Date: _____ **BOE #**_____

Kane County Board Of Equalization

76 North Main, Kanab, Ut 84741 * (435)644-4926 * Fax (435)644-2052

Request for Review of Property Market Value

Owner of Record: _____
Mailing Address: _____
City, State, Zip: _____
Phone No: (Required) _____
Property Account No: _____
Property Serial No: _____

•PLEASE COMPLETE **ONE FORM PER PARCE**L AND RETURN TO THE KANE COUNTY AUDITOR, 76 NORTH MAIN, KANAB, UT 84741, NO LATER THAN **5:00 PM, SEPTEMBER 15, 2016.**
•A COPY OF THE "NOTICE OF PROPERTY VALUATION AND TAX CHANGE" MUST ACCOMPANY THIS REQUEST FOR REVIEW

Property Type: Vacant Land_____Commercial_____Residential_____Aggricultural FAA_____Other_____

Taxpayer's Opinion of Market Value $ _____ **Assessor's Market Value** $ _____

BASIS FOR REQUESTING REVIEW

( ) 1. Market value is not in agreement with similar properties. (Evidence must be provided by taxpayer - give brief description below of evidence.)

( ) 2. Market value not justified by comparable sales or by purchase price. (Comparable sales or a closing statement must be provided by taxpayer.)

( ) 3. Value not justified on basis of income derived from property. (Applicable only to income producing property. A "Three Year Income Analysis" must be completed with the requested information.)

( ) 4. Other reasons. (Explain below and describe evidence provided.)

BRIEF DESCRIPTION OF EVIDENCE OR DOCUMENTATION ATTACHED:

_____
_____
_____
_____
_____

(Do not write on the back of this form - Use attachments if necessary.)

Appointment Requested [ ] Yes [ ] No

Telephonic Appointment [ ] Yes [ ] No

If I do not appear before the Board I understand that a decision will be made based on the information I have provided and that I retain my right to appeal the board's decision to the State Tax Commission if I am not satisfied.

I certify that all statements here and before the Board are true and correct to the best of my knowledge. I understand that all information submitted to the board, and the decision of the Board are public record. If the Board is unable to make a decision prior to November 30th, I am still responsible to pay all taxes due to avoid penalties and interest If a refund is necessary it will include interest starting January 1st.

_____
Signature of Property Owner

[ ] Authorization attached (If signature is from someone other than property owner.)

Office Use Only: Sig/Owner _____ Backup _____ Disclosure Notice _____ PRC _____

Date Received: _____ Appointment issued: Date:_____ Time_____
Intent to Deny issued: Date_____

Appraiser: _____