

FEE ASSESSMENT BILLING APPEAL - PARCEL

Deadline to file is May 1

Complete this form if you are appealing the number of units billed for your property parcel(s). Please note that there is no appeal for the per unit fee or an option to "opt-out". The fee assessment is a mandatory annual charge and the only item that can be appealed is the quantity of billable units. Please submit a separate appeal form if you have multiple property parcel ID numbers.

Property Owner Name:		
County Tax Parcel Number:		
Property Address(es)		
Owners Mailing Address:		
Email Address:		
Phone Number:		
Account Number (on invoice):		
Basis of the Appeal:		
Please complete the following informa	ation related to the units	billed versus your appeal billable units:
Occupancy Class	Billed Unit(s)	Appeal Unit(s)
Standard Dwelling Uni	it(s)	
Assisted Living Unit(s)		
Resident Student(s)		
Acute Care Nursing Be	ed(s)	
Event Venue Occupan	CV	

The burden of proof is the appellant's responsibility to show that the assessment is incorrect. Please include any supporting documentation to defend your position as to why the appealed parcel was billed incorrectly. Suggested documentation:

<u>Standard Dwelling Unit</u> – trash, water and/or sewer bills for the parcel showing the number of billed units; pictures of the residential building; occupancy permits from your Township/Borough (Note: A standard dwelling unit is a single-family home, duplex, townhouse, or apartment). Appeals in this category are subject to inspection by representatives of the Authority.

<u>Assisted Living Unit</u> – a copy of your occupancy license from the Department of Health and Department of Labor & Industry

<u>Resident Student</u> – attestation statement as to the actual residential student monthly population for the last 6 months; a list of students by dormitory for the last two semesters

<u>Acute Care Nursing Bed</u> - a copy of your occupancy license from the Department of Health and Department of Labor & Industry

<u>Event Venue Occupancy</u> – a copy of your venue occupancy permit; a signed letter from your municipality confirming the certified occupancy.

The following fees shall apply to all annual assessment appeals filed: \$10.00 for an appeal of a Standard Dwelling Unit count of less than 5 \$25.00 for an appeal of a Standard Dwelling Unit count between 5-20 \$100.00 for an appeal of a Standard Dwelling Unit count of greater than 20

\$100.00 for an appeal of all other Occupancy Classes

The Appeal Fee is refundable only if the appeal is determined to be in the appellant's favor. A check or money order should be made payable to "Municipal Emergency Services Authority of Lancaster County" and attached to the appeal form, and mailed to the address below.

Payment & Form should be returned to:

Municipal Emergency Services Authority of Lancaster County Attn: Fee Appeal 380 W Bainbridge St PO BOX 384 Elizabethtown, PA 17022

The property owner shall pay the original billed amount by the original due date. An appeal will not be reviewed until the account has been paid in full and a complete appeal form is submitted. Appeals will be determined within 60 days of receipt of a complete form and all payments satisfied. In the event the appeal is approved, a refund payment will be issued within 10 business days of the appeal determination. In the event you are not satisfied with the determination of the appeal, you will have the opportunity to present your appeal to the Municipal Emergency Services Authority Board.

certify that the information provided is true and correct.			
Property Owner Signature	 Date		