

ASSESSMENT COMPLAINT - APPLICATION FORM

Complainant's Name: _____

Owner or Interested Person or Party

Mailing Address: _____

Phone: _____ (Work) _____ (Home)

Complaint Related To: Land

Improvements

Other

Legal Description: _____

Roll No.: _____

(Note: A separate application form must be completed for each roll number or complaint)

Property Owner's Name: _____

Fee attached (\$20) Yes No

Complaint is in regard to: (check all those which apply)

- Legal description of a property or business
- Name or address of assessed person or taxpayer
- An assessment
- An assessment sub-class
- The type of property
- The type of improvement
- School support
- Whether the property or business is exempt from taxation

(Note: a fee of \$20 must be attached for each roll number complaint in order for it to be processed and reviewed. If the Assessment Review Board makes a decision in favor of the complainant, the fees paid by the complainant will be refunded.)

<u>OFFICE USE ONLY</u>	
<u>Board Decision</u>	

Cheque Returned: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date Returned: _____	

Authorization (initial)	

Please provide written details as to why you feel the information on the assessment notice is incorrect (eg: if you feel the assessment figures are too high, please provide details for this reasoning) This response must be in sufficient detail to allow the assessor and other persons to respond to you. These *details must be received at least 21 days prior to the hearing date* or the appeal may be denied.

(Use back of form if additional space is required)

Please indicate if you wish to meet with the assessor prior to the Assessment Review Board hearing to discuss your concerns. Yes No

Signature: _____

Date: _____

Please photocopy form if additional copies are required