

BOARD OF ASSESSMENT APPEALS:

**Appeal amount \$ 156.00 payable to Prothonotary of Lebanon County (cash,
check or money order)**

**(If you had one (1) hearing for multiple properties – same day, you should list info on one
appeal form) \$156.00**

**(If you had more than one hearing-separate days for multiple properties, appeal form must be
filled out for each different day) \$156.00 each**

**Please fill out the form (Original) and bring the following copies along with the Original to the
Prothonotary's Office. Copies: Appellant w/self-addressed stamped envelope for return hearing
date scheduled Board of Assessment Office**

Please also print the following Civil Cover Sheet, fill out for filing also.

IN THE COURT OF COMMON PLEAS OF LEBANON COUNTY, PENNSYLVANIA

CIVIL ACTION – LAW

vs.
LEBANON COUNTY BOARD OF
ASSESSMENT APPEALS
(Board of Assessment Revision/Auxiliary Board)

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:
:

ACTION No

NOTICE OF APPEAL FROM ASSESSED VALUATION OF REAL PROPERTY

AND NOW, comes the Appellant(s), _____
_____ appeals the
decision of the Lebanon County Board of Assessment Appeals as follows:

1. _____ is the owner(s) of the property
known as: _____
_____ Lebanon County, Pennsylvania.
2. The property located at _____
_____ was assessed by the tax
assessment office of Lebanon County as follows: total \$ _____.

3. After an appeal was filed by the Appellant(s), a hearing was held on _____
_____, before the Lebanon County Board of Assessment Appeals and the following assessment was imposed: Total \$_____.

4. Appellant(s) believe the assessment does not represent the fair market value of the property and appeal the decision of the Lebanon County Board of Assessment Appeals applicable to:
_____Lebanon County, Pennsylvania. A copy of the assessment valuation as determined by the County Board of Assessment Appeals is attached hereto as Exhibit "A".

5. This Appeal is filed pursuant to 72 Pa C.S.A. 5020-518.1 et seq. WHEREFORE, Appellant(s) request your Honorable Court to set a time and place for a hearing on the appeal of the Appellant(s).

Respectfully submitted, Signature:

Signature:

Address: _____

Phone: _____

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ACTION No

ORDER

AND NOW, to wit, this _____ day of _____, 2012, it is hereby ORDERED that a hearing will be held on the Appeal filed in the above matter before the Honorable _____.

BY THE COURT,

J.

cc: Appellant(s)
Board of Assessment Office Court
Administration (scheduling order only)

_____ : Court of Common Pleas
_____ : Lebanon County, Pennsylvania
vs. : Civil Division
_____ : ACTION No

LEBANON COUNTY BOARD OF :
ASSESSMENT APPEALS :
(Board of Assessment Revision/Auxiliary Board)

WRIT OF CERTIORARI

To: Lebanon County Board of Assessment Appeals (Board of Assessment Revision/Auxiliary Board)

YOU ARE HEREBY NOTIFIED THAT _____

_____ HAS
filed the attached Appeal in THE COURT OF COMMON PLEAS OF LEBANON COUNTY on

_____ and you are hereby commanded to file within
Twenty (20) days after receipt of this notice and writ, the entire record in the matter of

_____)
certifying the same to the court in accordance with Section 1008 of the Pennsylvania Municipal
Planning Code.

Date _____ (Prothonotary)

By: _____
(Deputy)

.....
For Lebanon County Board of Assessment Appeals use only

TO THE COURT OF COMMON PLEAS OF LEBANON COUNTY:

The record aforementioned, with all things touching the same so full and Entire as before this
board they remain, I hereby respectfully certify and send, as within I am commanded together
with this writ.

PLEASE RETURN COPY OF WRIT SIGNED WITH RECORD

Supreme Court of Pennsylvania

Court of Common Pleas Civil Cover Sheet



County _____

For Prothonotary Use Only:

Docket No: _____

The information collected on this form is used solely for court administration purposes. This form does not supplement or replace the filing and service of pleadings or other papers as required by law or rules of court.

SECTION A

Commencement of Action:

- Complaint Writ of Summons Petition
 Transfer from Another Jurisdiction Declaration of Taking

Lead Plaintiff's Name: _____

Lead Defendant's Name: _____

Are money damages requested? Yes No

Dollar Amount Requested: within arbitration limits
(check one) outside arbitration limits

Is this a *Class Action Suit*? Yes No

Is this an *MDJ Appeal*? Yes No

Name of Plaintiff/Appellant's Attorney: _____

Check here if you have no attorney (are a Self-Represented [Pro Se] Litigant)

SECTION B

Nature of the Case: Place an "X" to the left of the **ONE** case category that most accurately describes your **PRIMARY CASE**. If you are making more than one type of claim, check the one that you consider most important.

TORT (do not include Mass Tort)

- Intentional
 Malicious Prosecution
 Motor Vehicle
 Nuisance
 Premises Liability
 Product Liability (does not include mass tort)
 Slander/Libel/ Defamation
 Other: _____

CONTRACT (do not include Judgments)

- Buyer Plaintiff
 Debt Collection: Credit Card
 Debt Collection: Other

 Employment Dispute: Discrimination
 Employment Dispute: Other

 Other: _____

CIVIL APPEALS

- Administrative Agencies
 Board of Assessment
 Board of Elections
 Dept. of Transportation
 Statutory Appeal: Other

Zoning Board

Other: _____

MASS TORT

- Asbestos
 Tobacco
 Toxic Tort - DES
 Toxic Tort - Implant
 Toxic Waste
 Other: _____

REAL PROPERTY

- Ejectment
 Eminent Domain/Condemnation
 Ground Rent
 Landlord/Tenant Dispute
 Mortgage Foreclosure: Residential
 Mortgage Foreclosure: Commercial
 Partition
 Quiet Title
 Other: _____

MISCELLANEOUS

- Common Law/Statutory Arbitration
 Declaratory Judgment
 Mandamus
 Non-Domestic Relations Restraining Order
 Quo Warranto
 Replevin
 Other: _____

PROFESSIONAL LIABILITY

- Dental
 Legal
 Medical
 Other Professional: _____

