

One Tax Account Number per form. Please submit this form by December 15th. If you wish to file an appeal after December 15th you have until December 31st to file an appeal with the County Clerks Office for the Board of Property Tax Appeals.

REQUEST FOR APPRAISAL REVIEW

Tracking No.

Owner Name: \_\_\_\_\_ Account No. \_\_\_\_\_
Property Address: \_\_\_\_\_ Map/Tax Lot No. \_\_\_\_\_
Appraised Value: Land \$ \_\_\_\_\_ Buildings \$ \_\_\_\_\_ Manufactured Home \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

IF PURCHASED WITHIN THE LAST 5 YEARS

Date of Purchase: \_\_\_\_\_ Price: \$ \_\_\_\_\_
Seller's Name: \_\_\_\_\_ Realtor's Name: \_\_\_\_\_
How has the property changed since you purchased it? \_\_\_\_\_

Have you offered this property for sale? \_\_\_\_\_ Price Asked: \$ \_\_\_\_\_
If this property is rented or leased, please give rental information: \_\_\_\_\_

Reason Why Property Needs to be Reappraised

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Since the Oregon Statutes require that appraisals be based on real market value, we must estimate what your property would sell for if offered on the open market. Please give us your estimate of real market value:
\$ \_\_\_\_\_
How much of that total estimate would you attribute to the land? \$ \_\_\_\_\_
Buildings: \$ \_\_\_\_\_ Timber: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_
Date: \_\_\_\_\_ Signature: \_\_\_\_\_
Telephone No. ( ) \_\_\_\_\_ Address: \_\_\_\_\_
Email: \_\_\_\_\_

FOR ASSESSOR USE ONLY

Date Taxpayer Contacted: \_\_\_\_\_ Type of Contact: \_\_\_\_\_
Date Taxpayer Contacted: \_\_\_\_\_ Type of Contact: \_\_\_\_\_
Date Taxpayer Contacted: \_\_\_\_\_ Type of Contact: \_\_\_\_\_
Date of Property Visit: \_\_\_\_\_
No Change: \_\_\_\_\_ Change as Follows:
Land \$ \_\_\_\_\_ Buildings \$ \_\_\_\_\_ Manufactured Home \$ \_\_\_\_\_ Total \$ \_\_\_\_\_
Comment/Reply to Taxpayer: \_\_\_\_\_
Appraiser: \_\_\_\_\_