

Property Tax Appeal Form

For each parcel assessment appealed, a separate form must be filed.

1. Appellant Name: _____
Appellant is a: Natural Person Corporation LLC Public Officer
 Partnership Joint Venture Trust Other _____
2. Appellant Mailing Address: _____ Zip Code _____
3. Appellant Phone: (____) _____ - _____
4. Representative Name: _____ Title: _____
 - a. Mailing Address: _____
 - b. Representative Phone: (____) _____ - _____
 - c. Idaho Attorney License Number: _____
5. Appellant hereby appeals from the decision of the _____ County Board of Equalization dated _____, _____, and mailed on _____, _____ (if known).
6. Exemption Claimed: _____ Exemption Statute: _____
7. Check box if assessment notice is attached as required. Parcel No. _____
8.

<u>Value set by County Board of Equalization:</u>		<u>Appellant's value claim as of January 1:</u>	
Land	\$ _____	Land	\$ _____
Improvements	\$ _____	Improvements	\$ _____
Other	\$ _____	Other	\$ _____
Total Market Value	\$ _____	Total Market Value	\$ _____
9. Basis or reason for the appeal: _____

10. The undersigned attests the contents of this appeal form are correct.

Appellant Signature (or Representative)

Date Signed

Print Name

Title

This appeal must be filed with the County Clerk/Auditor.

See Reverse Side for Instructions

Date mailed or hand-delivered to County Auditor	
Hand-delivered <input type="checkbox"/>	Postmark <input type="checkbox"/>

Instructions

Use this form to appeal a decision of the County Board of Equalization (BOE). A separate appeal form is required for each parcel assessment being appealed.

Important: This appeal form and any attachments must be **filed with the County Clerk/Auditor within 30 days** after the mailing of a decision of the BOE or pronouncement of a decision at hearing. Idaho Code § 63-511.

The following instructions correspond to the numbers on the front side of this form.

1. Please print the full name of the person or entity filing the appeal (Appellant's name).
2. Provide the mailing address of the person filing the appeal. Appellant must keep the Board and the opposing party informed of any changes in mailing address.
3. Provide the telephone number of the person filing the appeal. Appellant must keep the Board and the opposing party informed of any changes in telephone number.
4. Effective July 1, 2021, "A taxpayer has the right to appear or to be represented by another person of his choosing in any hearing or rehearing held on the taxpayer's appeal." Idaho Code § 63-3810A.
5. If available, attach the envelope, or a copy of the envelope, in which the BOE decision was mailed.
6. If issue in the appeal is an exemption, please identify the claimed exemption and the applicable Idaho statute.
7. To ensure the appeal is perfected, a copy of the current assessment notice for the parcel being appealed must be attached. If not available, include a statement noting such.
8. Appellant must specify the total value claim for the parcel; however, it is not necessary to allocate the value between land and improvement components.
9. Enter a summary statement of the reason(s) for the appeal. Attach additional pages if needed.
10. Must be signed by Appellant or Appellant's representative.

If you have any questions, please contact the BTA at **208-334-3354**.