



The City of Minneapolis Board of Appeal and Equalization

File application with attachments to the
Minneapolis City Clerk, Board of Appeal &
Equalization. 350 S 5th Street, Rm 304, Mpls, MN
55401. E-mail:
marketvalueappeal@minneapolismn.gov, Phone:
612.673.3358

For Office Use Only

This application must be filed or postmarked by **Friday, April 4, 2014**

The undersigned appeals to the Board of Equalization to change the valuation of the property described below as shown on the **Assessment Roll for 2014 for taxes payable in 2015** to the amount shown in Item No. 4(b) on this form.

1 THROUGH 10 **MUST BE COMPLETED** (Please Print)

1. **Parcel Number:** _____ Separate application is required for each Parcel

Address of Property: _____

2. **Owner:** _____

3. **Mailing Address for All Correspondence Relating to Appeal:**

Name of Property Owner or Authorized Agent: _____

Street Address: _____

City, State, Zip: _____

Daytime Phone: _____ Email Address: _____

4. (a) **2014 Pay 2015 Estimated Market Value:** \$ _____

(b) **Your estimate of fair market value:** \$ _____

5. **Specific reasons why you believe the Assessor's value does not reflect the true and fair market value.** The Assessor is presumed to be correct. Your task is to provide convincing evidence that the Assessor's value is not the true and fair market value. Assessments of other properties, percentage of assessment increase, personal hardship, amount of tax, and other matters unrelated to market value may not be relevant or sufficient evidence to prove market value. Attach any supporting documentation.

6. REQUIRED DOCUMENTATION FOR INCOME/RENTAL PROPERTY

{SKIP THIS SECTION IF PROPERTY IS OWNER OCCUPIED}

Current Monthly Rent \$ _____

Utilities included in monthly rent (check all that apply): Gas Water/Garbage Electric

- ATTACH** → → → Statement of income and expenses for the past two years
→ Copies of leases or rental agreements
→ Rent roll near the 1/2/2014 valuation date

7. Purchase price of property (If purchased within last 3 years): \$ _____

Date of purchase: ____/____/_____

8. Remodeled or improved since purchase? No Yes Cost \$ _____

Description of Improvements: _____

9. Has the property been appraised by anyone other than the City Assessor? No Yes

If yes, appraisal date: ____/____/_____ By whom? _____

Appraised value: \$ _____ Purpose of appraisal: _____

****Important Note. You may submit additional information; either with this application, or within seven business days of submittal of this application, to support the reasons you cite within Item Number 5.**

Check one of the following statements that apply:

- I intend to submit additional documentary evidence to the Board of Appeal and Equalization and the Assessor within the next **seven** business days.
- My application is **complete**. I have provided all the documentary evidence I intend to submit and I understand my appeal will be set for a hearing based on the order in which it is received by the Board.

10. I hereby certify I have read this application and that it is true and correct to the best of my knowledge. *Warning:* "Whoever, in making any statement, oral or written, which is required or authorized by law to be made as a basis of imposing, reducing, or abating any tax or assessment, intentionally makes any statement as to any material matter which he knows is false may be sentenced, unless otherwise provided by law, to imprisonment for not more than one year or to payment of a fine of not more than \$3,000, or both." *Sec. 609.41 Minnesota Statutes, 1963*

Date: _____

REQUIRED – YOUR APPLICATION WILL NOT BE ACCEPTED WITHOUT SIGNATURE

Signature of Taxpayer or Agent (if you are a potential buyer or representative of a property you wish to appeal – you must attach a signed letter from the owners which states they authorize you to represent an appeal on their behalf)

- Check this box if you or your representative do not wish to be present at the hearing. If you choose to not be present at the hearing, the board will make a decision based on the written evidence you submit.

Steps 1 through 10 must be completed to be considered a complete application. If you chose to personally appear - your assigned hearing date will be mailed to you via US Mail.

If you are appealing the Assessed value of the property, your task is to show by clear and convincing evidence that the value established by the Assessor is incorrect. It is important to understand that the Board is limited to determining the market value of the property under appeal. Therefore, any adjustment to the assessed value must be based on documentary evidence that relates to the fair market value of the property. Documentary evidence may include photos; written contractor estimates of the cost to repair building or land defects; letters or documents from government agencies or other experts describing development limitations of the property (zoning restrictions, denial of building permit, etc.); deeds describing easement limitations; appraisal documents; map showing proximity to neighborhood nuisances or high-traffic areas; and listings of comparable property sales.

Spanish - Atención. Si desea recibir asistencia gratuita para traducir esta información, llame 612-673-2700

Somali - Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjamadda macluumaadkani oo lacag la' aan wac 612-673-3500

Hmong - Ceeb toom. Yog koj xav tau kev pab txhais cov xov no rau koj dawb, hu 612-673-2800