



DECISION OF THE VALUE ADJUSTMENT BOARD
CATASTROPHIC EVENT TAX REFUND
Section 197.319, Florida Statute

DR-485C
N. 01/23
Rule 12D-16.002, F.A.C.
Eff. 01/23

_____ County

The actions below were taken on your petition.

☐ These actions are a recommendation only, not final ☐ These actions are a final decision of the VAB

If you are not satisfied after you are notified of the final decision of the Value Adjustment Board (VAB), you have the right to file a lawsuit in circuit court to further contest your assessment.

Petition # _____

Parcel ID _____

Petitioner name _____

Property
address

The petitioner is: ☐ taxpayer of record ☐ taxpayer's
representative

☐ other, explain: _____

Decision Summary ☐ Denied your petition ☐ Granted your petition ☐ Granted your petition in part

Just value of the residential parcel as of
January 1 of the year the catastrophic event
occurred. \$_____

Filed by
applicant

Property appraiser
determined

VAB
determined

1. Number of days residential property was
uninhabitable

2. Postcatastrophic just value

3. Percentage change in value

Reasons for Decision

Fill-in fields will expand, or add pages as needed.

Findings of Fact

Conclusions of Law

☐ **Recommended Decision of Special Magistrate** Findings and conclusions above are recommendations.

Signature, special magistrate

Print name

Date

Signature, clerk or special representative, VAB

Print name

Date

If this is a recommended decision, the board will consider the recommended decision on _____ at _____
Address _____

If the line above is blank, the board does not yet know the date, time, and place when the recommended decision will be considered. To find the information, please call _____ or visit website _____.

☐ **Final Decision of the Value Adjustment Board**

Signature, chair, VAB

Print name

Date of decision

Signature, clerk or representative, VAB

Print name

Date mailed to parties