Town of River Falls

Notice of Intent to File Objection with Board of Review

I,		, as the pro	perty owner or as agent for
			, with an address of
			hereby give notice of an
intent to file a	n objection on the assessment	for the follow	ing property:
		_, for the	_ Assessment Year in the
Town of Rive	r Falls.		
THIS	NOTICE OF INTENT IS BEI	NG FILED: (1	please mark one)
	at least 48 hours before the F	Board's first so	cheduled meeting
	during the first two hours of (please complete Section A o		rst scheduled meeting
	up to the end of the fifth day day of the session if the sessi (please complete Section B of	ion is less thar	
	THIS FORM DOES NOT RI		
-	ENT OF TIMELY FILING A NON THE PROPER FORM V.		
	(nam	*	
	(date	•	ne telephone number
	Receiv	ed by:	
	on:		

<u>Section A:</u> The Board of Review shall grant a waiver of the 48-hour notice of an intent to file a written or oral objection if a property owner who does not meet the notice requirement appears before the Board during the first two hours of the meeting, SHOWS GOOD CAUSE FOR FAILURE TO MEET THE 48-HOUR NOTICE REQUIREMENT AND FILES A WRITTEN OBJECTION. My good cause is as follows:
Section B: The Board of Review may waive all notice requirements and hear the objection even if a property owner fails to provide written or oral notice of an intent to object 48-hours before the first scheduled meeting, and fails to request a waiver of the notice requirement during the first two hours of the meeting, if the property owner appears before the Board at any time up to the end of the fifth day of the session or up to the end of the final day of the session if the session is less than five days, and FILES A WRITTEN OBJECTION AND PROVIDES EVIDENCE OF EXTRAORDINARY CIRCUMSTANCES. Proof of my extraordinary circumstances is as follows:

A WRITTEN OBJECTION ON THE PROPER FORM MUST BE PROPERLY FILED WITH THE CLERK OF THE BOARD OF REVIEW.

Objection to Real Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk written or oral notice of your intent, under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department Revenue's <u>Guide for Property Owners</u>.

Complete all sections:

Section 1: Property Owner / Agen	* If agent, submit written <u>authorization (Form PA-105)</u> with this form								
Property owner name (on changed assessment notice)			Agent name (if applicable)						
Owner mailing address			Agent mailing address						
City	State	Zip		City			State	Zip	
Owner phone Email				Owner phone	-	Email			
Section 2: Assessment Information	n and O	pini	on of Value						
Property address				Legal description	or parcel no. (on char	iged asse	ssment no	tice)	
City State Zip				-					
Assessment shown on notice – Total				Your opinion of assessed value – Total					
If this property contains non-market val	ue class	acrea		opinion of the		kdown		Full Tauald	- Value
Statutory Class			Acres	\$ Per Acre				Full Taxabl	e value
Residential total market value							-		
Commercial total market value					A 1				
Agricultural classification: # of tillable a				_	\$ acre use value				
# of pasture					\$ acre use value				
# of specialty	y acres				\$ acre use value				
Undeveloped classification # of acres	_				\$ acre @ 50% of ma				
Agricultural forest classification # of acre Forest classification # of acres	S				\$ acre @ 50% of ma				
					\$ acre @ market val	et value			
Class 7 "Other" total market value					market value	of magulativality			
Managed forest land acres				-	\$ acre @ 50% of ma				
Managed forest land acres	d Da air	6 5	-4:4-	@	\$ acre @ market val	ue			
Section 3: Reason for Objection and Basis of Estimate Reason(s) for your objection: (Attach additional sheets if needed) Basis for your opinion of assessed value: (Attach additional sheets if needed)							if needed)		
neuson(s) for your objection. (Attach addition	Basis for your of	philon of assessed ve	iide. (At	tacriadar	tional sheets	n needed)			
Section 4: Other Property Informa	ation			<u> </u>					
- ,			a webs of 2					□ Vaa	□ Na
A. Within the last 10 years, did you acq	uire the p	orope	-			, .		∐ Yes	No
If Yes, provide acquisition price \$ Date Purchase _ Trade _ Gift _ Inheritance									
B. Within the last 10 years, did you cha	nge this	prop	erty (ex: remode	l, addition)?				Yes	No
If Yes, describe									
Date of Cost of									
changes changes !	>		Does this co	st include the va	lue of all labor (inclu	ading yo	our own):	? Yes	∐ No
C. Within the last five years, was this property listed/offered for sale?									
If Yes, how long was the property listed (provide dates) to to to									
Asking price \$ List all offers received									
D. Within the last five years, was this pr	operty a	ppra	ised?					Yes	☐ No
If Yes, provide: Date	V	alue		Purpose of a	appraisal				
If this property had more than one a	opraisal,	provi	de the requested	information for	each appraisal.				
Section 5: BOR Hearing Informati	on								
A. If you are requesting that a BOR mer Note: This does not apply in first or sec				hearing, provice	de the name(s):				
B. Provide a reasonable estimate of the				he hearing	minutes.				
Property owner or Agent signature							Date (r	mm-dd-yyyy)	

