



City of Dillingham

Property Assessment Appeal Form

RP22-09
rcvd 4/1/22lg

This appeal must be returned or postmarked no later than the date indicated on the Assessment Notice.
Drop off at City Hall, or mail to City Clerk, PO Box 889, Dillingham AK 99576 or email at cityclerk@dillinghamak.us.
Attach a copy of the Property Assessment Return.

I appeal the assessed value for the property identified below:

Acct No. 101289
Parcel# 1-140-550
Note this ^{Acct} Number is from 2021 ASSESSMENT NOTICE

Property Owner Daniel Layland / Judy Gonsalves

Mailing Address for all correspondence relating to this appeal:

Street Address or PO Box P.O. Box 531

City Homer State AK Zip 99603

Contact Phone Number 907.399.1279 Email Address cohoconst96@gmail.com

1. Why are you appealing your value? Check ONE and provide a detailed explanation below:

- My property value is excessive. (Overvalued)
- My assessed value is unequal to similar property.
- My property value was valued improperly. (Incorrectly)
- My property has been undervalued.

2. You must provide specific reasons and provide information supporting the item checked above:

Assessor Value from Notice	\$	<u>145,400.00</u>
Owners Estimate of Value	\$	<u>127,796.00</u>
Purchase Price of Property	Price	Purchase Date <u>Prior sometime 2003</u>

3. **THE FOLLOWING INFORMATION WILL HELP SUPPORT YOUR APPEAL.**

Comparable Sales: Recent sales of similar property (within three years)

Property Sold	Owner/Address	Date of Sale	Sale Price

Information regarding sales of comparable properties may be obtained through personal research. Other information might include reports from inspectors or engineers concerning physical conditions, contractor estimates of cost of cure, documents from government agencies or experts regarding property limitations, appraisal documents, published blue book value, closing statements, legitimate advertisements, etc.

4. **Has property been appraised within the last five years?**

YES NO

If yes, appraisal date: _____ Appraised value: \$ _____

5. **You may submit additional information to support your appeal of the assessed value.**

Documents with additional facts must be submitted within 30 days of the date the Assessment Notice was mailed unless the Assessor agrees to an extension.

Please check the following statement that applies to your intentions:

I intend to submit additional information within the required time limit.

My appeal is complete. I have provided all the information that I intend to submit, and request that my appeal be reviewed based on the information submitted.

6. **I hereby affirm that the foregoing information is true and correct. I understand that I bear the burden of proof, and that I am the owner (or owner's authorized agent) of the property described herein.**

X *Daniel Layland*
Signature of Owner/Agent

X 4-4-2022
Date

Daniel Layland
Print Name

The Board of Equalization (BOE) certifies its decision, based on the Findings of Fact and Conclusions of Law contained within the recorded hearing and record on appeal, and concludes that appellant (met/did not meet) the burden of proof that the assessment was unequal, excessive, improper or undervalued.

4-4-2022.

To whom it may concern,

In the past 5 years we have done improvement to lot 4 Blk 1 NAPAR. A storage shed was constructed to store fishing gear. Our cost so far is a bout \$19,000.⁰⁰

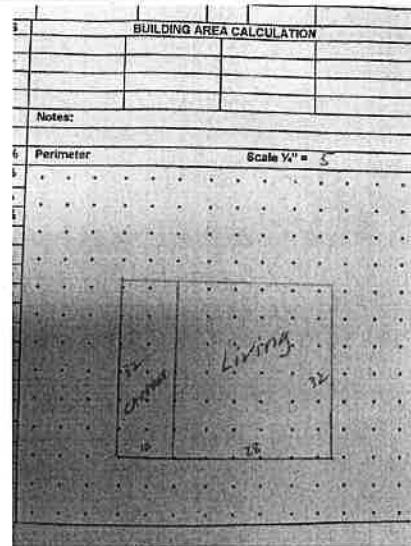
If prior years improved value was \$65,800.⁰⁰ and we add \$20,000.⁰⁰ For improvements, our base improved value would be around \$85,800.⁰⁰

An increase of 10 or 12% seems more in line.

If the assessed value from 2021 adding improvements (20,000.⁰⁰) and raising by 12% we would be closer to \$127,796.⁰⁰.

