## **OBJECTION FORM FOR REAL PROPERTY ASSESSMENT**

Section 70.47(7)(a), Wis. Statutes states "No person shall be allowed in any action or proceedings to question the amount or valuation of property unless such written objection has been filed and such person in good faith presented evidence to such board in support of such objection and made full disclosure before said board..."

Note: The Board of Review can hear only sworn oral testimony regarding the value of the property. It cannot hear protests regarding the amount of property taxes or questions of exemption. The best evidence of the value of your property is a recent arm's-length sale of your property. The next best evidence is recent arm's-length sales of comparable property. If there are no sales of your property or comparable property, you should present other evidence that indicates the value of your property. This would include cost, income, appraisals, amount of insurance, and sales of like property.

| Property Owner  |  |   |                                    | Agent (if applicable)                     |          |                   |                               |  |
|---|--|---|------------------------------------|---|----------|-------------------|-------------------------------|--|
| Owner's Mailing Address   |  |   |                                    | Agent's Mailing Address                   |          |                   |                               |  |
| Owner's Telephone Number  |  |   |                                    | Agent's Telephone Number                  |          |                   |                               |  |
| Pleas   | e pro  | ovide the following information on  | the property and the assessment    | to which you are objecting. (/            | Attach a | additional s      | heets, if necessary.)         |  |
| 1.  | Pro  | Property Address  |                                    |   |          |                   |                               |  |
| 2.  | Legal Description or parcel number from the current assessment roll  |   |                                    |   |          |                   |                               |  |
| 3.  | Total Property Assessments   |   |                                    |   |          |                   |                               |  |
| Please explain why you think the above assessed value is incorrect. |  |   |                                    |   |          |                   | Mana .                        |  |
| 5.  | Plea   | ace state your eninion of the fair  | market value of the property as of | lanuary 1                                 |          |                   |                               |  |
| 6.  | Please state your opinion of the fair market value of the property as of January 1                                 |   |                                    |   |          |                   |                               |  |
|   | (b)  | Please check the method of  | Method of Acquisition              | Date                                      |          | Acquisition Price |                               |  |
|   |  | acquisition of the property:  | ☐ Purchase                         | N. C. |          |                   |                               |  |
|   |  |   | ☐ Trade                            |   |          |                   |                               |  |
|   |  |   | Gift                               |   |          |                   |                               |  |
|   |  | 40  | ☐ Inheritance                      |   |          |                   |                               |  |
| 7   |  |   | ☐ Construction                     |   |          |                   | NI-                           |  |
| 7.  | <ul> <li>(a) Have you improved, remodeled, added to, or changed this property sir</li> <li>(b) Describe</li> </ul> |   |                                    |   | Yes      |                   | No                            |  |
|   | (b) Describe   |   |                                    |   |          |                   |                               |  |
|   | (d) What were the cost of the changes?   |   |                                    |   |          |                   |                               |  |
|   | (e) Does the above figure include the value of all labor, including your own?                                      |   |                                    | own?                                      | Yes      |                   | No                            |  |
| 8.  | (a) Have you listed the property for sale within the last five years?  |   |                                    |   | Yes      |                   | No                            |  |
|   | (b) If yes, when and for how long was the property listed?   |   |                                    |   |          |                   |                               |  |
|   | (c)  | What was the asking price?  |                                    |   |          |                   |                               |  |
|   | (d)  | What offers were received?  |                                    |   |          |                   |                               |  |
| 9.  | (a) Has anyone made an appraisal of this property within the last five y   |   |                                    | years?                                    | Yes      |                   | No                            |  |
|   | (b) If yes, when and for what purpose?   |   |                                    |   |          |                   |                               |  |
|   | (c) What was the appraised value?  |   |                                    |   |          |                   |                               |  |
|   | (d) How much and what type of fire insurance is carried on the property?   |   |                                    |   |          |                   |                               |  |
| 10.   | Please list all other real estate in the municipality that you own:  Assessment                                    |   |                                    |   |          |                   | Accessment                    |  |
|   | Legal Description or Parcel Number   |   |                                    |   |          | Total             |                               |  |
|   |  |   |                                    |   |          |                   |                               |  |
|   |  |   |                                    |   |          |                   |                               |  |
| 11.   |  | f you are requesting the removal of a Board of Review member, please list their name. |                                    |   |          |                   |                               |  |
| 0   |  | TE: This section does not apply in  | n tirst or second class cities.    | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1     |          | Dots              |                               |  |
| Owne  | er'S O   | r Agent's Signature   |                                    |   |          | Date              |                               |  |
| PA-115  | A (R   | . 11-02)  |                                    |   |          | Wi                | sconsin Department of Revenue |  |

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