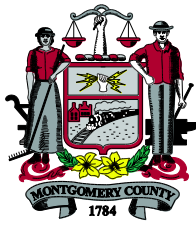


**MONTGOMERY COUNTY  
BOARD OF COMMISSIONERS**

VALERIE A. ARKOOSH, MD, MPH, CHAIR  
KENNETH E. LAWRENCE, JR., VICE CHAIR  
JOSEPH C. GALE, COMMISSIONER



**BOARD OF ASSESSMENT APPEALS**

MONTGOMERY COUNTY COURTHOUSE • PO Box 311  
NORRISTOWN, PA 19404-0311  
610-278-3761

FAX: 610-278-3560 • TDD: 610-631-1211  
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JOSEPH S. FOSTER, CHAIRMAN  
PATRICK J. COSTELLO, BOARD MEMBER  
ROBERT L. ADSHEAD, BOARD MEMBER

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**HOMESTEAD/FARMSTEAD REMOVAL FORM**

**Date:** \_\_\_\_\_ **Parcel #:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

**Municipality:** \_\_\_\_\_ **School District:** \_\_\_\_\_

**Property to be Removed from Homestead/Farmstead:** \_\_\_\_\_

\_\_\_\_\_  
**New Primary Residence:** \_\_\_\_\_

\_\_\_\_\_  
**Billing Address for Taxes:** \_\_\_\_\_

\_\_\_\_\_  
**Address for Confirmation Letter:** \_\_\_\_\_

\_\_\_\_\_  
**I, the above mentioned owner of record for the above-listed property, am requesting that the Homestead/Farmstead be removed from my property for the following reason:**

\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_