Please consider an assessment closer to \$127,000.⁰⁰

Thank you
Dan Hayland
907-399-1279
Bx 531
Homer AK. 99603



CURRENT OWNER	PROPERTY IDENTIFICATION
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JUDY GONSALVES DANIEL LAYLAND PO BOX 531 HOMER AK 99603	<table border="1" style="width:100%"> <tr> <td>Parcel</td> <td>1-140-550</td> <td>Us</td> <td>R - Residential</td> </tr> <tr> <td>City</td> <td>101289</td> <td>Property</td> <td>Garage</td> </tr> <tr> <td>Mobile Home</td> <td></td> <td>Service</td> <td></td> </tr> </table>	Parcel	1-140-550	Us	R - Residential	City	101289	Property	Garage	Mobile Home		Service	
Parcel	1-140-550	Us	R - Residential										
City	101289	Property	Garage										
Mobile Home		Service											

PROPERTY INFORMATION

Improvement	896 SF	Year Built	2007	Actual	Land	1	AC
Basement		Effective Age	6		Zone	CG	
Garage	448 SF	Taxable Interest	Fee Simple				

LEGAL DESCRIPTION

Plat # 2001-1 Lot # 4 Block 1 Tract Rec. District Bristol Bay - 307

Describe: _____ Date recorded _____

EXEMPTION DETAIL

	Land	Improvement	Total
Fee Value	\$31,700	\$113,700	\$145,400
Exempt Amount			\$0
Taxable Value	\$31,700	\$113,700	\$145,400

PROPERTY HISTORY

Year	Taxable Interest	Land	Improvement	Assessed Value	Exempt Value	Taxable Value
2022	Fee Simple	\$31,700	\$113,700	\$145,400	\$0	\$145,400
2021	Fee Simple	\$31,700	\$66,200	\$97,900	\$0	\$97,900
2020	Fee Simple	\$31,700	\$65,800	\$97,500	\$0	\$97,500

Owner Layland, Daniel / Judy

Mailing Address _____ Property Address _____

Permits _____ Date Built _____ Effec. Age _____

1-140-550

Remodeled _____

Rent _____ Furnished _____ Unfurnished _____ Owner _____ Tenant _____

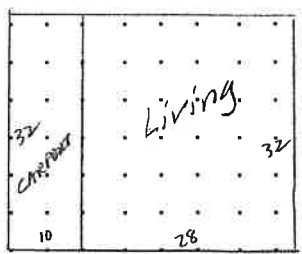
Observed Physical Condition	Exterior P A G E				Interior P A G E				Foundation P A G E			
Building Type And Use	Exterior				Interior (Continued)				Heat			
<input type="checkbox"/> SFR	<input type="checkbox"/> T1-11	<input type="checkbox"/> Floor	<input type="checkbox"/> Total	<input type="checkbox"/> BR	<input type="checkbox"/> BA	<input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Propane						
<input type="checkbox"/> Duplex	<input checked="" type="checkbox"/> Plywood	<input type="checkbox"/> Bsmt				<input type="checkbox"/> Hot Water Baseboard						
<input type="checkbox"/> 3-Plex	<input type="checkbox"/> Metal	<input type="checkbox"/> 1st				<input type="checkbox"/> Forced Warm Air						
<input type="checkbox"/> 4-Plex	<input type="checkbox"/> Vinyl	<input type="checkbox"/> 2nd				<input type="checkbox"/> Radiant						
<input checked="" type="checkbox"/> GARAGE / CARAV	<input type="checkbox"/> Hard Plank	<input type="checkbox"/> 3rd				<input type="checkbox"/> Space Heater						
No. Stories: _____	<input type="checkbox"/> T&G	<input type="checkbox"/> Attic										
Finished Attic _____ %	<input type="checkbox"/> Cedar	<input type="checkbox"/> Total										
Basement _____ %	<input type="checkbox"/> Log Sliding	B/Grade _____ Sq.Ft.										
Frame: <input type="checkbox"/> WD <input type="checkbox"/> Steel <input type="checkbox"/> Pole	<input type="checkbox"/> Stucco	A/Grade _____ Sq.Ft.										
Log: _____ " Rnd _____ " Sq.												
Foundation	Roof				Kitchen				Q / C			
<input type="checkbox"/> Poured Concrete	<input checked="" type="checkbox"/> Gable <input type="checkbox"/> Hip <input type="checkbox"/> Flat	<input type="checkbox"/> Refrigerator										
<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Gambrel <input type="checkbox"/> Off-Set	<input type="checkbox"/> Range/Oven										
<input type="checkbox"/> Steel Pler		<input type="checkbox"/> Disposal										
<input type="checkbox"/> Wood P&B:	<input checked="" type="checkbox"/> Metal	<input type="checkbox"/> Dishwasher										
<input type="checkbox"/> Sklds	<input type="checkbox"/> Comp Shingle	<input type="checkbox"/> Fan/Hood										
<input type="checkbox"/> Wood Sills	<input type="checkbox"/> Cdr Shake	<input type="checkbox"/> Microwave										
<input checked="" type="checkbox"/> CC FTG	<input type="checkbox"/> Built-up	<input type="checkbox"/> Washer/Dryer										
Basement	<input type="checkbox"/> Tar Paper	Attic / Dormers										
<input type="checkbox"/> Partial _____ SF		<input type="checkbox"/> None										
<input type="checkbox"/> Full _____ SF		<input type="checkbox"/> Stairs										
<input type="checkbox"/> Poured Concrete	Interior	<input type="checkbox"/> Drop Stair										
<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Drywall	<input type="checkbox"/> Scuttle										
<input type="checkbox"/> Cribbed	<input type="checkbox"/> Wood Panel	<input type="checkbox"/> Floor										
<input type="checkbox"/> Outside Entrance	<input type="checkbox"/> T&G	<input type="checkbox"/> Heated										
<input type="checkbox"/> Room Count _____	<input type="checkbox"/> Plywood	<input type="checkbox"/> Finished										
<input type="checkbox"/> Fin Walls	<input type="checkbox"/> Log	<input type="checkbox"/> Total Area: _____ Sq.Ft.										
<input type="checkbox"/> Fin Flrs	<input type="checkbox"/> Finished	Floors										
<input type="checkbox"/> Fin Cell	<input type="checkbox"/> Unfinished	<input type="checkbox"/> Kitchen										
<input type="checkbox"/> BA Encl	<input type="checkbox"/> Open Stud	<input type="checkbox"/> Bath										
	<input type="checkbox"/> Trim P A G E	<input type="checkbox"/> Living Rm										
Frame	<input type="checkbox"/> Windows	<input type="checkbox"/> Bed Rms										
<input type="checkbox"/> Floor _____ o.c.	<input type="checkbox"/> Ceiling Height											
<input type="checkbox"/> Walls _____ o.c.	<input type="checkbox"/> Basement											
<input type="checkbox"/> Roof _____ o.c.	<input type="checkbox"/> 1st Floor											
	<input type="checkbox"/> 2nd Floor											

