

## Assessor's Review Form

Appeal # PP 25-05

Property ID # 104250

### 1) Assessor's Decision Land Improvements Total

From	\$ <u>321,328 -</u>	\$ <u>Ø</u>	\$ <u>321,328 -</u>
To	\$ <u>321,328 -</u>	\$ <u>✓</u>	\$ <u>321,328 -</u>

#### Assessor's reason for decision:

RECOMMEND DENIAL OF APPEAL, APPELLANT SUBMITTED NO SUPPORTING INFORMATION WHICH WOULD ALLOW FOR CONSIDERATION OF AVAL ADJUSTMENT.

8 JANUARY 2025  
Date received

[Signature]  
Decision made by

7 MAY 2025  
Date

Approved by

Date

Date mailed

### 2) Appellant Notified by

EMAIL -

Mail

Telephone

In person

7 MAY 2025

Date notified

\_\_\_\_\_ I ACCEPT the Assessor's decision in Block 1 above and hereby withdraw my appeal.

\_\_\_\_\_ I DO NOT ACCEPT the Assessor's decision and desire to have my appeal presented to the Board of Equalization.

by [Signature] for appellant 7 MAY 2025  
Signature of owner or authorized agent Date signed

A. ERICKSON - CONTRAY  
ASSESSOR'S OFFICE  
Print name

### 3) Board of Equalization Decision

Land \$ \_\_\_\_\_ Improvements \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Date received

Date heard

Certified (Chairman or Clerk of Board)

Date

Date Mailed