

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

3:39PM EDT  
DISTRICT OF COLUMBIA REAL PROPERTY  
TAX APPEALS COMMISSION (DC RPTAC)



Transaction ID: 57787092

**Real Property Assessment Appeal Form – Tax Year 2016**

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

\*Owner's Name: CARVER TERRACE LP \*Square: 4477 \*Suffix: \_\_\_\_\_ \*Lot: 0019

\*Property Address: 0900-0902 21ST NE \*Tax Class 001-RESIDENTIAL \*Neighborhood Code TRINIDAD C

Will you be appealing any other properties?  Yes  No. If Yes, please complete an appeal application for each.

\*Contact Phone Numbers: 202 470 3102 E-mail: Steve.Thompson@ryan.com

\* Required information

**Assessed Value of Tax Years**

Last Year 2015	Proposed TY 2016	First Level Assessment Appeal Decision
Land \$ <u>103,690</u>	\$ <u>103,690</u>	\$ <u>103,690</u>
Building \$ <u>1,147,210</u>	\$ <u>1,173,270</u>	\$ <u>1,173,270</u>
Total \$ <u>1,250,900</u>	\$ <u>1,276,960</u>	\$ <u>1,276,960</u>

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

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

**Property Value Information**

If your property has been privately appraised within the past 12 months prior to January 1<sup>st</sup> please attach a copy with the appeal. Purchase price of the property \$ \_\_\_\_\_ Date of Purchase \_\_\_\_\_ Your estimate of value \$ \_\_\_\_\_

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

Please see attached for the justification of our appeal.

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 4<sup>th</sup> Street, NW  
Suite 360 North  
Washington, D.C. 20001  
(202) 727-6860

Owner/Agent\* Print Name: Ryan, LLC - Steve Thompson

Signature: [Signature]

Date (mm/dd/yyyy): 8/19/15

Mailing Address: P.O. Box 34472

City: Washington State: DC Zip: 20043

Phone: 202.470.3102 Email: Steve.Thompson@ryan.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**



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\*Owner's Name: CARVER TERRACE LP \*Square: 4477 \*Suffix: \_\_\_\_\_ \*Lot: 0034

\*Property Address: 1905 MARYLAND AVE NE \*Tax Class 001-RESIDENTIAL \*Neighborhood Code TRINIDAD C

Will you be appealing any other properties?  Yes  No. If Yes, please complete an appeal application for each.

\*Contact Phone Numbers: 202 470 3102 E-mail: Steve.Thompson@ryan.com

\* Required information

**Assessed Value of Tax Years**

Last Year <u>2015</u>	Proposed TY <u>2016</u>	First Level Assessment Appeal Decision
Land \$ <u>51,830</u>	\$ <u>51,830</u>	\$ <u>51,830</u>
Building \$ <u>605,370</u>	\$ <u>619,060</u>	\$ <u>619,060</u>
Total \$ <u>657,200</u>	\$ <u>670,890</u>	\$ <u>670,890</u>

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

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

**Property Value Information**

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(Contact Phone Number)

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(202) 727-6860

Owner/Agent\* Print Name: Ryan, LLC - Steve Thompson  
Signature: *Steve Thompson*  
Date (mm/dd/yyyy): 8/19/15  
Mailing Address: P.O. Box 34472  
City: Washington State: DC Zip: 20043  
Phone: 202.470.3102 Email: Steve.Thompson@ryan.com

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\*Owner's Name: CARVER TERRACE LP \*Square: 4477 \*Suffix: \_\_\_\_\_ \*Lot: 0035

\*Property Address: 1907-1911 MARYLAND AV NE \*Tax Class 001-RESIDENTIAL \*Neighborhood Code TRINIDAD C

Will you be appealing any other properties?  Yes  No, If Yes, please complete an appeal application for each.

\*Contact Phone Numbers: 202 470 3102 E-mail: Steve.Thompson@ryan.com

\* Required information

**Assessed Value of Tax Years**

Last Year <u>2015</u>	Proposed TY <u>2016</u>	First Level Assessment Appeal Decision
Land \$ <u>154,910</u>	\$ <u>154,910</u>	\$ <u>154,910</u>
Building \$ <u>1,648,890</u>	\$ <u>1,685,890</u>	\$ <u>1,685,890</u>
Total \$ <u>1,803,800</u>	\$ <u>1,840,800</u>	\$ <u>1,840,800</u>

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

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<input checked="" type="checkbox"/> <b>Property Damage or Condition</b>	Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged.
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(Contact Phone Number)

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Date (mm/dd/yyyy): 8/19/15  
Mailing Address: P.O. Box 34472  
City: Washington State: DC Zip: 20043  
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\*Owner's Name: CARVER TERRACE LP \*Square: 4477 \*Suffix: \_\_\_\_\_ \*Lot: 0036

\*Property Address: 2001-2007 MARYLAND AV NE \*Tax Class 001-RESIDENTIAL \*Neighborhood Code TRINIDAD C  
Will you be appealing any other properties?  Yes  No, If Yes, please complete an appeal application for each.

\*Contact Phone Numbers: 202 470 3102 E-mail: Steve.Thompson@ryan.com

\* Required information

**Assessed Value of Tax Years**

Last Year <u>2015</u>	Proposed TY <u>2016</u>	First Level Assessment Appeal Decision
Land \$ <u>205,860</u>	\$ <u>205,860</u>	\$ <u>205,860</u>
Building \$ <u>2,245,340</u>	\$ <u>2,296,470</u>	\$ <u>2,296,470</u>
Total \$ <u>2,451,200</u>	\$ <u>2,502,330</u>	\$ <u>2,502,330</u>

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