TAX LOT NO. _____
 LEGAL LOT 4, BLK 1
 MAP/PA ADD # 3
 SUBDIVISION

Other Buildings	Area	Floor	Roof	Interior	Heat	Plumb	Unit Cost	Adds & Deducts	Repl. Cost	Age	Condition	Building Value
<u>LOFT, VAN</u>	<u>3/20</u>											<u>3,000</u>

BUILDING VALUE CALCULATION				OPERATIONS AND PROCEDURES		BUILDING AREA CALCULATION			
Item	Area	Unit	Total	Performed By	Date				
				Inspection <u>AE</u>	<u>9/07</u>				
				Classification					
				Calculation <u>AE</u>	<u>1/08</u>				
				Review <u>AE</u>	<u>4/13</u>				

ADDITIONS AND DEDUCTIONS				DEPRECIATION		OBSOLESCENCE	
				Effective Age:	%	Perimeter	Scale 1/4" = 5'
<u>GARAGE</u>	<u>896 #</u>	<u>17.71</u>	<u>15868</u>	Observed Physical:	%		
<u>CARPORT</u>	<u>320 #</u>	<u>8.85</u>	<u>2832</u>	Total Depreciation	%		
				Net Condition	%		
				SUMMARY OF APPRAISED VALUE			
				Principle Building			
				1.			
				2.			
				Accessory Bldgs	<u>3,000</u>		
Total Replacement Cost \$	<u>18,700</u>			Total Building Value	<u>29,200</u>		
Cost Conversion Factor	<u>1.40</u>			Total Land Value	<u>22,000</u>		
Adjusted Replacement				TOTAL APPRAISED			



ADD#3

Plat Number: 2001-1 Napag Lt 4 BK 1

Size: IRREGULAR Area: 1.055 ACRES Zoning: GL
 Land Use: SITE Unit Value: 29,000

GIS 1-140-550

Influences	Subject	Plus	Minus	Year of Valuation: 2002	Base Land Value: 29,000
Access	GRVL				Total Adjustments:
Corner	✓				Indicated Value:
Paving					Final Value Estimate: 29,000
Curb & Gutter				Remarks:	
Sidewalk					
Street Lights					
Topography	SEN/BSG				
Drainage	ADPR				
View	NEIGH				
Water					
Sewer					
Irregular Mod.					
Physical Barriers					
Total Adjustments					
Net Adjustments					

YEAR	OWNER	ASSESSED VALUATION			REASON FOR CHANGE
		Land	Bldgs.	Total	
2001	NELSON, JUDITH K. TRUSTEE				PLAT 2001-1. LW 03-02
2002		29,000		29,000	REAPPRAISAL 2002 CW.
2008		22,000	26,200	48,200	PLN CHANGE/CAVANT INCR. LAND +10% AE-
2008		22,000	?		
2013		22,000	26,200	48,200	MC RMD/AE-
2014		22,400	26,200	48,600	Land inc + 2% com
2015		22,800	26,700	49,500	Land inc " " 2% com
2015		22,900	26,700	49,600	Land inc 2% AE
2021		31,700	66,200	97,900	MC MD

