

# 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:**

<b>Section 1: Property Owner / Agent Information</b>				* If agent, submit written <a href="#">authorization (Form PA-105)</a> with this form			
Property owner name <i>(on changed assessment notice)</i>			Agent name <i>(if applicable)</i>				
Owner mailing address			Agent mailing address				
City	State	Zip	City	State	Zip		
Owner phone (    ) -	Email		Agent phone (    ) -	Email			

<b>Section 2: Assessment Information and Opinion of Value</b>					
Property address			Legal description or parcel no. <i>(on changed assessment notice)</i>		
City	State	Zip			
Assessment shown on notice – <b>Total</b>			Your opinion of assessed value – <b>Total</b>		
<b>Assessment as shown on notice:</b>			<b>Your opinion of value as of January 1:</b>		
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 .....		
<b>Total</b> .....			<b>Total</b> .....		

<b>Section 3: Reason for Objection and Basis of Estimate</b>
Reason(s) for your objection and basis for your opinion of assessed value: <i>(attach additional sheets if needed)</i>

<b>Section 4: Other Property Information</b>	
List all other personal property you own (in the same municipality) that you are not appealing:	
Description of Personal Property	Assessment
	\$
	\$
	\$
	\$
	\$

<b>Section 5: BOR Hearing Information</b>
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A. If you are requesting that a BOR member(s) be removed from your hearing, provide the name(s): \_\_\_\_\_  
**Note:** This does not apply in first or second class cities.

B. Provide a reasonable estimate of the amount of time you need at the hearing \_\_\_\_\_ minutes.

Property owner or Agent signature	Date (mm-dd-yyyy) - -
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