

**ARB****FORT BEND  
APPRAISAL REVIEW BOARD**

2801 B.F. Terry Blvd. | Rosenberg, Texas 77471-5600  
Telephone: 281-344-8623 | Fax: 281-344-8632

Dear Prospective Appraisal Review Board Member,

Your interest in becoming a Fort Bend Appraisal Review Board (ARB) member is appreciated.

The ARB is comprised of independent, private citizens, appointed by Fort Bend County's Administrative District Judge, that are authorized to resolve disputes between the property owner and the Fort Bend Central Appraisal District (FBCAD). ARB members are mandated to uphold an unbiased approach to each property under protest.

The ARB does not have any role in the appraisal of property or appraisal district operations. The ARB only has authority over protests submitted to them and must comply with the provisions of the Texas Property Tax Code and other applicable laws in determining protest outcomes.

The ARB is accepting applications from residents of Fort Bend County interested in service. Service on the ARB is not a full time, permanent position, but during hearings the members are compensated for their time and service.

ARB members serve weekdays including some evenings, and periodically on weekends, typically from May through September. ARB members are not usually scheduled on every weekday, but must be available, if needed.

Candidates for the ARB must be current residents of Fort Bend County and have resided in the Fort Bend County for at least two years. Persons who fall within certain categories listed in the ARB application form are not eligible to serve.

Applications will remain on file until the end of each calendar year. Appointments are normally made for service starting in the following January. Applicants selected as finalists will be scheduled for interviews. Applications can be obtained online at [www.fbcad.org](http://www.fbcad.org) or by contacting 281-344-8623.

Applications should be submitted to:

Fort Bend Appraisal Review Board  
2801 B. F. Terry Blvd.  
Rosenberg, Texas 77471  
Email: [applyforARB@fbcad.org](mailto:applyforARB@fbcad.org)

We appreciate your interest in serving on the Fort Bend Appraisal Review Board.

Regards,

Fort Bend ARB Chairman



# Fort Bend Appraisal Review Board Application

2801 B.F. Terry Blvd.  
Rosenberg, TX 77474  
(281) 344-8623

## Applicant Information

|   |  |                 |                         |               |          |                              |                             |
|---|--|-----------------|-------------------------|---------------|----------|------------------------------|-----------------------------|
| Last Name   |  |                 | First Name              |               |          | Middle Initial               |                             |
| Physical Street Address   |  |                 | City                    |               | Zip Code |                              |                             |
| Mailing Address   |  |                 | City                    |               | Zip Code |                              |                             |
| Daytime Phone   |  | Alternate phone |                         | Email address |          |                              |                             |
| Social Security Number  |  |                 | Driver's License Number |               |          | State                        |                             |
| Are you a current Appraisal Review Board Member eligible for reappointment? |  |                 |                         |               |          | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

## Appraisal Review Board Qualification Statement

|   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. Are you a resident of the Fort Bend County and have you resided within the district for the past 2 years?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 2. Are you currently employed by, or an officer or director of, the State Comptroller's Office, an appraisal district, or a taxing unit (county, city, school district, college district, MUD, or other special district) in any capacity?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 3. Are you currently employed by, or an officer or director of the Fort Bend Central Appraisal District?<br>If yes, please explain: _____   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 4. Are you, or any member of your family, related to a member of the Fort Bend Central Appraisal District Board of Directors?<br>If yes, please explain: _____  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 4. Are you, or any member of your family, related to a member of the Fort Bend Appraisal Review Board?<br>If yes, please explain: _____   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 6. Are you, or any member of your family, related to a member or an employee of the Fort Bend Central Appraisal District?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 7. Are you a former member of the governing body or officer of a taxing unit for which the Fort Bend Central Appraisal District appraises property?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 8. If you answered "Yes" to number 4, has it been <b>less than four years</b> since the date you ceased to be a member or officer of a taxing unit served by the Fort Bend Central Appraisal District?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 9. Have you at any time served all or part of three previous terms on the Appraisal Review Board for the Fort Bend Central Appraisal District?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 10. Are you, or a business in which you hold a substantial interest, a party to a contract with the appraisal district or with a taxing unit in the district? A substantial interest means that you and your spouse together own at least 10% of the voting stock or shares in the business, or that either of you is a partner, limited partner or officer of the business entity. | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 11. Do you or does any relative of yours within the second degree by either blood or marriage, do business in the Fort Bend Central Appraisal District as a paid property tax agent, or an appraiser who performs appraisals for use in property value proceedings?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

## Degrees of relationship:

|  |  |
|--|--|
| 1 <sup>st</sup> Degree of Consanguinity (blood)<br>Parents<br>Children<br><br>2 <sup>nd</sup> Degree by Consanguinity (blood)<br>Grandparents<br>Brothers and Sisters<br>Grandchildren | 1 <sup>st</sup> Degree by Affinity (marriage)<br>Spouse<br>Spouse's children<br>Spouse's relative listed under consanguinity<br>Stepparents<br>Stepchildren<br>2 <sup>nd</sup> Degree by Affinity (marriage)<br>Spouse's Grandparents<br>Spouse's Brothers and Sisters |
|--|--|