REMARKS:



Owner _____

Mailing Address _____

Property Address _____

Permits _____

Date Built _____

Remodeled _____

Effect. Age _____

MPPAQ 900 #3 SUBDIVISION

Lot 4

Block 1

TAX LOT NO: 1-140-550

Observed Physical Condition	Exterior P F A G E	Interior P F A G E	Foundation P F A G E
Building Type And Use	Exterior	Interior (Continued)	Heat
SFR _____ Duplex _____ 3-Plex _____ 4-Plex _____ No. Stories: _____ Avg Wall Height: _____ Basement _____ % Frame: <u>WD</u> <u>Steel</u> <u>Pole</u> Log: _____ " Rnd _____ " Sq.	T1-11 _____ Plywood _____ Metal _____ Vinyl _____ Hardi Plank _____ T&G _____ Cedar _____ Log Siding _____ Stucco _____	Floor Total BR BA _____ Bsmt _____ 1st _____ 2nd _____ 3rd _____ Attic _____ Total _____ B/Grade _____ Sq.Ft. A/Grade _____ Sq.Ft.	Oil Gas Propane _____ Hot Water Baseboard _____ Forced Warm Air _____ Radiant _____ Space Heater (DV) _____ Fireplaces _____ Steel with flue #Story _____ Heatilator _____ Masonry _____ Raised Hearth _____ Fir Lvl Hearth _____ Wood Stove P F A G _____
Foundation	Roof	Kitchen Q / C	Plumbing (Continued)
Poured Concrete _____ Concrete Block _____ Steel Pier _____ Wood P&B: _____ Skids _____ Wood Sills _____	Gable Hip Flat _____ Gambrel Mansard _____ Metal _____ Comp Shingle _____ Cdr Shake _____ Built-up _____ Tar Paper _____ G & D _____	Refrigerator _____ Range/Oven _____ Disposal _____ Dishwasher _____ Fan/Hood _____ Microwave _____ Washer/Dryer _____	Water Source _____ Sewer Source _____
Basement	Interior	Attic / Dormers	Electrical
Partial SF _____ Full SF _____ Poured Concrete _____ Concrete Block _____ Cribbed _____ Outside Entrance _____ Room Count _____ Fin Walls _____ Fin Flrs _____ Fin Ceil _____ BA End _____	Drywall _____ Wood Panel _____ T&G _____ Plywood _____ Log _____ Finished _____ Unfinished _____ Trlm P F A G _____ Windows _____ Bay Windows _____	None _____ Stairs _____ Drop Stair _____ Scuttle _____ Floor _____ Heated _____ Finished _____ Total Area: _____ Sq.Ft.	Wired _____ Grade _____ 220 Service _____ No. Tubs W/Shw _____ No. Toilets _____ No. Basins _____ No. Kit. Sinks _____ No. Shower Stalls _____ No. Hot Wa. Tanks _____ No. Laundry Trays _____
Frame	Floors	Plumbing	Garage
Floor o.c. _____ Walls o.c. _____ Roof o.c. _____	Kitchen _____ Bath _____ Living Rm _____ Bed Rms _____	No. Basins _____ No. Kit. Sinks _____ No. Shower Stalls _____ No. Hot Wa. Tanks _____ No. Laundry Trays _____ Sauna Baths _____ Built-In Prefabricated _____ Detached Bath House _____ Elec. Wall Unit _____ Elec. Floor Unit _____ Wood Stove _____ Total Sq.Ft. _____ Quality P F A G _____	Built-In _____ Attached _____ Detached _____ Unfinished Drywall _____ Finished Drywall _____ Suspended HW & Blower _____ GDO _____ Floor Drain _____
		Hot Tub	Porches
		Ft. Dia. _____ Quality Low Avg High _____ Jacuzzi Tubs _____ Quality Low Avg High _____	
		QUALITY: _____	
		CONDITION: _____	

Other Buildings	Area	Floor	Roof	Interior	Heat	Plumb	Unit Cost	Adds & Deducts	Repl Cost	Age	Condition	Building Value

BUILDING VALUE CALCULATION				OPERATIONS AND PROCEDURES		BUILDING AREA CALCULATION				
Item	Area	Unit	Total	Performed By	Date	20'	40'	8004		
				Inspection						
				Classification						
				Calculation						
				Review						
DEPRECIATION										
ADDITIONS AND DEDUCTIONS				Effective Age:	%	Perimeter	Scale 1/4" =			
				Observed Physical:	%					