PA-115A (R. 10-22)

Objection Form for Personal Property Assessment

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk written or oral notice of your intent, under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department Revenue's <u>Guide for Property Owners</u>.

* If agent, submit written authorization (Form PA-105) with this form

Complete all sections:

Section 1: Property Owner / Agent Information

Property owner name (on changed assessment notice)		Agent name (if applicable)							
Owner mailing address				Agent mailing address					
City	State	2	Zip	City			Zip		
Owner phone	Email			Agent phone	Email				
() -				() -					
Section 2: Assessment Info	rmation and	l Opi	inion of Value						
Property address				Legal description or parcel no. (on cha	nged asse	essment no	tice)		
City	State	7	Zip						
Assessment shown on notice – Total				Your opinion of assessed value – Total					
Assessment as shown on notice: Boats and watercraft				Your opinion of value as of Janua Boats and watercraft	-				
Furniture, fixtures and equipmen				Furniture, fixtures and equipmen					
Building on leased land				Building on leased land					
				All other personal property					
				Total					
Section 4: Other Property I	nformation								
List all other personal property y		e sar	me municinality) th	nat you are not appealing:					
List air other personal property y			n of Personal Prop				Assessment		
	<i></i>	P 1.0.					71356331116111		
						\$			
						\$			
						\$			
						\$			
						\$			
Section 5: BOR Hearing Info	ormation								
A. If you are requesting that a B Note: This does not apply in fire				r hearing, provide the name(s):					
B. Provide a reasonable estimat	e of the amou	unt o	f time you need at	the hearing minutes.					
Property owner or Agent signature						Date (r	mm-dd-yyyy) 		
DA 115D (D. 10. 22)						14/:			

Agent Authorization

for Property Assessment Appeals

If an agent is representing the property owner or municipality, the property owner or municipality must provide prior written authorization for the agent to represent the company or municipality when contacting the reviewing authority.

Section 1:	Property Owner and F	Property	Information				
Company/property owner name				Taxation district Town (Check one)	Village	City	County
			Enter municipality →				
Mailing address				Street address of property			
City		State	Zip	City		State	Zip
Parcel number		Phone	,	Email			Fax
		()	-				() -
Section 2:	Authorized Agent Info	ormatio	n				
Name / title				Company name			
Mailing address				Phone Fax			
				() -	() -		
City		State	Zip	Email			
Section 3:	Agent Authorization						
Agent Autho	rized for: (check all that app	(v)	Enter Tax Years o	of Authorization			
				, ration zation			
	uring property assessment a						
	manufacturing assessment s	•					
Wisconsir	Department of Revenue 70.	.85 appeals					
Municipa	l Board of Review						
Other							
Authorizatio	n expires: (mm - dd -	vvvv)	(unless rescinded	in writing prior to expiration)			
Send notices	and other written commu	nications	to: (check one or both)	Authorized Agent	Property C)wner	
Section 4:	Agreement/Acceptan	ce					
	-						
	d, agree and accept:						
The assessor's office may divulge any information it may have on file concerning this property							
 My agent has the authority and my permission to accept a subpoena concerning this property on my behalf 							
• I will provide all information I have that will assist in the discussion and resolution of any assessment appeal of this property							
 Signing this document does not relieve me of personal responsibility for timely reporting changes to my property and paying taxes, or penalties for failure to do so, as provided under Wisconsin tax law 							
 A photocopy and/or faxed copy of this completed form has the same authority as a signed original 							
 If signed by a corporate officer, partner, or fiduciary on behalf of the owner, I certify that I have the power to execute this Agent 							
Authorization form							
Section 5:	Owner Grants Author	ization					
	Owner name (please print)						
Owner	Owner signature						
Sign Here							
-	Company or title				Date (mm	-dd-yyyy)	

PA-105 (R. 3-18) Wisconsin Department of Revenue