**Applicant Information**

|           |  |            |  |                |  |
|-----------|--|------------|--|----------------|--|
| Last Name |  | First Name |  | Middle Initial |  |
|-----------|--|------------|--|----------------|--|

**Personal Background**

|   |                              |                             |
|---|------------------------------|-----------------------------|
| 12. Have you ever been convicted of a felony, or a misdemeanor involving moral turpitude, or are you presently under indictment? If "Yes", explain the nature of the offense, date and location.<br>_____   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 13. Are you authorized to work in the United States?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 14. Do you or your spouse own an interest in property on which delinquent tax is not deferred or being paid under an installment agreement?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| 15. Use the space below to list professional society memberships, job related licenses, registration, certificates (with their numbers), and expiration dates. Provide additional comments or information that would be of assistance in considering you for this appointment.<br>_____ | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

**Languages Spoken – Indicate fluency**

|       | SPEAK                    | READ                     | WRITE                    |
|-------|--------------------------|--------------------------|--------------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Education and Training (List most recent first)**

| High School, College, Universities, Trade or Business School | City/State | Degree | Semester Hours Earned | Major Area of Study |
|--|------------|--------|-----------------------|---------------------|
|  |            |        |                       |                     |
|  |            |        |                       |                     |
|  |            |        |                       |                     |

**Work History (List most recent work history) Include paid or verifiable non-paid experience, including military service.**

From \_\_\_\_\_ To \_\_\_\_\_ Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_\_  
(month) (year) (month) (year)

Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Description of Work \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Title \_\_\_\_\_ Permission to contact? YES  NO

**In your own words, please explain why you should be considered for appointment to the Appraisal Review Board.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Activities and Honors**

Briefly list any activities you are currently or have previously been involved in.

Briefly list any designations or honors you have received.

**References (Name, Address, Phone Number, Relationship to you)**

1.

2.

3.

**Signature, Affirmation and Release**

I certify that I have made no willful misrepresentations in this application and I have not withheld information in my statements and answers to questions. I am aware that the information I have given in my application will be investigated, with my full permission and that any misrepresentations or omissions may cause my application to be rejected. I am also aware that my application is subject to the Public Information Act and may be released as a public document. I affirm that to the best of my knowledge and belief, I am not disqualified by law from accepting an appointment to the Appraisal Review Board for the Fort Bend Central Appraisal District.

I affirm that the information contained in this application and all attachments, if any, is accurate and complete to the best of my knowledge and belief. I further affirm that, to the best of my knowledge and belief, I am not disqualified by law from accepting an appointment to the ARB for the Fort Bend Central Appraisal District.

I authorize the ARB or its representatives to verify the statements I have made and to obtain any information from schools, employers, criminal justice agencies, or individuals relating to my activities. I understand that any information obtained is for official use by the ARB and may be disclosed to third parties as necessary in fulfillment of official responsibilities.

I hereby release and hold harmless any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance, or any attempt to comply with this authorization.

Name \_\_\_\_\_ Signature \_\_\_\_\_  
(please print)

Date \_\_\_\_\_

*Federal law prohibits the employment of unauthorized persons. If hired, all persons will be required to provide documents that prove identity and employment authorization within three days of hire or in accordance with the regulations established by law.*

# Eligibility Requirements

***To be eligible for appointment to the Appraisal Review Board an applicant must be a current resident of Fort Bend County and must have resided in Fort Bend County for at least the last two years.***

Individuals who fall into any of the following categories are ineligible:

- If currently employed by the State Comptroller of Public Accounts, or are a member of a governing body, an officer, or a full or part-time employee of a county, city, school district, community college district, MUD, or any other entity supported by local property taxes. Former governing body members or officers of a taxing unit served by FBCAD are ineligible for four full years from the date they ceased to serve in that capacity.
- Persons who own an interest in property on which delinquent taxes are due, regardless of where in Texas that property may be located, unless the tax is deferred or being paid under an installment agreement.
- Anyone who personally, or whose spouse personally, has a contract with a local government or an appraisal district. The same restriction applies if the person, or his or her spouse, owns a 10% or greater interest in a business that contracts with a local government or taxing unit.
- Persons who at any time have appeared before the ARB for compensation as a tax consultant, accountant, appraiser, or representative of a property owner.
- Anyone who has served on the appraisal review board for all or part of three previous two-year terms, and any individual who has ever been employed by FBCAD or has ever served as a member of the district's board of directors.
- Also, individuals are not considered if they are presently under indictment or have previously been convicted of a felony or a misdemeanor involving moral turpitude.