

**CITY OF WHITTIER, ALASKA**      Appeal# \_\_\_\_\_  
**ADMINISTRATIVE REVIEW AND APPEAL FORM**

P.O. Box 608, Whittier, AK 99693 - Phone: (907) 334-1490 Ext. 4 Fax (907)472-2404

*Must be returned by May 08, 2020 by 5pm. (postmarks not accepted) If faxed, or emailed, original must be received within 15 days.*

**This form is for you to appeal the assessed valuation on your property. Complete Blocks 1, 2 and 3. Retain a copy for your record and return or mail the original copy to the Tax Administrator. Appeals must be returned no later than 5 p.m. on above date. The assessor will contact you regarding your appeal.**

1). I appeal the value of tax parcel # \_\_\_\_\_

Property address (or legal description, mile, etc.): \_\_\_\_\_

Print owner's name (as listed on valuation roll): \_\_\_\_\_

Owners mailing address: \_\_\_\_\_

Address to which all correspondence should be mailed (if different than above): \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

2).

Assessor's Value	_____	_____	_____	_____
	Land \$	Improvements \$	Total \$	Purchase Date:
Owner's Estimate Of value:	_____	_____	_____	_____
	Land \$	Improvements \$	Total \$	Purchase Date:

Owner's reason for estimate of value (including inventory corrections, sales of comparable properties, and property income statements, if appropriate). The Appellant bears the burden of proof. The only grounds for adjustment of assessment are proof of unequal, excessive, improper, or under-valuation based on facts that are stated in a valid written appeal or proven at the appeal hearing.

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

See Attached

3). I hereby affirm that the foregoing information is true and correct, that I have read and understand the guidelines above, and that I am the owner or owner's authorized agent of the property described above.

\_\_\_\_\_  
 Signature of owner of authorized agent      Date signed      Print name (if different from item #1)

All appeals must be signed. Lack of signature automatically sends appeal to BOE.  
 Lack of representation at BOE can possibly result in original assessment or higher.

CITY OF WHITTIER  
ASSESSOR'S REVIEW FORM

Appeal # \_\_\_\_\_

1)	Assessor's Decision	From	Land	Building	Total
		To	_____	_____	_____
			_____	_____	_____

Assessor's reason for decision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date received      City Assessor      Date      Signature of Assessor      Date Mailed

- 2) \_\_\_\_\_ Mail  
\_\_\_\_\_ Telephone  
\_\_\_\_\_ In person

\_\_\_\_\_ I ACCEPT the Assessor's decision in Box 1 above and hereby withdraw my appeal.  
\_\_\_\_\_ I DO NOT ACCEPT the assessor's decision and desire to have my appeal presented to the Board of Equalization.

\_\_\_\_\_  
Signature of owner or authorized agent      Date signed      Print name

3) Board of Equalization Decision      Land \$ \_\_\_\_\_      Building \$ \_\_\_\_\_      Total \$ \_\_\_\_\_

\_\_\_\_\_  
Date received      Date heard      Mayor Signature      Date      Date mailed