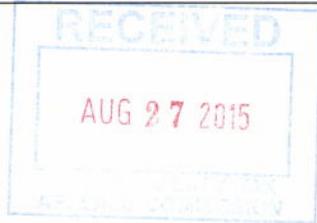
I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief: Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Owner/Agent* Print Name: Altus Group US Inc.
Signature: _____
Date (mm/dd/yyyy): 08/21/2015
Mailing Address: 910 Ridgebrook Rd, Suite 200
City: Sparks State: MD Zip: 21152
Phone: 703-245-9729 Email: jeremy.chitlick@altusgroup.com

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: Georgetown Ct Condo LLC *Square: 1218 *Suffix: _____ *Lot: 2044

*Property Address: 3251 Prospect St *Tax Class _____ *Neighborhood Code _____
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9731 E-mail: jeremy.chitlik@altusgroup.com

* Required information

Assessed Value of Tax Years

| | Last Year 2015 | Proposed TY 2016 | First Level Assessment Appeal Decision |
|----------|-------------------|-------------------|--|
| Land | \$ <u>122,200</u> | \$ <u>245,280</u> | \$ <u>245,280</u> |
| Building | \$ <u>402,900</u> | \$ <u>370,980</u> | \$ <u>370,980</u> |
| Total | \$ <u>525,100</u> | \$ <u>616,260</u> | \$ <u>616,260</u> |

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

| | |
|---|---|
| <input checked="" type="checkbox"/> Estimated Market Value | Examples: recent written appraisal; recent settlement statement; property insurance documents |
| <input checked="" type="checkbox"/> Equalization | Example: a listing of properties that you consider to be comparable to your property. |
| <input type="checkbox"/> Classification | Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight |
| <input type="checkbox"/> Property Damage or Condition | Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged. |
| <input type="checkbox"/> Disputed Property Record | Explain: |

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 4,730,346 (Combined)

Please state the justification for your appeal. (Attach additional or supporting documents.)

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

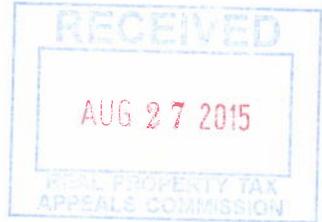
I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief. Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Owner/Agent* Print Name: Altus Group US Inc.
Signature: _____
Date (mm/dd/yyyy): 08/21/2015
Mailing Address: 910 Ridgebrook Rd, Suite 200
City: Sparks State: MD Zip: 21152
Phone: 703-245-9729 Email: jeremy.chitlik@altusgroup.com

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: Georgetown Ct Condo LLC *Square: 1218 *Suffix: _____ *Lot: 2043

*Property Address: 3251 Prospect St *Tax Class _____ *Neighborhood Code _____
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9731 E-mail: jeremy.chitlik@altusgroup.com

* Required information

Assessed Value of Tax Years

| Last Year 2015 | Proposed TY 2016 | First Level Assessment Appeal Decision |
|------------------------------|---------------------|--|
| Land \$ <u>477,710</u> | \$ <u>627,830</u> | \$ <u>627,830</u> |
| Building \$ <u>1,546,080</u> | \$ <u>1,477,230</u> | \$ <u>1,477,230</u> |
| Total \$ <u>2,023,790</u> | \$ <u>2,105,060</u> | \$ <u>2,105,060</u> |

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

| | |
|---|---|
| <input checked="" type="checkbox"/> Estimated Market Value | Examples: recent written appraisal; recent settlement statement; property insurance documents |
| <input checked="" type="checkbox"/> Equalization | Example: a listing of properties that you consider to be comparable to your property. |
| <input type="checkbox"/> Classification | Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight |
| <input type="checkbox"/> Property Damage or Condition | Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged. |
| <input type="checkbox"/> Disputed Property Record | Explain: _____ |

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 4,730,346 (Combined)

Please state the justification for your appeal. (Attach additional or supporting documents.)

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief. Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Owner/Agent* Print Name: Altus Group US Inc.
Signature: _____
Date (mm/dd/yyyy): 08/21/2015
Mailing Address: 910 Ridgebrook Rd, Suite 200
City: Sparks State: MD Zip: 21152
Phone: 703-245-9729 Email: jeremy.chitlik@altusgroup.com

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.