## **Objection Form for Personal Property Assessment**

To file an appeal on your property assessment, you must provide the Board of Review (BOR) clerk written or oral notice of your intent, under state law (sec. 70.47(7)(a), Wis. Stats.). You must also complete this entire form and submit it to your municipal clerk. To review the best evidence of property value, see the Wisconsin Department Revenue's *Property Assessment Appeal Guide for Wisconsin Real Property Owners*.

## **Complete all sections:**

Section 1: Property Owner	mation	* If agent, submit written authorization (Form PA-105) with this form					
Property owner name (on changed assessment notice)				Agent name (if applicable)			
Owner mailing address				Agent mailing address			
City		State	Zip	City		State	Zip
Owner phone	Email			Agent phone	Email		
( ) -				( ) -			
Section 2: Assessment Info	ormatic	on and	Opinion of Value				
Property address				Legal description or parcel no. (on changed assessment notice)			
City		State	Zip	_			
Assessment shown on notice – <b>Total</b>				Your opinion of assessed value – <b>Total</b>			
Assessment as shown on notice:				Your opinion of value as of January 1:			
Boats and other watercraft				Boats and other watercraft			
Machinery, tools and patterns				Machinery, tools and patterns			
Furniture, fixtures and equipment				Furniture, fixtures and equipment			
All other personal property				All other personal property			
Total				Total			
Section 3: Reason for Obje	ection a	nd Bas	is of Estimate				
Section 4: Other Property							
List all other personal property you own (in the same municipality) that you are not appealing:							A
Description of Personal Property							Assessment
						\$	
						\$	
						\$	
						\$	
						\$	
Section 5: BOR Hearing In	formati	on					
A. If you are requesting that a Book Note: This does not apply in first			·	r hearing, provide the nar	ne(s):		
B. Provide a reasonable estimate of the amount of time you need at the hearing minutes.							
Property owner or Agent signature						Date (r	mm-dd-yyyy) 

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