



Office of the Assessor
155 South Seward Street
Juneau, Alaska 99801

Petition for Review / Correction of Assessed Value Real Property	
Assessment Year	2023
Parcel ID Number	5B2101310660
Name of Applicant	Jake Olivit
Email Address	Jake.Olivit@Alaska.gov

2023 Filing Deadline: Monday April 3rd, 2023

Please attach all supporting documentation

ASSESSOR'S FILES ARE PUBLIC INFORMATION - DOCUMENTS FILED WITH AN APPEAL BECOME PUBLIC INFORMATION

Parcel ID Number	5B2101310660		
Owner Name	Jake Olivit		
Primary Phone #	907-957-3510	Email Address	Jake.Olivit@Alaska.gov
Physical Address	9951 Stephen Richards Dr Juneau AK 99801	Mailing Address	Box 32617 Juneau AK 99803
Why are you appealing your value? Check box and provide a detailed explanation below for your appeal to be valid.			
<input checked="" type="checkbox"/> My property value is excessive/overvalued <input type="checkbox"/> My property value is unequal to similar properties <input type="checkbox"/> My property was valued improperly/incorrectly <input type="checkbox"/> My property has been undervalued <input type="checkbox"/> My exemption(s) was not applied		THE FOLLOWING ARE NOT GROUNDS FOR APPEAL <ul style="list-style-type: none"> Your taxes are too high Your value changed too much in one year. You can't afford the taxes 	
Provide specific reasons and provide evidence supporting the item(s) checked above:			
You have increased the Tax by 30% plus in 1 year			
Have you attached additional information or documentation?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Values on Assessment Notice:			
Site	\$ 0	Building	\$ 43,600
Total		\$ 43,600	
Owner's Estimate of Value:			
Site	\$ 0	Building	\$ 36,000
Total		\$ 36,000	
Purchase Price of Property:			
Price	\$ 25,000	Purchase Date	1995 ?
Has the property been listed for sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (if yes complete next line)			
Listing Price	\$	Days on Market	
Was the property appraised by a licensed appraiser within the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes provide copy of appraisal)			
Certification: I hereby affirm that the foregoing information is true and correct, I understand that I bear the burden of proof and I must provide evidence supporting my appeal, and that I am the owner (or owner's authorized agent) of the property described above.			
Signature		Date	
Jake Olivit		3/30/23	

Contact Us: CBJ Assessors Office			
Phone/Fax	Email	Website	Address
Phone # (907) 586-5215 ext 4906 Fax # (907) 586-4520	Assessor.Office@juneau.gov	http://www.juneau.org/finance	155 South Seward St. Rm. 114 Juneau AK 99801

PARCEL #: _____ APPEAL #: _____ DATE FILED: _____

Appraiser to fill out			
Appraiser			Date of Review
Comments:			
Post Review Assessment			
Site	\$	Building	\$
Exemptions	\$	Total	\$
Total Taxable Value	\$		
APPELLANT RESPONSE TO ACTION BY ASSESSOR			
I hereby <input type="checkbox"/> Accept <input type="checkbox"/> Reject the following assessment valuation in the amount of \$ _____			
If rejected, appellant will be scheduled before the Board of Equalization and will be advised of the date & time to appear.			
Appellant's Signature _____		Date: _____	

Appellant Accept Value	<input type="checkbox"/> Yes	<input type="checkbox"/> No (if no skip to Board of Equalization)
Govern Updated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Spreadsheet Updated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Corrected Notice of Assessed Value Sent	<input type="checkbox"/> Yes	<input type="checkbox"/> No

BOARD OF EQUALIZATION			
Scheduled BOE Date	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10-Day Letter Sent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
The Board of Equalization certifies its decision, based on the Findings of Fact and Conclusion of Law contained within the recorded hearing and record on appeal, and concludes that the appellant <input type="radio"/> Met <input type="radio"/> Did not meet the burden of proof that the assessment was unequal, excessive, improper or under/overvalued.			
Notes:			
Site	\$	Building	\$
Exemptions	\$	Total	\$
Total Taxable Value	\$		

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PARCEL #: 5B2101310660 APPEAL #: APL 2023-0291 DATE FILED: 03/30/2023

Appraiser to fill out			
Appraiser	Kim Campbell	Date of Review	04/17/2023
Comments: With no specific evidence provided to the Assessor's Office that would warrant a change in value, my recommendation to the Assessor will be no change.			
Post Review Assessment			
Site	\$0	Building	\$43,600
Total	\$43,600		
Exemptions	\$0		
Total Taxable Value	\$43,600		
APPELLANT RESPONSE TO ACTION BY ASSESSOR I hereby <input type="checkbox"/> Accept <input checked="" type="checkbox"/> Reject the following assessment valuation in the amount of \$ <u>43,600</u> If rejected, appellant will be scheduled before the Board of Equalization and will be advised of the date & time to appear.			
Appellant's Signature		Date: <u>5.5.23</u>	

Appellant Accept Value	<input type="checkbox"/> Yes	<input type="checkbox"/> No (if no skip to Board of Equalization)
Govern Updated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Spreadsheet Updated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Corrected Notice of Assessed Value Sent	<input type="checkbox"/> Yes	<input type="checkbox"/> No

BOARD OF EQUALIZATION			
Scheduled BOE Date	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
10-Day Letter Sent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
The Board of Equalization certifies its decision, based on the Findings of Fact and Conclusion of Law contained within the recorded hearing and record on appeal, and concludes that the appellant <input type="radio"/> Met <input type="radio"/> Did not meet the burden of proof that the assessment was unequal, excessive, improper or under/overvalued.			
Notes:			
Site	\$	Building	\$
Total	\$		
Exemptions	\$		
Total Taxable Value	\$		

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