

# KOOTENAI COUNTY BOARD OF EQUALIZATION

## Property Assessment Appeal Form – One Form Per Parcel

This form must be received or postmarked no later than 5:00 pm on June 27, 2022 to:

**Kootenai County Commissioner's Office:**

Mail: P.O. Box 9000, Coeur d'Alene, ID 83816-9000

In Person: 451 N. Government Way 3<sup>rd</sup> Floor, Coeur d'Alene

**Appeal Hearings will be completed by July 11, 2022**

Parcel #: \_\_\_\_\_ AIN: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Assessment Notice for this parcel is attached.

**Current Assessed Value as of January 1:**

Land \$ \_\_\_\_\_

Improvements \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total Market Value \$ \_\_\_\_\_

**Property Owner's Opinion of Value as of January 1:**

Land \$ \_\_\_\_\_

Improvements \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total Market Value \$ \_\_\_\_\_

Basis or reason for the appeal (attach supporting documents, if needed): \_\_\_\_\_

What type of Appeal Hearing are you requesting? (Please check one):

**WRITTEN** – Submitting written documents only. I will not attend my hearing in person.

**ORAL** - Oral testimony will be given (please check one):  In Person  Via Telephone

**PLEASE NOTE:** The Property Owner or the Property Owner's Idaho Attorney **must** attend the Oral Hearing.

Who will represent the Property Owner before the Board of Equalization?  Property Owner  Attorney

I hereby authorize the person indicated below to serve as my legal representative at the Kootenai County Board of Equalization hearing concerning this property.

Attorney Name (Print): \_\_\_\_\_ Idaho Attorney License: \_\_\_\_\_

Attorney Email: \_\_\_\_\_ Attorney Phone: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Appellant has read the foregoing document and hereby certifies and/or declares under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Appellant Name (Print): \_\_\_\_\_ Appellant Title: \_\_\_\_\_

Appellant Signature: \_\_\_\_\_ Date: \_\_\_\_\_