

Taxpayer Petition to the County Board of Equalization for Review of Real Property Valuation Determination

Official use only

Petition:

Date received:

This petition must be filed or postmarked by July 1 of the current assessment year or 30 days after the date of mailing of the change of value or other determination notice (up to 60 days in those counties that the Legislative Authority has extended the deadline). If filing after July 1, a copy of the determination notice must be attached to this petition.

The undersigned petitions the Board of Equalization to change the valuation of the property described below as shown on the assessment roll for _____ for taxes payable in _____ to the amount shown in section 2(b) on this form.

1 Owner information

Account/Parcel:

Owner:

Street address:

City:

State:

Zip:

Phone:

Fax:

May we contact you by email? Yes No

Email:

Name of petitioner or authorized agent:

2 True & fair value

A - Assessor's determination of true & fair value:	
Land:	\$
Improvement/Bldgs:	\$
TOTAL:	\$

B - Your estimate of true & fair value:	
Land:	\$
Improvement/Bldgs:	\$
TOTAL:	\$

Date the assessor's "Change of Value Notice" or other determination notice was mailed:

I request the information the assessor used in valuing my property. Yes No

Continued...

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3 Specific reasons why you believe the assessor's value does not reflect the true & fair market value.

Note: Under Washington law, you must prove that the assessor's value is not the true and fair market value (RCW 84.40.0301). If this petition concerns income property, please attach a statement of income and expenses for the past two years and copies of leases or rental agreements.

Other issues relevant to your case:

4 Power of attorney

If power of attorney has been given, the taxpayer must so indicate by signing the statement below or attaching a signed power of attorney.

The person whose name appears as authorized agent has full authority to act on my behalf on all matter pertaining to this appeal.

Signature of petitioner:

I hereby certify I have read this petition and that it is true and correct to the best of my knowledge.

Signature of taxpayer or agent:

Date:

5 The property which is the subject of this petition.

Check all that apply:	
Farm/Agricultural land	Residential building
Residential land	Commercial building
Commercial land	Industrial building
Industrial land	Mobile home
Designated forest land	Open space/Current use land
Other:	

6 Description of property

Address/location:

Lot size (acres):

Zoning or permitted use:

Description of building:

View? Yes No Waterfront? Yes No

Purchase price of property (if purchased within last 5 years): \$

Date of purchase:

Remodeled or improved since purchase? Yes No Cost: \$

Has the property been appraised by other than the county assessor? Yes No

If yes, appraisal date: By who?

Appraised value: \$ Purpose of appraisal:

Please complete all of the above items (if applicable). Information in sections 1-4 must be provided to be considered a complete petition.

You may submit additional information, either with this petition or prior to 21 business days before the hearing, to support your claim. The area below may be used for this purpose.

Check the following statement that applies:

I intend to submit additional documentary evidence to the Board of Equalization and the assessor no later than 21 business days prior to my scheduled hearing.

My petition is complete. I have provided all the documentary evidence that I intend to submit and I request a hearing before the Board of Equalization as soon as possible.

Check one of the following: I plan to attend the hearing. I do not plan to attend the hearing.

7 Documentary Evidence Worksheet

Most recent sales of comparable property (within the past 5 years):

	Parcel No.	Address	Land size	Sale price	Date of sale
A.					
B.					
C.					
D.					

Information regarding sales of comparable properties may be obtained through personal research, local realtors, appraisers, or at the county assessor's office.

