

CITY OF NOME ADMINSTRATIVE REVIEW AND APPEAL FORM

Appeal #:	
2023-99	

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.

RECEIVED	
1) I appeal the value of tax parcel #: 198.2.379 APR 2 7 2023	
Property legal description: Block 5, Lot 4, Mineral Survey, Other	
Print Owner's Name: Hannah Katonaan CLERKS DEPARTMENT	
Owner's Mailing Address: POBOX 12-72, Day Phone: ()443-86	17
	27
Address to which all correspondence should be mailed (if different than above):	
**************************************	***
Assessor's Value Land: Bldg: Total: Purchase Date: 35, 200 184, 200 219, 400 4/05	
Owner's Estimate of Value	
Owner's reason for estimate of value (including inventory corrections, sales of comparable properties, and property income statements, if appropriate). The Appellant bears the burden of proof. Grounds for adjustment of assessment proof of unequal, excessive, improper, or under-valuation based on facts that are stated in a valid written appeal or proper at the appeal hearing.	
This assessment is nearly 80,000 high	es
have weather Istorm damage and foundation	<u></u>
failure. This has also caused our sewer line to	_ ച
69 every year. (Please attach statement if you need more space)	
3) I hereby affirm that the foregoing information is true and correct, that I have read and understand the guidelines above, and that I am the owner or owner's authorized agent of the property described above. 4 27 2	
SUBSCRIBED and SWORN to before me this	
NOTARY PUBLIC in and for the STATE of ALASKA: BRADLEY D. SOSKE	

		PP000 # 2023-59									
********	******	******	*****	*****	*****	*****	*****	****	******	******	
4)											
Assessor's Decision	From:	Land	35,26	20		Buil	ding: 184,20	0	Total:	7,400	
	То:		35,20	20			M7,10	0	212	,300	
Assessor's Rea	ason for Dec	cision:	L od	Suntes	l app	prec	Raut and existing	Jeft or wage a	usage. Conditi	Reverios	
					(F	PLEAS	E ATTACH STATE	EMENT IF YOUN	EED MORE SPA	CE)	
4/27/23	3	M	ul		5/29/2	23					
Date Rec'd	Decision	n mad	by	******	Date /	*****	Approved by	******	Date	Date mailed	
5) Appellan	t's Resp	onse	:								
		CEPT	the asses	sor's decis	sion in Bloc	ck4ab	ove and hereby	withdraw my ap	peal.		
		NOT palization		he assess	sor's decisi	ion an	d desire to have I	my appeal pres	ented to the Bo	pard of	
Signature of owner or authorized agent Date						****	Printed Name				
6)											
BOARD OF E	QUALIZAT ISION	ION	LAND:			E	UILDING:		TOTAL:		

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

Date Heard

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

Certified (Chairman or Clerk of Board)

Date Mailed

Date

Date Received