

BOARD OF PROPERTY TAX APPEALS HEARING RECORD

Petition No. _____

County	<input type="checkbox"/> Worksheet Completed	Amended Filing Date
Petitioner's Name	<input type="checkbox"/> Stipulation Filed Prior to Time Board Convened	Date Corrected Petition Received
	<input type="checkbox"/> Stipulation Filed At or After Time Board Convened	Board No.
Petitioner Qualifies to Appeal As <input type="checkbox"/> Owner <input type="checkbox"/> Other Person with Interest in Property	Hearing Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Assessor's Account No.
	Date Petition Received	Property Class
Petitioner's Representative	Defective <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Order Signed
	Defective Notice Date	Date Order Mailed or Delivered
Street Address to Send Notice / Order	Hearing Notice Date	Person that Mailed or Delivered Order
City, State, ZIP Code	Hearing Date	Date Copy to Assessor / DOR
	Decision Date	Date Copy to Tax Collector

APPEAL OF VALUE		APPEAL OF PENALTY		DISMISSAL
Value Under Appeal	Action on Value		Action Taken by Board	Reason for Dismissal
<input type="checkbox"/> RMV	<input type="checkbox"/> Sustain	<input type="checkbox"/> Reduce	<input type="checkbox"/> Sustain	<input type="checkbox"/> Defective
<input type="checkbox"/> MAV	<input type="checkbox"/> Sustain	<input type="checkbox"/> Reduce	<input type="checkbox"/> Waive	<input type="checkbox"/> Late Filed
<input type="checkbox"/> AV	<input type="checkbox"/> Sustain	<input type="checkbox"/> Reduce	<input type="checkbox"/> Reduce	<input type="checkbox"/> Value Requested Higher or Equal to Roll Value
<input type="checkbox"/> SAV	<input type="checkbox"/> Sustain	<input type="checkbox"/> Reduce		<input type="checkbox"/> Lack of Jurisdiction
<input type="checkbox"/> MSAV	<input type="checkbox"/> Sustain	<input type="checkbox"/> Reduce		<input type="checkbox"/> Withdrawn

Present at the Hearing	Motion	Second	Members' Votes
M1			<input type="checkbox"/> Yes <input type="checkbox"/> No
M2			<input type="checkbox"/> Yes <input type="checkbox"/> No
M3			<input type="checkbox"/> Yes <input type="checkbox"/> No
Clerk	Others Attending the Hearing		
Board Appraiser			
Assessor's Representative			
Petitioner			
Petitioner's Representative			

Discussion—Reference to Evidence Presented:

Confidential <input type="checkbox"/> Yes <input type="checkbox"/> No	Tape Reference _____
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