

**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

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JOSEPH S. FOSTER, CHAIRMAN
PATRICK J. COSTELLO, BOARD MEMBER
ROBERT L. ADSHEAD, BOARD MEMBER

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:** _____