

# Summary – Waiver of Board of Review Request

Secs. 70.47(8m), Wis. Stats.

**Filing Instructions**

**Section 1 – Assessment Information**

Select the Taxation district, enter municipality, county, year assessments are being appealed

**Section 2 – Appeal Information**

Col. 1 – Enter property owner’s name

Col. 2 – Enter parcel no.

Col. 3 – Enter computer no.

Col. 4 – Enter date waiver was received and select “Approved” or “Denied”

Col. 5 – Select property class and enter assessment value and property owner’s opinion of value

Col. 6 – Enter date delivered/mailed and clerk’s initials

**Note:** Mail or email decision to requester

**Section 3 – Read affidavit, sign and date**

**Note:** After completing this form, file it with the BOR proceedings retained by the municipality. (sec. 70.47(17), Wis. Stats.).

**Section 1: Assessment Information**

Taxation district <i>(check one)</i>	<input type="checkbox"/> Town	<input type="checkbox"/> Village	<input type="checkbox"/> City	Municipality	County	Waiver year <i>(yyyy)</i>
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**Section 2: Appeal Information**

Col. 1 Property Owner Name	Col. 2 Parcel No.	Col. 3 Computer No.	Col. 4 Waiver Request		Col. 5 Value			Col. 6 Notice Date delivered/mailed and clerk’s initials
			Date Received <i>(mm-dd-yyyy)</i>	Decision	Class	Assessment	Owner’s Opinion	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	

**Section 3: Board of Review Clerk Affidavit**

I, the undersigned declare that I have personally prepared this report and to the best of my knowledge and belief it is true and correct.

\_\_\_\_\_  
Signature Board of Review Clerk

\_\_\_\_\_  
Date

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Secs. 70.47(8m), Wis. Stats.

## Section 1: Assessment Information

Taxation district <i>(check one)</i> <input type="checkbox"/> Town	<input type="checkbox"/> Village	<input type="checkbox"/> City	Municipality	County	Waiver year (yyyy)
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## Section 2: Appeal Information

Col. 1 Property Owner Name	Col. 2 Parcel No.	Col. 3 Computer No.	Col. 4 Waiver Request		Col. 5 Value			Col. 6 Notice Date delivered/mailed and clerk's initials
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						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
						\$	\$	- -
						\$	\$	Delivered/mailed
						\$	\$	Initials
						\$	\$	
						\$	\$	
			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
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			- -	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		\$	\$	Date <i>(mm-dd-yyyy)</i>
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