

CITY OF NOME ADMINSTRATIVE REVIEW AND APPEAL FORM

Appeal #:	
7017-	124

This form is for you to appeal the assessed valuation on your property. Complete Sections 1, 2 and 3. Retain a copy for your records, and return or mail the original copy to the City Clerk's Office. Appeals must be returned or postmarked no later than the date indicated on the Assessment Notice. The Assessor will contact you regarding your appeal.

1)	I appeal the value	of tax parcel #:	<u>U </u>	0 9 A A	₹ 2 6 20.3			
	Property legal	description: Block_//	Ĺ, Lot <u>⋧⊋,</u> Mineral	Survey, Other	TY OF NOME S DEPARTMENT			
	Print Owner's	Name: Angela	L. Hansen	+ Peter C.	Hansen			
		ng Address: $\nearrow o \ \mathcal{B}$			STATE OF THE PARTY			
	Owners Mailir	(0)	51 N					
		None	1AK 99742	, Evening Phone:	808 443 7947			
	Address to wh	nich all correspondence	should be mailed (if d	ifferent than above):				
***	******	******	******	*******	******			
2)					IB 1 D.4.			
	Assessor's Value	Land: 38,500	Bldg:	Total:	Purchase Date:			
	Owner's Estimate		221,000	259,500	2022			
	of Value	30,000	150,000	180,000				
•		waste of tables (majudings)	nuntary compations col	os of comporable propor	ios and proporty			
ince	ome statements, if a	mate of value (including in ppropriate). The Appellan	nt bears the burden of pro	oof. Grounds for adjustr	nent of assessment are			
		ssive, improper, or under-v	aluation based on facts	that are stated in a valid	written appeal or proven			
at the appeal hearing.								
This is a small, simple rental house nearly								
46 years old. There has been an ince and								
el \$53,900 - Ainel 2021, for greate, than it								
The City of the City								
	Thaila-	ja, ore a	y money	Slines V	t agresse			
rather than upset and discourage property owners to								
***		*******		******	*********			
3) gui	I hereby affirm that delines above, and	at the foregoing informa d that I am the owner o	ition is true and correct r owner's authorized a	t, that I have read and gent of the property de	escribed above.			
/	Waels 7	Hanses	4/28/23	Angela	Hansen			
Siç	nature of owner o	or authorized agent	Date signed	Print Name (if d	ifferent form item # 1)			
	SUBSCRIBED a	nd SWORN to before me thi	sdayof	,20				
	NOTARY PUBLIC in and for the STATE of ALASKA:							
Commission Expires: Seal: Appeal#:								
				13	2023-124			

Total: 500

4)

Assessor's _

Land:

Decision	From:	38500		221000		259			
	То:	38 500		200,000	92	238,500			
Assessor's Reason for Decision: Called aquelant left mse. Neviwed MARS file and adjusted depreation to reflect age any endeling. Neviwod following comparables. 211 Lin Place 1092 # 250,000 405 £ 5# 1060 # # 285,000 Aug \$ 256.30 116 £ 10# 1384 # # 375,000									
(PLEASE ATTACH STATEMENT IF YOU NEED MORE SPACE) A 28 23									
5) Appellant's Response: I ACCEPT the assessor's decision in Block 4 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.									
Signature of or	vnef or au	thorized agent ************************************	Date	Printed Name	100 (2 10 10 10 10 10 10 10 10 10 10 10 10 10 	****			
BOARD OF E	QUALIZATI SION	ON LAND:		BUILDING:	тот	AL:			
Date Received	2	Date Heard	Certified (Chairman or Clerk of Board)	Date	Date Mailed			

Building:

2023 BOARD OF EQUALIZATION DATE: MAY 3, 4, & 5 2023

THE FINAL DAY TO APPEAL (April 21, 2023) IS 30 DAYS AFTER THE POSTMARK OF YOUR ASSESSMENT NOTICE (March 22, 2023)